



# **BUNCOMBE COUNTY SOBRIETY COURT PARTICIPANT HANDBOOK**

**28<sup>th</sup> Judicial District**

**60 COURT PLAZA**

**BUNCOMBE COUNTY COURTHOUSE**

**ASHEVILLE, NC 28801**

**PHONE: 828.**

**<https://www.buncombecounty.org/law-safety/community-initiatives/treatment-courts.aspx>**

Revised January 2019

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Buncombe County Sheriff's Office-Sheriff Quentin Miller  
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# **Introduction to the Buncombe County Sobriety Court**

## **What is the Sobriety Court of Buncombe County and when did it begin?**

The Buncombe County Sobriety Court was the first DWI Court in Western North Carolina. This Court was originally designed and implemented in February 2014 as part of the State Court of North Carolina under the direction of Judge Julie M. Kepple. At its inception and for the next 5 years the court was entirely funded by the North Carolina Governor's Office of Highway Safety. In 2017, the North Carolina Governor's Officer of Highway Safety awarded Judge Kepple, "Partner of the Year" for the State of North Carolina. The Buncombe County Sobriety Court has had crucial support from Buncombe County Government, Buncombe County Sheriff's Office, local sober living establishments, as well as many various treatment providers and treatment facilities.

Sobriety Court operates on a TEAM (Together Each Achieves More) concept. The Team is composed of Judge, District Attorney's Office, Law Enforcement, the Public Defender's Office, a Court Coordinator/Case Manager, Probation Officers and Licensed Substance Abuse Treatment Professionals. All Team members work together to support each participant in addressing and combating the substance abuse issues that brought them into the criminal justice system. The Team meets twice monthly in a meeting called pre-court status conference to review the progress of each participant. Also twice monthly, participants attend a court session called a Status Hearing to meet with the Team and receive an update on their progress. The Team follows and complies with all national and state standards and best practices for treatment courts and DWI courts<sup>1</sup>.

## **What is the primary mission of the Buncombe County Sobriety Court?**

The primary mission of Sobriety Court of Buncombe County is to increase public safety and save lives by reducing recidivism of persons with alcohol and drug use disorders. Sobriety Court seeks to accomplish this by facilitating substance use treatment and rehabilitation, providing increased supervision, and requiring participant accountability. The Court strives to return to the community individuals who have addressed substance use issues and have become better equipped to maintain their sobriety, which will provide them a better quality of life, have a positive impact and improve the community as a whole, and increase public safety.

## **Are DWI Courts effective?**

DWI Courts provide an opportunity for early treatment intervention. A study by the National Highway Traffic Safety Administration (NHTSA) found that: (1) repeat DWI offenders who graduated from a DWI Court were up to 65% less likely to be rearrested for a new DWI offense; and (2) all DWI Court participants had a recidivism (relapse) rate of only 15%, whether or not they graduated or were terminated. Similar offenders who did not attend a DWI Court had a recidivism

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<sup>1</sup>Sobriety Court complies with: North Carolina DWI/Drug Court Standards, promulgated by the North Carolina Administrative Office of the Courts; the Adult Drug Court Best Practice Standards, Volume I & II, published by the National Association of Drug Court Professionals (NADCP); Defining Drug Courts: The Key Components, published by the NADCP; and the Ten Guiding Principles of DWI Courts, published by the National Center for DWI Courts (NCDC).

rate of up to 35%.<sup>2</sup> through enhanced supervision, counseling, and treatment, the goal of this Court is to improve the quality of each participant's life and reduce repeat offenses to improve community safety. Graduates will have a solid foundation to build upon for a sober, healthy and productive future.

### **What are the Supervision, Counseling, and Treatment Components?**

First, an Intake and Orientation take place at the Sobriety Court Coordinator's Office. The participant then meets with a licensed substance abuse clinician for a substance abuse assessment, a Risk/Needs Assessment (Level of Service Inventory –Revised (LSI-R)), and the Adult Needs and Strength Assessment (ANSA) to determine the level of care needed to develop a Treatment Plan and to determine which group the participant will be placed.

The Program requires a minimum of fourteen (14) months and consists of the Orientation and Intake and four phases:

- |         |                                     |
|---------|-------------------------------------|
| Phase 1 | Extended assessment                 |
| Phase 2 | Active treatment and early recovery |
| Phase 3 | Relapse prevention                  |
| Phase 4 | Recovery management                 |
| Phase 5 | Sustained Recovery                  |

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<sup>2</sup>An Evaluation of the Three Georgia DUI Courts, U.S. Dept. of Transportation, NHTSA DOT HS 811 450, March 2011.

Orientation Intake, Orientation, Level of Care Screening	<b>PHASE 1</b> <b>60 day minimum</b> Extended Assessment <i>Move from Contemplation to Preparation Stage</i>	<b>PHASE 2</b> <b>90 day minimum</b> Active Treatment <i>Move from Preparation to Action Stage</i>	<b>PHASE 3</b> <b>90 day minimum</b> Relapse Prevention <i>Move from Action to Maintenance Stage</i>	<b>PHASE 4</b> <b>90 day minimum</b> Sustained Recovery <i>Maintenance Stage</i>	<b>PHASE 5</b> <b>90 day minimum</b> Recovery *
<ul style="list-style-type: none"> <li>•Sentencing</li> <li>•Initial meeting with Probation Officer</li> <li>•Baseline Drug Screen</li> <li>•Substance Use Evaluation</li> <li>•LSI-R</li> <li>•Risk/Need Assessment</li> </ul> <p>→</p> <p>Time will vary</p>	<ul style="list-style-type: none"> <li>•Complete jail sentence</li> <li>•Attend bi-monthly court session and remain for entire session</li> <li>•Comply with regular conditions of probation</li> <li>•Submit to randomized Reconnect drug screening</li> <li>•Attend weekly meetings with Coordinator</li> <li>•Abide by 9pm curfew; electric monitor</li> <li>•Attend and participate in all treatment sessions as clinically recommended</li> <li>•Attend a minimum of 2 community recovery meetings per week</li> <li>•Secure primary care physician and meds if required</li> <li>•Enroll in CAM</li> <li>•Maintain suitable housing</li> <li>•Maintain sobriety for final 14 days of Phase</li> </ul> <p>→</p>	<ul style="list-style-type: none"> <li>•Attend bi-monthly court session and remain for entire session</li> <li>•Comply with regular conditions of probation</li> <li>•Submit to randomized Reconnect drug screening</li> <li>•Attend weekly meetings with Coordinator</li> <li>•Attend and participate in all clinically recommended treatment</li> <li>•Attend a minimum of 2 community recovery meetings per week</li> <li>•Maintain suitable housing</li> <li>•Obtain DWI assessment</li> <li>•Develop payment plan for court costs and fees</li> <li>•Maintain medication management</li> <li>•Maintain sobriety for final 30 days of Phase</li> </ul> <p>→</p>	<ul style="list-style-type: none"> <li>•Attend bi-monthly court session and remain for entire session</li> <li>•Comply with regular conditions of probation</li> <li>•Submit to randomized Reconnect drug screening</li> <li>•Maintain office or phone contacts with Coordinator</li> <li>•Attend and participate in all clinically recommended treatment</li> <li>•Attend a minimum of 2 community recovery meetings per week</li> <li>•Enroll in and complete JRC group</li> <li>•Obtain employment or enroll in education program</li> <li>•Maintain regular payments of court costs and fees</li> <li>•Maintain medication management</li> <li>•Maintain sobriety for final 45 days of Phase</li> </ul> <p>→</p>	<ul style="list-style-type: none"> <li>•Attend bi-monthly court session; leave after check-in</li> <li>•Comply with regular conditions of probation</li> <li>•Submit to randomized Reconnect drug screening</li> <li>•Maintain office or phone contacts with Coordinator</li> <li>•Attend a minimum of 3 community recovery meetings per week</li> <li>•Maintain employment or enroll in education program</li> <li>•Maintain regular payments of court costs and fees</li> <li>•Maintain suitable housing</li> <li>•Maintain medication management</li> <li>•Maintain sobriety for final 60 days of Phase</li> </ul> <p>→</p>	<ul style="list-style-type: none"> <li>•Excused from bi-monthly court sessions unless directed to attend</li> <li>•Comply with regular conditions of probation</li> <li>•Submit to randomized Reconnect drug screening</li> <li>•Maintain office or phone contacts with Coordinator</li> <li>•Attend a minimum of 4 community recovery meetings per week</li> <li>•Maintain employment or enroll in education program</li> <li>•Maintain suitable housing</li> <li>•Complete court cost payments</li> <li>•Complete all graduation projects and relapse prevention plan</li> <li>•Maintain sobriety for entire Phase</li> </ul> <p style="text-align: center;"><b>GRADUATE</b></p>

## TREATMENT OVERVIEW

\*Individual treatment plans may determine a need for additional requirements/contact\*

Participant Projects	Ready to begin process	Phase 1 Review	Phase 2 Review	Phase 3 Review	Phase 4 Review
Demonstrated Skills and Knowledge	Understand the process; Capable of participation	Understand personal relationship with substance use; Increase awareness of risk/ problems of use	Identify changes needed in their personal relationship with substance use	Identify supports/ strategies needed to maintain change in their personal relationship with substance use	Sustain healthy lifestyle skills around their personal relationship with substance use

## Phases of Sobriety Court

### Intake and Orientation

- Sentencing
- Intake, NEEDS survey, LSI-R
- Orientation with Coordinator
- Initial meeting with Probation Officer
- Baseline alcohol/drug screen
- Substance Abuse/Level of Care Clinical Assessment/Counselor assignment

### Phase 1 - Extended Assessment

**(Move from Pre-Contemplation to Contemplation Stage of Change)**

#### Goals:

1. Participant will be able to identify their own behavior related to substance use and how that aligns with various models of addiction. Participant will begin to explore their personal relationship with drugs and/or alcohol and where he or she falls in the spectrum of substance use disorders.
2. Participant will actively demonstrate readiness to change by internalizing personal problems related to substance use, using positive change talk and “I” statements in group process.
3. Participant will demonstrate stability with the structure, schedule and accountability of both treatment and supervision within the Court.

**Tasks:**

- Complete jail sentence
- Attend bi-monthly court session and remain for entire session
- Comply with regular conditions of probation
- Submit to randomized Reconnect drug screening
- Weekly meetings with Coordinator
- Abide by 9 pm curfew; electronic monitor
- Attend and participate in all treatment sessions as clinically recommended
- Attend a minimum of 2 community recovery meetings per week
- Secure primary care physician and secure meds if required
- Enroll in Continuous Alcohol Monitoring per judgment
- Remain substance free for final 14 days of Phase
- Participant must be clinically appropriate for phase progression.

**In order to complete this phase, the participant shall understand and verbalize the risk and problems associated with their personal relationship with substance use.**

**Phase 2 – Active Treatment and Early Recovery  
(Move from Preparation to Action Stage of Change)**

**Goals:**

1. Participant will be able to recognize/verbalize changes they need to make in any high-risk patterns and/or behaviors associated with their substance use.
2. Participant will be able to recognize their personal motives for use, situations that trigger the desire to use and verbalize coping skills to avoid use.
3. Participant will develop a personal narrative around their current abstinence that supports their desire to make positive changes in their substance use patterns and behaviors.
4. Demonstrate continued stability within the structure of the program and maintain abstinence for a minimum of 30 consecutive days.

**Tasks:**

- Attend bi-monthly court session and remain for entire session
- Comply with regular conditions of probation
- Submit to randomized Reconnect drug screening
- Attend weekly meetings with Coordinator as directed
- Attend and participate in all treatment sessions as clinically recommended
- Attend a minimum of 2 community recovery meetings per week
- Maintain housing as deemed suitable by Sobriety Court Team
- Obtain sponsor
- Obtain DWI assessment
- Develop payment plan for court costs and fees
- Maintain medication management if required
- Complete required CAM
- Remain substance free for final 30 days of Phase
- Participant must be clinically appropriate for phase progression



**In order to complete this phase, the participant must be able to identify/verbalize changes he/she needs to make in their personal relationship with substance use.**

### **Phase 3 - Relapse Prevention (Move from Action to Maintenance Stage of Change)**

#### **Goals:**

1. Participant will be able to verbalize the meaning of Relapse in terms of patterns and behaviors associated with their relationship with substance use.
2. Participant will develop a Relapse Prevention Plan that: a) supports their definition of both Recovery and Relapse, b) includes “warning signs” to patterns associated with relapse, and c) develops strategies to effectively manage the above.
3. Participant will be able to demonstrate continued stability within the structure of the program and maintain abstinence for a minimum of 45 consecutive days.

#### **Tasks:**

- Attend bi-monthly court session and remain for entire session
- Comply with regular conditions of probation
- Submit to randomized Reconnect drug screening
- Weekly phone contact or office visits with Coordinator
- Attend and participate in all treatment sessions as clinically recommended
- Attend a minimum of 2 community recovery meetings per week
- Maintain Sponsor and step work
- Obtain employment or enroll in education program
- Complete required CAM
- Continue with payment for court costs and fees
- Maintain medication management if required
- Remain substance free for final 45 days of Phase
- Participant must be clinically appropriate for phase progression

**In order to complete this phase, the participant must be able to identify/verbalize and utilize supports to sustain changes in their personal relationship with substance use.**

### **Phase 4- Recovery Management (Sustaining Change and Recovery Skills)**

#### **Goals:**

1. Participant will effectively demonstrate the coping skills necessary to remain abstinent from substance use with decreased structure and support from a formal treatment setting.
2. Participant will actively engage in a process of self-evaluation to identify past problem behaviors and be able to verbalize changes to others.
3. Participant will be able to utilize “action plans” to support changes, model positive coping skills and use assertive communication skills in all aspects of their life.

**Tasks:**

- Attend bi-monthly court session and may leave after check-in with Judge
- Comply with regular conditions of probation
- Submit to randomized Reconnect drug screening
- Maintain weekly phone contact with coordinator or office visits as directed
- Attend and participate in all treatment sessions as clinically recommended
- Attend a minimum of 3 community recovery meetings per week
- Maintain employment or education
- Maintain Sponsor and step work
- Maintain regular payments of court costs and fees
- Maintain suitable housing
- Maintain Medication management
- Remain substance free for final 60 days of Phase
- Participant must be clinically appropriate to graduate.

**In order to complete this phase, the participant must be able to verbalize, “What’s different about my personal relationship with substance use and how I maintain a healthy lifestyle”.**

**Phase 5- Sustaining Recovery  
(Sustaining Change and Recovery Skills)**

**Goals:**

1. Participant will effectively demonstrate the coping skills necessary to remain abstinent from substance use with decreased structure and support from a formal treatment setting.
2. Participant will actively engage in a process of self-evaluation to identify past problem behaviors and be able to verbalize changes to others.
3. Participant will be able to utilize “action plans” to support changes, model positive coping skills and use assertive communication skills in all aspects of their life.

**Tasks:**

- Excused from bi-monthly court sessions unless directed to attend
- Comply with regular conditions of probation
- Submit to randomized Reconnect drug screening
- Weekly phone contact with Coordinator or office visits as directed
- Attend and participate in Prime for Life program
- Attend a minimum of 4 community recovery meetings per week\*
- Maintain Sponsor and complete step work
- Maintain employment and education
- Maintain suitable housing
- Complete court cost payments
- Complete all graduation projects and relapse prevention plans
- Remain substance free for entire phase
- GRADUATION

## **Phase Progression**

For any phase progression, participants must be clinically appropriate and have met clinical obligations to change phases. The Coordinator will evaluate projects, participation in group and individual sessions, time in current phase, drug and alcohol test results, etc. to determine a participant's readiness to move to the next phase.

## **Phase Regression**

At any time during the program, a participant may be moved back to a previous phase based upon the level of care/intervention needed. If a participant is not meeting the requirements for their current phase, they may be phased back.

## **Determination of Level of Treatment, Increase, & Outsourcing**

Licensed clinicians based upon the level of need will determine the participant's level of treatment. Should a clinician determine a participant needs an increased level of care and treatment, including intensive outpatient/inpatient treatment, or a halfway house or recovery residency, a clinician and the Sobriety Court Team will coordinate placement at such a facility. Seeking alternative treatment outside of Sobriety Court is not allowed without prior approval of the clinician and Team.

## **Projects**

Written projects will be given in each phase of treatment. Participants are expected to apply themselves to the best of their ability and will meet with the Coordinator to review each project. The completed assignments will reflect a participant's progress and are an integral part of the treatment process.

## **Graduation**

In order to reach the "Ready to Graduate" status in the program, a participant must meet all previous phase requirements, including completion of all treatment obligations, remaining current with all court and probation fees, attending all required appointments with the Probation Officer, and appearing for all call-in drug screens. Participant must also have no positive UDS, elevated test, dilute test, or suspect test for the entire phase 5.

A major goal of the Sobriety Court Team is to support each participant as he or she progresses through the phases toward graduation from the Sobriety Court. Graduation is an important milestone, providing the participant and the Sobriety Court team an opportunity to reflect on the personal journey each participant has experienced during the program. Participants are encouraged to maintain his or her relationship with the court after graduation as alumni or mentor to other participants.

# Appropriate Behavior While in Sobriety Court

## Honesty

It is the responsibility of the participant to disclose any violation of the terms of probation to their Clinician, Probation Officer, and the Sobriety Court Coordinator. Honesty is a core component of Sobriety Court. Dishonesty will only impede recovery and hold back progression through the phases. Dishonesty of any form such as lying, tampering with or adulterating drug screens, presenting fraudulent documents, etc. will not be tolerated and will subject a participant to substantial sanctions. Defrauding or lying may lead to dismissal from Sobriety Court and/or substantial confinement time. Honesty is essential to successful participation in the Sobriety Court.

## In the Courtroom

Attendance at status conference hearings is mandatory. Court sessions occur bi-monthly. Schedules of Sobriety Court status conference hearing dates are provided by the Coordinator on a regular basis and posted in the office. (Participants are notified of any schedule or date changes in a timely manner). It is the responsibility of the participant to know the dates of court sessions.

**Punctuality is required. Court begins at 3:30p, regardless of when the Judge opens court.** At 3:31p a person is **LATE** and may be subjected to sanction.

It is not appropriate to wear hats, sunglasses, clothes displaying offensive language or advertising drugs or alcohol in the courtroom. Loud and disruptive behavior is unacceptable. Participants are required to remain attentive and not read or sleep in the courtroom. No food or drinks are allowed in the courtroom (except for staff that cannot attend to lunch on that date). All phones should be turned off before entering the courtroom. Guests are not allowed in a court session unless they have permission from the Sobriety Court Team to attend.

When addressed by the Judge, one should respond by speaking clearly and directly. All participants should remain until dismissed unless they are phase appropriate to leave early. The Court will appropriately address violations of courtroom behavior.

## **Buncombe County Treatment Providers- universal procedures that generally apply to each local treatment provider**

- Do not come to group or individual appointments under the influence of alcohol or drugs.
- Groups begin on time. Attendance and participation in the whole group session is required to receive credit. Tardiness is reported to the Sobriety Court Team and sanctions may result.
- Confidentiality in group is required to ensure open discussions and sharing. What is said in group stays in group. Please maintain the confidentiality of everyone in the group.
- Free expression of thoughts and feelings is encouraged in group; however, violence, threats or intimidation are not allowed. Be respectful and attentive to peers. Speak one at a time and listen when peers are sharing. Avoid cross-talking or side conversations.

- Notify the clinician if an emergency or illness arises that might necessitate leaving group early or missing a group. Discuss any situation with the clinician to get approval before leaving or not attending a group or individual appointment.
- Dress code: No skimpy tank tops, short shorts or short skirts. Clothing must cover all undergarments. Clothing with obscene language or advertising alcohol/drugs is not permitted. If a participant comes to group dressed inappropriately, they may be asked to leave. Any missed group are reported to the Team and may result in sanctions.
- Cell phones, laptops, or any electronic devices should be turned off during group and individual appointments.
- It is the responsibility of the Sobriety Court participant to find out what the policy and procedures are for each treatment provider.
- Visitors are not allowed unless approved by the treatment provider.

## **Meeting Attendance, Place of Residence and Leave Requests**

A participant is required to attend all community meetings as assigned. Failure to attend will result in progressive sanctions. Special requests to be excused from meetings will be discussed during pre-court status conference and must be approved by the Sobriety Court Team. Requests to miss any Sobriety Court status conference hearing, group meeting, leave the jurisdiction of the Court (Buncombe County) or stay at a residence other than your primary residence of record must meet the following requirements:

- A. All requests are to be submitted in writing a minimum of two weeks in advance to your probation officer and Sobriety Court Coordinator. Leave Request Forms are available from your probation officer. The form must be completed and returned before the two-week deadline prior to the requested date of leave.
- B. Factors the team will consider when evaluating a leave request include but are not limited to:
  - a. Compliance with Treatment Plan;
  - b. Compliance with probation requirements;
  - c. Recent drug and alcohol screen results; and
  - d. Compliance with financial responsibilities and any payment plans.

If a request is granted, a participant must report to their Probation Officer for a drug test the day following the end of the leave or as directed by their Probation Officer. In the event of a sudden illness and/or death of an immediate family member, contact the Sobriety Court Coordinator and your Probation Officer for possible leave without the leave request paperwork. (For the purposes of this manual, “immediate family” includes spouse, children, siblings, parents, and grandparents only.) Note: If you are more than \$500 in arrears on your payments, a Leave Request may be denied.

If a community recovery meeting, drug screen, or appointment is missed and no prior consent had been obtained, a participant is required to report to their Probation Officer by 9 a.m. the following day or as directed by their Probation Officer. If an appointment is missed during the weekend, reporting in the following Monday by 9 a.m. is required or as directed by their Probation Officer. All unexcused absences are subject to sanctions to be determined by the Sobriety Court Team.

A participant is required by Sobriety Court to stay at their primary residence on record every night unless permission has been obtained to be away from that residence for an overnight. Leaving the jurisdiction of the Court (Buncombe County area) for any reason requires prior notice and approval by the Probation Officer.

A participant is required to be accessible by phone by any member of the Sobriety Court Team at all times. Failure to respond to a message in a reasonable period of time (2 hours) may result in sanctions by the Court. If a cell phone is lost or disconnected, and/or the participant is unreachable for any reason, the participant should immediately notify the Probation Officer.

A firm appointment with a clinician, Probation Officer and Coordinator must be kept. If a cancellation of the appointment is required, at least 24 hours advance notice must be given. Failure to notify treatment providers, Probation Officers and the Sobriety Court Coordinator of cancellation of the appointment at least 24 hours in advance may result in a sanction.

## **Inclement Weather**

In the case of inclement weather, please check WLOS.com for information as to whether the Buncombe County Court House is open.

### **BUNCOMBE COUNTY COURTHOUSE:**

If the courthouse is closed, any scheduled status conference hearings, Probation or Coordinator appointments, or other matters taking place in the courthouse will be rescheduled.

Sobriety Court Coordinator—Jillian Davis: 828.250.4653

Probation Department—Main office: 828.232.5059  
Officer's cell—Kalla Hughley: 828.772.7351

### **TREATMENT PROVIDER:**

Go to the treatment provider's website or call your treatment provider's main office number. If group or individual appointments are cancelled, there will be a message stating so. If open and still having group and/or individual appointment there will be, no message and you should attend.

## **Finances**

As a condition of participation in Sobriety Court, each person is responsible for the cost of treatment and supervision. Therefore, seeking and maintaining employment is a condition of continued participation. Participants who are employed are less likely to use alcohol and/or other drugs when they are working, and it is known that those who work have a higher degree of self-esteem due to being productive. If a participant has a documented disability that limits or prevents employment, the Sobriety Court Team will address it on a case-by-case basis.

There are no entrance fees for Sobriety Court. Sobriety Court participants are not required to pay for Continuous Alcohol Monitoring (CAM), as it is paid for by the Sobriety Court. Each participant

must pay for probation and court costs assessed in their individual cases, and these costs range depending on the participant's court case. Treatment providers will work with participants on their costs for their programs and participants are required to stay current with their treatment providers and sober living homes if appropriate.

If a participant is unable to meet their financial obligations, it is their responsibility to discuss the situation with the Coordinator and Probation Officer to develop a solution. If a person should, at any time, accrue an overdue amount of \$500.00 or more, they will be placed on a weekly payment plan. Please note that any overdue amounts or failure to make payments as directed will subject a participant to appropriate sanctions by the Court.

Note: If you are more than \$500 in arrears on your payments, any Leave Requests may be denied.

## **Medication**

**A participant is responsible for all substances put into their body.**

Do not use internal or external products containing alcohol such as cough/cold syrup, hair tonic, perfume, medicinal alcohol, after-shave lotion, mouthwash and flavoring extracts (lemon, vanilla, etc.). It is the participant's responsibility to read the labels on products and avoid the consumption of alcohol in any form. Do not eat items that contain poppy seeds.

It is the participant's responsibility to inform any medical professionals of his or her status in Sobriety Court and what substances are not allowed for consumption. Participants should take the Medical Form (available from the Sobriety Court Coordinator) to any visit to a doctor's office. Once the doctor has completed the form, the form and a copy of any prescriptions should be turned in to the Coordinator. All written prescriptions must be shown to the participant's Probation Officer or Coordinator before filling. No prescription drug of any kind should be taken without prior notice and approval. No prescription drug is to be taken without the approval and prescription of a physician. Failure to follow these requirements will result in a sanction and a possible probation violation from the court.

**Psychiatric and Adult Attention Deficit medications:** Medications required to treat mental health issues are allowed and encouraged, if needed, for participant's stability in the Court. In order to take these medications, when entering the program, the participant must have completed a psychiatric assessment/evaluation by a qualified physician such as a psychologist or psychiatrist within the past six months and provide a copy of this evaluation and explanation of diagnosis to the Sobriety Court Coordinator. For participants that are already in the program and need to be evaluated for psychiatric medications, the standard procedure for obtaining prescription medications applies. All participants are required to provide a signed Release of Information Form to the Coordinator for the prescribing physician in order to coordinate care and services.

At the end of this handbook are a list of prohibited substances and a list of medications that can be taken without prior approval. These lists are only a guide and not meant to be all-inclusive. If a participant has any concerns, they should contact the Coordinator before taking medications of any kind.

## Drug Testing (Policies and Procedures)

It is the expectation of this Court that each participant will remain abstinent from all mood-altering substances throughout the course of their involvement with the Sobriety Court, including post-graduation if the probation term has not expired. Frequent and random drug testing is used to monitor a participant's compliance. Often a person may not be able to stop using drugs and alcohol immediately, and recovery will not occur overnight; however, any use of illegal drugs will result in sanctions. All participants will be held accountable for everything they put in their body. This is not intended as punishment, but serves to encourage abstinence and accountability. The ultimate goal of drug testing is to provide accountability and confirmation of the progress towards recovery. Honestly admitting use prior to the drug screen will be taken into account in the sanctioning process. Conversely, not admitting to, and/or denying new use after a positive result on a drug screen may result in a more severe sanction.

A participant may be asked to submit a sample at any time by any member of the Sobriety Court Team. They must be prepared to submit the specimen at the time of the request to whomever asks, be it a Clinician, a Probation Officer or the Coordinator. Failure to appear for a drug test, refusal to provide a sample or submit to a random test will be grounds for a sanction and a possible probation violation. Tampering with or diluting a drug screen may result in the issuance of a severe sanction and/or a probation violation and may be grounds for dismissal from the Buncombe County Sobriety Court.

**Reconnect:** All Participants are required to participate in the Reconnect random drug testing system. Participants must have access to a phone capable of mandatory daily calls to the Reconnect system. Written instructions are provided by the Sobriety Court Coordinator during the orientation meeting. Appearance for random UDS is mandatory. Failure to appear for a random test by the time specified is a violation of probation and will be addressed by the Court as a sanctionable offense. If a random call-in drug screen is missed and no prior consent had been obtained, a participant is required to report to their Probation Officer by 9 a.m. the following business day or as directed by their Probation Officer.

Participants must provide a testable sample\*, one that is not "dilute" or "tampered with." "Dilute" urine tests are classified as those tests having a reading indicating a urine creatinine level of less than 20 mg/dL (Creatinine is the substance in urine resulting from muscle breakdown). A sample with a Creatinine level more than 400 mg/dL will be considered abnormal with a "high creatinine level." In a diluted urine sample, it is possible that drugs will still be present in the urine but be below the cut-off level of the drug assay. A "tampered" sample is one where the urine is in a condition that is not testable due to intentional interference or other chemical reaction. Presenting a sample that is either dilute, tampered, or with a high creatinine level is a sanctionable offense. Any attempt to provide urine that is not the participant's urine is a serious offense that may result in significant sanctions or dismissal from the program.

\*Definition of an elevated, diluted and suspect test: An Elevated test is a test that shows the presence of EtG between 200 and 499 ng/ml (500 or greater is a positive). A Dilute test is a test where creatinine is below 20 ng/ml. A Suspect test is a test showing the presence of EtG between 100 and 199 ng/ml and significant evidence of attempted dilution.



## **How can participants take control to avoid dilute screens?**

- Call in and test early in the morning- urine is most concentrated first thing in the morning, so dilution is less likely to occur if the participant tests early. Once testing is completed for the day, a participant may resume normal fluid consumption.
- Work on developing a healthier diet. Consume protein rich foods to elevate creatinine levels. According to Quest Diagnostics, a diet that is too low in protein can cause lowered levels to show in urine testing.
- If possible, exercise regularly to increase lean muscle mass.
- If concerned, request urinary tract infection testing from a physician. Urinary tract infections lower creatinine levels by causing the bladder to become inflamed, blocking proper urine output.
- Consult physician regarding any medications being taken.

### **Upon the request for a drug screen:**

- A participant indicates either a denial or admission to alcohol and/or drug use. Honesty is a crucial component for recovery and participation in Sobriety Court. The Court may favorably consider self-disclosure-of- use a mitigating circumstance when sanctions are imposed.
- The only people allowed in the testing area at the time of administration of the test are the participant and the individual overseeing the collection of the sample.
- A sample is to be submitted within two (2) hours of request. Failure to produce a sample will likely result in a sanction.
- Purses, coats, bags, etc. are not allowed in the testing area.
- Shirtsleeves should be rolled up to the elbow and removal of any additional clothing item may be made to ensure the validity of a specimen.
- The test cup must be filled to a minimum 1/3 level to be adequate for testing.
- Collection of urine sample will be observed. In the event a drug screen cannot be observed, a temperature strip will be used to ensure sample integrity. If a urine sample does not provide an acceptable reading on the temperature strip, the participant will be required to provide a valid sample before leaving the collection site.
- Use of an artificial device or substance of any type to alter the test will result in significant sanctions, which may include termination from the program.
- Failure to comply with any of the above guidelines, probation policy and procedures or refusing to provide a urine sample is considered a sanctionable offense.

If a participant provides a sample that tests positive or dilute, a participant may request the sample to be sent to an independent lab for a confirmation test. If the independent lab confirms the positive or dilute result, the cost of the confirmation will be added to the participant's probation fees.

The EtG (Ethyl Glucuronide) Test can detect the ingestion of alcohol for a considerable time period after consumption. This technology is used to monitor participants' compliance. Any test with an EtG level 500 ng/mL or above is a "positive" drug screen and subject to sanction.

Positive, elevated, or diluted tests will delay eligibility for phase progression or graduation.

# **COMPLIANCE AND VIOLATIONS**

## **Probation**

Participation in the Buncombe County Sobriety Court is a condition of a probationary sentence. If conditions of a sentence or any conditions of Sobriety Court Agreement (or any rules outlined in the Handbook and Program Manual) are violated, a violation report may be filed, resulting in the participant appearing before a Judge for the probation violation allegations. A participant has the right to admit or deny the violation. If they admit, the Court will act on the violation at that time. If they deny, a hearing will be scheduled on a future Court date. The Sobriety Court Team may make a recommendation to the presiding probation violation Judge regarding sanctions (see below). In determining the recommendation, the Sobriety Court Team may take into consideration whether the participant took responsibility by admitting the violation. The Probation Court is not bound by this recommendation and can increase/decrease the sanction or designate an entirely different sanction. The Judge does not participate or have any input into the recommendation to be made by the Team at the hearing. The Judge considers each case separately and always will provide the participant an opportunity to be heard. In accordance with best practices the presiding Probation Court Judge will not be the presiding Sobriety Court Judge.

Depending on the nature of the allegation, a petition for revocation of probation may or may not be accompanied by a warrant for arrest. The determination for whether an arrest warrant is issued is based on the seriousness of the violation, community safety, prior history of sanctions and appropriateness based upon participant's compliance. The issuance of a probation warrant is in the sole discretion of the Probation Officer with input from the Sobriety Court Team.

## **Incentives and Rewards**

The Buncombe County Sobriety Court Team recognizes compliance and good behavior as a critical factor to a successful recovery. Participants are provided incentives and receive rewards for active participation, consistent attendance and successful compliance with Court conditions. Incentives can include, but are not limited to:

- Clapping
- Fish bowl gifts
- Gift certificates
- Goods from donors.

## **Sanctions**

All conditions of the Sobriety Court Participant Agreement that are signed on the day of orientation and all rules in this handbook are conditions of a probationary sentence. Failure to comply with those conditions may subject a person to probation revocation. Sanctionable offenses include but are not limited to:

- Dilute urine sample
- Tampered-with urine sample
- Positive drug screen on urine sample

- Missed random drug screen
- Attempt to falsify drug screen
- Missed group meeting
- Missed appointment
- Missed status conference
- Failure to notify cancellation of any appointment
- Late for group meeting
- Late for status conference
- Failing to document 12-step meeting
- Failing to report as directed
- Traffic citation
- Arrest for a new offense
- Leaving the jurisdiction of court without permission
- Moving residence without permission
- Absconding
- Failure to make payments as directed
- Incorrect contact information (must have a working phone number with voicemail set-up)

The Judge will impose appropriate sanctions if there are violations of the Sobriety Court guidelines. Sanctions can include but are not limited to:

- A verbal or written reprimand from the Judge
- Additional community service hours
- Increased reporting to Probation and/or the Sobriety Court Coordinator
- Court attendance with Presiding Sobriety Court Judge
- Home confinement
- Book reports and papers
- Curfew
- Increased testing
- Electronic monitoring
- Jail time
- Dismissal from Sobriety Court program

The goal in administering sanctions is to encourage compliance and accountability with the conditions of the Court and to assist a participant in progressing in their recovery. As part of this goal, if a sanction is imposed, a clinician may increase or alter a participant's accountability, structure, and/or counseling by submitting a Revised Treatment Plan.

## **Dismissal from Sobriety Court**

The Buncombe County Sobriety Court is committed to providing each participant an opportunity to maintain a sober and drug free lifestyle in an environment conducive to achieving this goal. Sobriety Court wants each participant to succeed, and considers dismissal only as a last resort. The goal is to help participants to help themselves. Continued inclusion in this Court is contingent on compliance with the guidelines and regulations. Nevertheless, not everyone who enters Sobriety Court will be committed to maintaining recovery and compliance with Court conditions. The Team may determine that dismissal of a participant for non-compliance is the most appropriate action for the success of all other participants. Serious violations or continuous violations will subject a participant to dismissal from the Court.

Following are a few examples of non-compliance that could result in dismissal:

- Threats of, or violence towards, peers, Probation Officers, Clinicians or Sobriety Court Team
- Committing a new criminal offense
- Altering or tampering with a drug screen
- An accumulation of violations and continuance of non-compliance with Court guidelines
- An inability or unwillingness to remain clean and sober
- Victimizing other participants in the program
- Driving while not licensed to do so

## **Absconding**

If a participant absconds, (quits; runs away; flees; or stops reporting as required) for any reason, the participant will be subject to serious sanctions. Instead of running when a problem arises, the participant should bring the problem to the attention of a member of the Sobriety Court Team who will work with them in an attempt to find a solution. Absconding only complicates the situation and may lead to dismissal from the Court and the possible revocation of the balance of probation.

## **Employment: Retail Alcohol Sales and Service Industry**

Sobriety Court participants shall not enter nor frequent bars or any other business whose primary purpose in sales is alcoholic beverages; however, employment in restaurants and bars may be permitted, provided a participant maintains recovery and program compliance. Failure to maintain recovery and program compliance will result in the Court prohibiting employment at that location.

# **ROLES OF THE TEAM MEMBERS**

## **The Judge**

The Sobriety Court Judge is aware of the significant impact of substance abuse on the Court system, the lives of participants and their families, victims of criminal behavior, and the entire community. The Judge is committed to the overall Sobriety Court concept and Court goals and works as the Team Leader to encourage participant success. One of the roles of the Sobriety Court Judge is to work with the Sobriety Court Team and treatment providers in developing protocols and procedures for participant success.

During status conference hearing in the courtroom, the Judge will personally address and interact with each participant while monitoring their progress and accountability with Court requirements.

The Judge has many other daily responsibilities, which require judicial attention. Direct contact with the Judge or her/his office staff is not permitted. The Judge cannot give legal advice. Information from the participant or a family member or friend must go through a clinician, Probation Officer or the Sobriety Court Coordinator. The Judge attends non-court meetings with other Team members not only to review and evaluate participant progress, but also to evaluate appropriate alternatives. In addition, the Judge is an advocate for the Court by creating community interest and identifying community resources of value to participants to enable them to achieve their goal of improving the quality of their life.

## **The District Attorney's Office**

The District Attorney's Office determines a person's eligibility for Sobriety Court and without their cooperation, consent and agreement a person is not afforded the opportunity to participate in Sobriety Court. This office, along with the eligible participant and their attorney, must agree that Sobriety Court is a suitable component for any negotiated plea agreement accepted as a part of the sentence imposed by the Judge.

Someone from the District Attorney's office attends pre-court conference meetings to monitor participant progress through the Court and to recommend appropriate sanctions, incentives and rewards for participants.

During participation in this Program, it is not appropriate to seek advice or legal counsel from the District Attorney's office. In the event of a probation violation hearing, the District Attorney's office will advocate the State's position which may be adverse to the participant's position. The District Attorney will make recommendations to the Court regarding any sanctions that may be imposed and/or to the person's continued participation in the Program.

## **The Public Defender**

The role of the Public Defender is to evaluate the participant's legal situation and protect his/her legal rights and to ensure that the Court meets all due process requirements. Additionally, the Public Defender should provide advice to assist in determining legal options, treatment options, Court conditions and potential sentencing outcomes.

When a person agrees, at the time of their sentencing, to enter Sobriety Court, they have the right to legal counsel. If, for any reason, a person is brought before the Court for violating the terms of the Sobriety Court Agreement or Probation, they will be informed of the right to legal counsel and a hearing. Like the District Attorney, the Public Defender also contributes by informing clients, peers, colleagues and other members of the legal community about the multiple benefits attributable to the Sobriety Court.

## **The Sobriety Court Coordinator/Case Manager**

The Sobriety Court Coordinator, referred to in this document as the Coordinator, is the administrator and court case manager of the Buncombe County Sobriety Court, and along with the District Attorney's office reviews each case to determine who is eligible for Sobriety Court. The Coordinator also facilitates the communication and contact between all members of the Sobriety Court Team.

The Coordinator will meet with a participant when necessary involving any aspect of their Sobriety Court participation. Presiding over and attending bi-monthly pre-court status conferences with the Sobriety Court Team is another important aspect of this role. The Coordinator also keeps the Judges informed on the most updated information regarding each participant. In addition, the Coordinator's role, along with the Judge, is to inform, update and educate the public about the Sobriety Court.

The Sobriety Court Coordinator also acts as the Sobriety Court Case Manager. This dual role also assists with maintaining participant's information in the case management database, creating and revising any forms, organizing any necessary paperwork, and other general office management. The case manager also gathers all treatment and any other necessary documentation to provide to the team for staffing purposes. The case manager also records and distributes messages to the Team, and assists the general public with any issues related to the Buncombe County Sobriety Court.

## **The Probation Officer**

The Probation Officer's primary responsibility is supervising and monitoring a participant's accountability in Sobriety Court. Each participant is required to meet with the Probation Officer a minimum of once a month. If warranted, the Probation Officer can at any time increase the frequency of these monthly meetings. As a condition of participation in Sobriety Court, the Probation Officer has the authority to visit a participant anytime, day or night, at home, at school or at work. During these visits that person may be subject to drug and alcohol screens. The probation officer attends pre-court status conferences to inform the Judges and other Team members of the person's progress in the Court. Probation officers also monitor participant's financial obligations and report these to the court. When violation reports are filed by probation officers they also attend all related violation hearings.

## Law Enforcement

Sobriety Court would not be possible without the support of law enforcement. Local law enforcement accepts the concept of Treatment Courts as being the best alternative to reducing repeat DWI and drug offenses. Participant supervision and monitored compliance with Court conditions is essential to continued law enforcement support. Law enforcement may be utilized to provide surveillance to ensure participant accountability with Court conditions. A designated law enforcement officer attends pre-court status conferences.

## Treatment Providers/Clinicians

A clinician from one of the various treatment providers meets with each participant after their orientation to complete a clinical assessment of the participant to develop an individualized and comprehensive treatment plan. The participant is also assigned a group day and time and a clinician at this time. The clinician will review any medications, health issues, or concerns with the participant and help them to understand the requirements of the treatment providers program. The assigned clinician is responsible for recommending treatment plan modifications as needed to the Sobriety Court Team. Each clinician reports necessary information in writing to the Sobriety Court Coordinator at least 24 hours prior to pre-court status conferences to keep everyone on the team informed of each participant's progress in the program (participation in group, attitude, community recovery meetings, progress, etc.).

## COMMUNITY RESOURCES

Buncombe County is very fortunate to have a strong recovery community. The following is a list of local resources. For current telephone numbers, e-mail or addresses consult the telephone book or internet. See your treatment clinician or the Court Coordinator for complete listing.

### **Recovery Community:**

<b>Alcoholics Anonymous</b>	828.254.8539	<a href="http://www.ashevilleaa.org">www.ashevilleaa.org</a>
<b>Narcotics Anonymous</b>	1.866.925.2148	<a href="http://www.wncna.org">www.wncna.org</a>
<b>Cocaine Hotline</b>	1.800.905.8666	
<b>Drug Helpline</b>	1.800.378.4435	

### **Hospitals:**

<b>Mission Hospital</b>	282.213.1111
<b>Park Ridge Hospital</b>	828.684.8501

### **Other Needs:**

<b>Justice Resource Center</b>	828.250.6401
<b>Family Justice Center</b>	828.250.6900
<b>Pisgah Legal Services</b>	828.253.0406
<b>Homeward Bound</b>	828.252.8883
<b>Asheville Housing Authority</b>	828.258.1222
<b>Salvation Army</b>	828.253.4723
<b>United Way</b>	828.255.0696
<b>Eblen Charities</b>	828.255.3066

**Crisis Lines:**

<b>OurVoice</b>	828.255.7575 (Text VOICE or VOZ to 85511)
<b>HelpMate</b>	828.254.0516
<b>Child Abuse Reporting</b>	828.250.5900
<b>National Suicide Prevention Hotline</b>	1.800.273.8255

**MEDICATIONS TO AVOID**  
**(Do not take these medications without valid prescription)**

**THIS LIST IS NOT INTENDED TO BE ALL INCLUSIVE.  
ALL MEDICATIONS MUST BE CLEARED THROUGH YOUR COORDINATOR OR  
PROBATION OFFICER PRIOR TO TAKING.**

Note: Drug Name® = Brand Name

**A**

Actiq® (fentanyl)  
Adipex-P® (phentermine)  
Adderall® (dextroamphetamine + amphetamine)  
alcohol (ethanol, ethyl alcohol) or anything containing ethyl alcohol including  
“Alcohol-Free” beer. Many over-the-counter liquid preparations such as cough syrups,  
cold medications, mouthwash, body washes or gels, etc. may contain alcohol and may  
produce a positive EtG (alcohol) urine drug screen. It is YOUR responsibility to read the  
labels on these preparations, or ask a pharmacist to make sure the products you use do  
not contain alcohol.  
alprazolam (Xanax®) Ambien® (zolpidem)  
amphetamine or any product containing amphetamine or any of its derivatives such as  
dextroamphetamine (Dexedrine®), benzphetamine (Didrex®), methamphetamine  
(Desoxyn®, speed, meth, ice, crystal, etc.), DOM, de- or di-methoxyamphetamine and  
others.  
Ativan® (lorazepam)  
atropine or any product containing atropine AtroPen® or any other product containing atropine

**B**

barbiturates, including but not limited to butabarbital (Butisol®), butalbital (Fiorinal® and  
others), mephobarbital (Mebaral®), phenobarbital (Nembutal®, yellow jackets,  
(Donnatal®), secobarbital (Seconal®, red devils, Xmas trees, rainbows), thiopental  
(Pentothal®) and any other barbiturate.  
Bontrill® or Prelu-2® (phendimetrazine tartrate)  
bufotenin (dimethylserotonin)  
buprenorphine (Suboxone®, Zubsolv®) buspirone  
Butisol® (butabarbital)

**C**

carbamazepine (Carbatrol®) Carbatrol® (carbamazepine) carisoprodol (Soma®) chloral  
hydrate chlorazepate (Tranxene®)  
CBD



chlordiazepoxide (Limbitrol®, Librax®) chlorzoxazone (Parafon Forte®) clonazepam (Klonopin®)

cocaine

codeine or any medication containing codeine, such as cough syrups (Robitussin A-C®, Tussin A-C®, and others.)

Creatine supplements

## **D**

Demerol® (meperidine)

Desoxyn® speed, meth, ice, crystal, etc. (methamphetamine)

Dexedrine® (dexies or hearts; dextroamphetamine, or any product containing dextroamphetamine)

DET (diethyltryptamine, and all other tryptamine derivatives, such as DMT dimethyltryptamine and others)

dextromethorphan (DM) and any product containing this substance diazepam (Valium®)

Didrex® (benzphetamine) diethylpropion

Dilaudid® (hydromorphone) diphenoxylate (Lomotil®) DMT (dimethyltryptamine)

Dolophine® (methadone)

Donnatal® (phenobarbital + atropine + hyoscyamine +scopolamine) droperidol (Inapsine®)

Duragesic® (fentanyl) Duramorph® (morphine)

## **E**

Empirin® with any amount of codeine Empracet® with any amount of codeine

ephedrine and any product containing this substance, including ephedra products Equagesic® (meprobamate + aspirin)

eszopiclone (Lunestra®)

## **F**

fentanyl (Sublimaze®, Actiq®, Durogesic®, Duragesic®, Fentora®, Onsolis®, Instanyl® and others)

Fentora® (fentanyl)

Fiorinal® (butalbital, aspirin, caffeine) and any with codeine. flurazepam

## **G**

GHB (gammahydroxybutyric acid)

## **H**

Halcion® (triazolam) hashish or hashies

heroin (diacetyl morphine, E, horse, dope, smack, junk)

hydrocodone and any products containing hydrocodone (Vicodin® , Lorcet®, Lortab®, Tussionex® , Zydone® as examples, and many others)

hydromorphone (Dilaudid) hydroxyzine (Vistaril®) hyoscine

## **I**

ibogaine

Inapsine® (droperidol)

inhalants, such as paint, glue, Freon, or any substance under pressure not for medicinal use.

Instanyl® (fentanyl) Ionamin® (phentermine)

**K**

Ketalar® (ketamine) ketamine (Ketalar®) Klonopin® (clonazepam)

**L**

laudanum (tincture of opium) levorphanol

Librax® (chlordiazepoxide + clidinium) Limbitrol® (chlordiazepoxide + amitriptyline)

Lomotil® (diphenoxylate + atropine) Lorazepam (Ativan®)

Lorcet®, Lortab® (hydrocodone + acetaminophen) LSD (lysergic acid diethylamide, “acid”)

Lunesta® (eszopiclone)

**M**

marijuana (pot, grass, Mary Jane, etc.) Mebaral® (mephobarbital)

Melfiat® (phendimetrazine)

meperidine and any other drug products containing meperidine meprobamate (Miltown®, Pathibamate®, Equagesic®, Equanil® and others ) methadone (Dolophine®, Methadose®)

Methadose®(methadone) methocarbamol (Robaxin®, Robaxisal®) methylphenidate (Ritalin®)

midazolam (Versed®) Miltown® (meprobamate) mescaline

MDMA (methylenedioxymethamphetamine)

morphine and any other drug products containing morphine or its derivatives and combinations (Duramorph®, Roxanol® and others)

**N**

naloxone (Suboxone) nalbuphine (Nubain®)

Nembutal® (pentobarbital, yellow jackets) Norflex® (orphenadrine)

Nubain® (nalbuphine)

**O**

Onsolis® (fentanyl)

Opana ER® (oxymorphone) opium or any of its constituents orphenadrine ( Norflex®) oxazepam  
oxycodone (Oxycontin® and other products containing oxycodone such Percobarb®, Percocet®, Percodan®)

Oxycontin® (oxycodone and other products containing oxycodone) oxymorphone (Opana ER®)

**P**

Parafon Forte® (chlorzoxazone) Pathibamate® (Meprobamate) PCP (phencyclidine)

pentazocine (Talwin® ) Pentothal® (thiopental)

Percobarb®, Percocet®, Percodan® (oxycodone) peyote

phendimetrazine (Bontril®, Melfiat®, Prelu-2®, Plegine®) Phenergan® (promethazine)

Plegine® (phendimetrazine) Prelu-2® (phendimetrazine)

paregoric (camphorated tincture of opium) propantheline

prochlorperazine promethazine (Phenergan®) psilocybin, psilocin pseudoephedrine (Sudafed®)

**R**

Restoril® (Temazepam) Ritalin® (methylphenidate)

Robaxin®, Robaxisal® (methocarbamol)

Robitussin A-C®, Tussin A-C® or any cough syrup containing codeine Roxanol® (morphine)

Roxicet® (oxycodone + acetaminophen) Roxicodone® (oxycodone)

Ryzolt® (tramadol)

**S**

Seconal® (secobarbital, red devils, XMAS trees, rainbow) scopolamine  
Sonata® (zalepon) Soma® (carisoprodol) Stadol® (butorphanol) Sublimaze® (fentanyl)  
Suboxone® (buprenorphine + naloxone)

**T**

Talwin® (pentazocine) temazepam (Restoril®) tramadol (Ryzolt®, Ultram®) trazadone  
(Desyrel®) triazolam (Halcion®) Tranxene® (chlorazepate) Trazadone® (desyrel) Tussionex®  
(hydrocodone) Tylox® (oxycodone)

**U**

Ultram® (tramadol)

**V**

Valium® (diazepam) Versed® (midazolam)  
Vicodin®, Vicoprofen® (hydrocodone) Vistaril® (hydroxyzine)

**X**

Xanax® (alprazolam)

**Z**

zalepon (Sonata®) zolpidem (Ambien®)  
Zubsolv® (buprenorphine + naloxone) Zydone® (hydrocodone)

Also prohibited is any product labeled “not intended for human consumption,” intended to be smoked, ingested or injected for the purposes of “getting high.” Spice and K2 are examples of these products. There are different kinds of Spice such as K2 Summit, K2 Ultra, and K2 Blonde and others. There are even newer versions of Spice named K2 Sky Herb, K2 Orisha, and K2 Thai. These products contain herbal mixtures with cannabinomimetic compounds added to the mixture.

Another group of products known as ‘Bath salts’, but not intended for bathing, is also prohibited. Such products contain chemicals similar to amphetamines. They are often called “bath salts” but are also sold under names such as Ivory Wave, Purple Wave, Red Dove, White Dove, Blue Silk, and Zoom. Some have also been labeled as plant food.

All of these products are prohibited from human use by Sobriety Court participants and are classified by DEA and GBND as class I, not for human use. These products are found in head shops, gas stations, smoke shops and other convenience stores.

The use of any product that attempts to simulate the effect or activity of any illegal or controlled substance is also prohibited for use by a participant in this program.

## **MEDICATIONS THAT MAY BE TAKEN**

### **OVER-THE-COUNTER (OTC) MEDICATIONS THAT MAY BE TAKEN TO RELIEVE PAIN:**

acetylsalicylic acid (Aspirin® , Ecotrin® , Bufferin® )  
acetaminophen (Tylenol® )  
ibuprofen (Motrin® , Advil® , Medipren® )  
naproxen (Aleve® )

There are many other products that contain combinations of the above ingredients, and some of those combinations contain ingredients that you are not allowed to take. You must read the ingredient list of all drugs that you may take to be sure that you are not taking a drug that is not allowed. If in doubt, ask your counselor or a pharmacist.

### **OTC MEDICATIONS THAT MAY BE TAKEN TO RELIEVE ALLERGY SYMPTOMS:**

cetirizine (Zyrtec® )  
chlorpheniramine (Chlor-Trimeton® )  
clemastine (Tavist® )  
diphenhydramine (Benadryl® )  
fexofenadine (Allegra® )  
loratidine (Claritin® )

These drugs are also available in many combinations with other drugs, some of which should not be taken. You must read the ingredient list of all drugs that you may take to be sure that you are not taking a drug that is not allowed.

### **INGREDIENTS IN OTC DRUGS THAT MUST BE AVOIDED:**

Dextromethorphan, (DM)  
Pseudoephedrine  
Ephedrine

Abuse of any drug, that is, taking a drug in higher quantities or more often than listed on the dosing information supplied with the drug, is strictly prohibited.

Other medications may be appropriate to take, but you must check with your Counselor prior to taking them. You must notify your Counselor of all medications taken and a copy of all prescriptions must be provided to your Counselor before they are filled.

**ANY MEDICATION USED MUST BE TAKEN ONLY ACCORDING TO THE DIRECTIONS GIVEN IN THE DRUG PACKAGE INSERT OR BY A PHYSICIAN'S WRITTEN ORDER.**

