



Participant Handbook

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CSI is open 365 days a year, you may be required to provide on Holidays.

Drug Testing Number: **(406) 896-4914**

Your UA # _____

Testing hours

Weekdays 7:30am-10am

Weekends 8:30am- 10am

Holidays 8:30am- 10am

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Court appearances: According to phase

1 st Wednesday of the month: Phase 1 & 2
2 nd Wednesday of the month: Phase 1 & 3
3 rd Wednesday of the month: Phase 1, 2, & 5
4 th Wednesday of the month: Phase 1 & 4
(If there is a 5 th Wednesday in the month there will be no court)

Welcome

to Yellowstone County STEER Treatment Court. This handbook will provide you with a description of what is expected of you as a STEER Court participant. You are encouraged to share this handbook with family and friends. Although the program requirements may seem overwhelming at first, once a routine is established participants do very well and see tremendous benefits in your lives. Three simple rules will ensure success:

- 1. Be Honest**
- 2. Show Up**
- 3. Do Your Best**

Rules

1. No smoking in or around the courthouse.
2. You must approach the bench with the utmost respect for the Judge.
3. All cellphones must be turned off and placed into the designated basket upon entry into the courtroom.
4. Backpacks must be placed in the back of the courtroom.
5. Attend all scheduled court ordered appearances, individual and group counseling, educational sessions, doctor appointments, recovery support meetings, and any other treatment requirements.
6. No talking during court proceedings.
7. If you do not appear on your regularly scheduled court date and you are not excused from court, the Judge will issue a Bench Warrant.
8. You must follow all rules of probation as outlined by your probation officer including, but not limited to: travel permits, work and home change approval, and association requests.
9. You must notify your probation officer immediately prior to any change in residence and employment.

10. You must receive permission from probation and treatment team to leave Yellowstone County. You must be approved by your counselor, Judge, and probation or supervising officer.
11. All law enforcement contact must be reported to probation or compliance officer immediately after contact.
12. You must receive permission to associate with any Treatment Court participant and Felony offender.
13. STEER Court may search your personal property, place of residence, vehicle or personal effects may be searched at any time, with or without a warrant.
14. You must maintain gainful employment as long as you are physically able to do so. You can maintain full-time student status or a combination of the two to meet this requirement.
15. You agree not to consume or purchase alcoholic beverages or illegal drugs or visit places where alcohol or illegal drugs are sold, dispensed or used. This includes patronizing places such as bars, liquor stores, taverns, pubs, clubs, parties, or other places that promote the sale or consumption of alcohol.
16. You agree not to enter any gaming establishment.
17. You agree not to possess any dangerous weapon of any kind, including firearms or knives.
18. Driving while your license is suspended or revoked may result in incarceration, additional penalties and increased license suspension periods.
19. You may not make threats towards other participants or staff. Violent, threatening, or inappropriate behavior will not be tolerated.
20. You are prohibited from fraternizing or becoming romantically involved with any Treatment Court participant.

Dress code for all Treatment Court Related Functions

1. No tank tops, muscle shirts, crop-tops, sweat pants, or shirts with obscene words or pictures, clothing with alcohol or drug logos, unbuttoned shirts, or see-through shirts.
2. No sagging pants (i.e pants or shorts that hang below the waist or with the crotch of the pants hanging to the knees).
3. No underwear or bra straps showing.
4. No hats, caps, bandanas, or doo rags.
5. No gang attire.
6. No short shorts.
7. No gum, candy, food, or drink.

Program Fees

Program Fees	\$40 per week	Paid to the payment options below.
Court Fee	\$10 when you appear in Court	Paid before you appear in Court.

*You may pay ahead on all Treatment Court related fees.

If you fall 2- 4 weeks behind in your fee payments, you will be required to have weekly case management meetings and prepare a budget. You will not be refused service due to inability to pay. However, it is expected that you work with case management to develop a payment contract with the court. If fees are not current after a budget review, you may be terminated from Court.

Counseling

Substance abuse counseling is comprised of three separate formats: individual, group and family. As your part of your treatment plan, you may be required to participate in all types of counseling if it is appropriate. Together they are designed to develop self-awareness, self-discipline, and coping mechanisms necessary to maintain your sobriety. You may have to attend additional treatment such as criminal thinking, anger management, parenting, trauma specific yoga and any other topic the treatment team recognizes as needed. Your attendance at both individual and group counseling sessions will be reported to the Judge as part of your progress report.

You are required to be excused directly by your counselor prior to the session. No counselor can excuse another counselor's client. If you are ill, a doctor's note may be required and must be provided within 24 hours. Leaving a voicemail, asking to be excused, will not count as a valid reason to miss treatment appointments.

Case Management

Upon your entry into the Treatment Court the team will assess your housing, transportation, family situation and general living needs. When appropriate, the team will refer you to local, state and/or county agencies for additional assistance.

Transportation

Bus passes and bicycles will be available at the CAMO office. Participants, who are ineligible to drive, please note of the following information which includes bicycles, tricycles and motor driven cycles:

If a vehicle has foot pedals (rotating foot pedals capable of muscular propulsion, not stationary foot pegs on which to simply rest your feet) and no motor, it is classified as a bicycle.

- If a vehicle has foot pedals and an accompanying motor of 49 cc or less not capable of traveling more than 30mph on a level surface with automatic shifting, it is still classified as a bicycle.
- If a vehicle has foot pedals and an accompanying motor of 50 cc or more, is capable of traveling faster than 30 mph on a level surface, or requires manual shifting, it is a motor driven cycle.
- If a vehicle has no foot pedals at all, the size (49 cc or less or 50 cc or more) or type of an accompanying motor (gasoline or electric), speed capability, or transmission type does not matter. It is classified as a motor driven cycle regardless, because it has no foot pedals.

A bicycle does not require a driver's license or motorcycle endorsement, nor does a bicycle have to be titled and registered. A motor driven cycle is the opposite; it does require a driver's license, a motorcycle endorsement, and title/registration.

Bicycles require a minimal amount of basic equipment such as yellow reflectors to the front half and red reflectors to the rear half. A motor driven cycle essentially requires all the same equipment as a standard motorcycle, including lights, a horn, and rear view mirror.

In Billings, city ordinance prohibits bicycles from being operated on any sidewalk. The court recommends you get off and walk all bicycles on any sidewalk and operate them only on the roadway.

While operating on the roadway, both bicycles and motor driven cycles must obey the same traffic laws as all other vehicles, which include riding with the flow of traffic, stopping at lights and stop signs, yielding as required, and physically signaling stops and turns.

In the interest of safety, wear a helmet and a highly reflective vest at all times. A bicycle must have yellow reflectors to the front half and red reflectors to the rear half. You may also equip a bicycle as permitted with white and/or yellow lights to the front half and red lights to the rear half, preferably no flashing or pulsating lights.

Above all, assume other motorists will not see you and drive defensively. If a bicycle is provided for you by the Court, you must register it with the Billings Police Department. A number decal will be mailed to you and must be placed on the bicycle. In the event that it is stolen or lost the police will be able to identify it and return it to you.

Drug Testing

Community Solutions Inc. 207 North Broadway, Suite 110	
Call 406-896-4914 every day of the week between 5:00 a.m. and 10:00 a.m.	
Weekday Provide Times:	7:30am-10:00am
Weekend Provide Times:	8:30am-10:00am

A positive, dilute*, or missed test will result in the loss of your clean time. You may be required to pay for an EtG test. Repeated offenses may result in imposed response. **You may have to provide on holidays.**

**Dilute: there is a greater concentration of water in urine.*

SCRAM

Upon induction, you will be required to wear an alcohol monitoring bracelet for 90 consecutive clean day. SCRAM may be extended to assist in maintaining sobriety. **You may have to download your bracelet on a holiday if it falls during the week. CSI will have an adjusted holiday schedule.**

Medication

- Notify your physician that you are currently enrolled in a recovery-based program and that you are subject to random and frequent drug testing.
- Please make every effort to use high dosage Ibuprofen and like medications for pain control.
- You are required to inform your treatment counselor, probation officer and drug testing provider prior to filling and taking such medications.
- If you are prescribed medications by a doctor, you are required to take the medication as prescribed.

Recovery Support Meetings

You are required to attend a minimum of 3 self-help groups per week and must be completed before the next scheduled court appearance. You must have 3-5 sentences on how the group applies to you. If you go to two of the same groups in one day, only one pink slip will count. If a STEER/CAMO participant is chairing the meeting they **cannot** sign your slip.

Pink Slip Example:

*This is to verify that John Doe attended Downtown Group Anonymous
On August 7, 2017, Time 8:00pm at 17 N 31st St.
(Date) (Location of Meeting)*

(Signature of Chairperson)

Topic of Meeting Powerless Over Alcohol

How does this apply to me?

How this applies to me is that in my treatment group I am starting to accept that I am an alcoholic. I am beginning to understand that I can't just have one drink and stop. I will lose control.

Incentives

During the course of your Treatment Court program, if you are in compliance during the program, the court may reward your positive progress and/or pro-social behavior with incentives. Including, but not limited to:

- Verbal praise and encouragement
- Decreased court appearances
- Phase advancement
- Certificates
- Gift Certificates
- Reduction of supervision requirements
- Community activities
- Travel approvals
- Graduating from program

Sanctions

If you have failed to follow rules, achieve progress or are otherwise noncompliant, the Judge may impose sanctions. Including, but not limited to:

- Admonishment from the Judge
- Curfew
- Electronic monitoring
- Fines
- Writing/reading assignment
- Revocation
- Increased drug testing
- Increased court appearances
- Community service
- Increased supervision
- Periods of incarceration
- Expulsion/termination

Confidentiality

Pursuant to the Federal Regulations and State laws, your identity and privacy will be protected (e.g. 42CFR, Part 2; 45CFR, Parts 160 and 164; CA Health & Safety Code Sections 11812(c) and 5328). You will be asked to sign a waiver authorizing the transfer of information among all participating agencies. An identification number will be assigned to you that will be used in all research and evaluation activities to insure confidentiality.

Confidentiality is also essential to maintain the integrity of group therapy sessions. Nothing that is discussed within the confines of those meetings will leave those meetings. No information pertaining to another client should be discussed outside of the group. This confidentiality applies to things said in the courtroom as well.

Conclusion

The Treatment Court program is designed to help you live in our community as a productive and responsible citizen. The Judge, the Court staff, and the treatment team will guide and assist you, but the final responsibility is yours.

Welcome to STEER!

Phase 2 Application

Name: _____ Date Turned In: _____

- Complete orientation with Coordinator, Silverleaf, probation, and CSI.**
- Attend all individual and group treatment sessions as required by treatment provider.
- Attend weekly STEER court sessions.
- Call CSI daily and report as required.
- Report to your probation officer as required.
- I will identify goals and engage in treatment.
- I have been placed on alcohol monitor and understand I will be required to be on this device for a **minimum of 90 days**.
- Phase one requires a **minimum of 60 days**: _____ days.
- Phase one requires a **minimum of 30 sober days**: _____ days.

***Please note, in phase one you are not eligible for travel permits.**

1. What have you learned about yourself in phase one?

2. What changes have you made in your life since entering STEER Court?

3. List 3 goals/plans for Phase 2.

1. _____

2. _____

3. _____

4. What is your current address?

5. What is your current phone number?

6. What is your current email address?

7. Do you need any assistance in the following areas? If so, please list.

Education? _____

Housing? _____

Employment? _____

Support system? _____

Client Signature

Date

Coordinator Signature

Date

Phase 3 Application

Name: _____ Date Turned In: _____

- I am attending a minimum of three self-help meeting per week and turned in my slips weekly to coordinator.
- I completed my 90 days of continuous alcohol monitoring and have been taken off my alcohol monitoring device.
- Attend all individual and group treatment sessions as required by treatment provider.
- Attend bi-weekly STEER court sessions.
- Call CSI daily and report as required.
- Report to your probation officer as required.
- I will identify goals and engage in treatment.
- Phase two requires a **minimum of 90 days:** _____ days.
- Phase two requires a **minimum of 45 sober days:** _____ days.

***If at any time, you are \$500 behind in fees, you will be required to meet with Sgt. Lauwers for budgeting. You will continue to meet with Sgt. Lauwers until your fees are caught up and released from budget class.**

1. What efforts are you making to manage your stress and what coping skills are you using?

2. What changes have you made in your life since starting phase 2?

3. Starting in phase 3, treatment, court, supervision requirements are reduced. How do you plan on spending you “free” time that you usually spent doing these requirements? (Working is not an appropriate answer)

4. List 3 goals/plans for Phase 3.

1. _____

2. _____

3. _____

5. How are you able to recognize warning signs such as triggers, high-risk situations, and relapse behavior?

6. How much do you currently owe in court fees? \$_____

7. What employment, educational and/or social progress have you made in phase 2?

8. What is your current address?

9. What is your current phone number?

10. What is your current email address?

Client Signature

Date

Coordinator Signature

Date

Phase 4 Application

Name: _____ Date Turned In: _____

- I am attending a minimum of three self-help meeting per week and turned in my slips weekly to coordinator.
- Attend all individual and group treatment sessions as required by treatment provider.
- Attend monthly STEER court sessions.
- Call CSI daily and report as required.
- Report to your probation officer as required.
- I will identify goals and engage in treatment.
- Completed 15 hours of community service.**
- Phase three requires a **minimum** of 90 days: _____ days.
- Phase three requires a **minimum** of 90 sober days: _____ days.

***If at any time, you are \$500 behind in fees, you will be required to meet with Sgt. Lauwers for budgeting. You will continue to meet with Sgt. Lauwers until your fees are caught up.**

1. Please describe your support system within the community.

2. What compliance issues did you face during phase 3 and what led to those issues?

How will things be different in phase 4?

3. Have you obtained steady housing, income, and positive relationships? Please

explain:

4. List 3 goals/plans for Phase 4.

1. _____

2. _____

3. _____

5. Are you currently working or going to school? If so, please explain: where and how

often:

6. How much do you currently owe in court fees? \$_____

7. What is your current address?

8. What is your current phone number?

9. What is your current email address?

Client Signature

Date

Coordinator Signature

Date

Phase 5 Application

Name: _____ Date Turned In: _____

- I am attending a minimum of three self-help meeting per week and turned in my slips weekly to coordinator.
- Attend all individual and group treatment sessions as required by treatment provider.
- Attend monthly STEER court sessions.
- Call CSI daily and report as required.
- Report to your probation officer as required.
- I will identify goals and engage in treatment.
- Completed 15 hours of community service.**
- Phase four requires a **minimum** of **90 days**: _____ days.
- Phase four requires a **minimum** of **90 sober days**: _____ days.

***If at any time, you are \$500 behind in fees, you will be required to meet with Sgt. Lauwers for budgeting. You will continue to meet with Sgt. Lauwers until your fees are caught up.**

- 1.** Describe where you were at in your life before you began STEER Court and what positives steps have you made since entering the court?

2. What triggers are most difficult for you to handle and what do you do when you are faced with those triggers? Please be specific:

3. How do you plan on celebrating the important milestones in your life?

4. List 3 goals/plans for Phase 5.

1. _____

2. _____

3. _____

5. How much do you currently owe in court fees? \$ _____

6. What is your current address?

7. What is your current phone number?

8. What is your current email address?

Client Signature

Date

Coordinator Signature

Date

Graduation Application

Name: _____ Date Turned In: _____

- I am attending a minimum of three self-help meeting per week and turned in my slips weekly to coordinator.
- Attend monthly STEER court sessions.
- Call CSI daily and report as required.
- Report to your probation officer as required.
- Completed all treatment classes and treatment requirements.
- Phase five requires a **minimum of 90 days:** _____ **days.**
- Phase five requires a **minimum of 180 sober days:** _____ **days.**

***In order to graduate, ALL court fees must be paid off.**

1. What have you gained since being in the program? (i.e.: home, drivers license, new career, out of debt, advanced your education/employment)

2. Where do you see yourself in 5 years?

3. On a separate sheet of paper, please write a letter to the STEER Court, telling us why you feel you are ready to graduate. *This letter must be turned in with your application.

Client Signature **Date**

Coordinator Signature **Date**



Yellowstone County STEER Court Service Project

Under the guidance and leadership of Judge Mary Jane Knisely, District Court Judge 13th Judicial District of Montana, the Yellowstone County STEER Court (Sobriety, Treatment, Education, Excellence and Rehabilitation) provides services to felony DUI offenders. The court takes a therapeutic, problem-solving approach by providing clients with comprehensive substance abuse and/or mental health treatment under a structured court-supervised program that last 12 months to 2 years (depending on individual progress). STEER participants are required to complete a 30-hour Service Project as a means of giving back to their community.

Please consider allowing STEER Court clients the opportunity to complete their Service Project with your organization. We do ask that you provide a signature of approval and verify the number of volunteer hours.



SERVICE PROJECT LOG

A total of 30 hours is required.

15 hours must be complete to transition to phase 3

15 hours must be complete to transition to phase 4

Name:

1. Where will you be completing your Service Project? _____

2. Who is your point of contact? Name: _____ Phone: _____

3. Explain your project in detail.

4. How is this project meaningful to you?

5. What talents or gifts are you using to complete your project?

6. How does this project "give back" to the community?

7. List any supplies or equipment needed in order to complete your project and explain how you will obtain these.

8. What is your time frame for completing this project? List the days and times you will be working. Keep in mind that you are to complete at least 15 hours prior your transition to Phase 4.

Return this form to coordinator for approval before you start your hours

Signature **(Coordinator)**

Date

YELLOWSTONE COUNTY
STEER COURT
19 N. 25TH ST. SUITE A
BILLINGS, MT 59101