

Drug Court of New South Wales

GENERAL PROGRAM AND UNDERTAKING

Court reference number:

Participant:

Address:

Date of this undertaking and
program commencement date:

PROGRAM CONDITIONS

1 Commitment to program

1. I must fully commit myself to my Drug Court Program. My Drug Court program will take priority over all other commitments.
2. I must not abandon my program
3. I must be of good behaviour. I must not commit any criminal offence.
4. I must be honest and not attempt to deceive the Drug Court or any member of the Drug Court team, my treatment provider or my case manager from Community Corrections.
- 5.** I must obey any direction given to me by the Drug Court, any member of the Drug Court team, my treatment provider or my case manager, including the initial directions which are attached to this undertaking.

2 Drug and Alcohol Use

1. I must not use or possess any prohibited drug.
2. I must not use or possess any synthetic form of an intoxicating drug.
3. I must attempt to avoid associating with anyone who uses prohibited drugs, unless the Drug Court or my case manager allows me to do so.
4. I will not drink alcohol at all in Phase 1 of the Drug Court Program and I acknowledge that I will be subject to testing.

5. In Phase 2 and Phase 3 of the Drug Court Program I must not use alcohol in a manner which may interfere with my ability to fully participate in my program. I understand that I may be subject to a sanction for having a breath test reading exceeding 0.05.
6. I understand that I may be directed to use no alcohol or other legal drug.
7. I will avoid using, or being prescribed, any pain relief medication which contains codeine/morphine. If such medication is prescribed I will obtain a letter from any doctor or dentist that such pain relief medication is appropriate and no other pain medication, would be appropriate.
8. I will admit the use of any prohibited drug or synthetic intoxicating drug at my next drug test.
9. I will admit to using any prescribed medication, non-prescribed medication, or over the counter medication at all drug tests, and I will bring to the test location the medication's packet/bottle and a copy of the prescription.
10. I will admit to the use of pain relief medication at the time of drug testing even if this medication has NOT been prescribed.
- 11.** I will not use any other legal drug in a manner which may interfere with my ability to fully participate in my program.

3 Drug tests

1. I must provide my urine, breath, sweat or saliva for drug testing whenever directed to do so by the Court, by a treatment provider, by my case manager.
2. I must submit to a drug test each time that I am released from custody.
3. I understand that I will probably be asked to submit to a drug test in
 - Phase One- three times a week
 - Phase Two - twice a week
 - Phase Three - twice a week

4. I understand that any information connected with such drug tests will be used solely for the purposes of the Drug Court and will not be admitted as evidence in any criminal proceedings or provided to anyone outside the Drug Court without my written consent.
5. I understand that any attempt to falsify a drug test is a very serious breach of my Drug Court program, which will result in a significant sanction or termination of my program.
6. I understand that if I avoid or fail to attend a drug test I will receive sanctions.
- 7.** I understand that if I dispute the result of a drug test, I can request further testing. The Court may decide not to have further testing undertaken.

4 Program attendances

1. I must punctually attend all
 - Drug Court sittings
 - drug test appointments
 - treatment or counselling appointments
 - appointments with my case manager
 - personal development courses
 - courses on obtaining employment
 - educational courses
 - other appointmentswhich I am directed to attend.
2. If I am unable to attend or if I am late for an appointment I must do all that I can to notify the person before the appointment time.
- 3.** If an appointment is not met, I must re-book and attend the appointment as soon as possible after the cancelled appointment.

5 Treatment for drug dependency

1. I must comply with the rules and directions of my treatment provider.
2. I must attend all appointments for counselling.
3. I must attend Drug and Alcohol programs, Day programs, Bridging or transition programs/groups when they are arranged for me.
4. If my treatment involves the use of pharmacotherapy (eg. methadone, , suboxone, subutex or buprenorphine) I must
 - attend for dosing on every occasion
 - take my dose exactly as prescribed
 - adhere to the rules of the dosing agency.
5. I understand that my treatment plan can be varied from time to time and I will comply with any changes made to that plan.

6 Residential rehabilitation centre

1. I must obey all the directions, rules and restrictions of the rehabilitation centre at which I reside.
2. I must reside at my place of residence in the rehabilitation centre unless I am given leave by my treatment provider and my case manager.
3. If I am discharged from a residential rehabilitation centre, I must immediately contact the Drug Court or a member of the Drug Court team, follow any directions given and attend a Drug Court at the first opportunity
4. I understand that failure to immediately report to the Drug Court will result in a severe sanction or termination of my program.

7 Medical treatment

1. Whenever possible, I must only receive **general medical treatment** from one medical

practice.

2. I must provide the name, address and telephone number of that medical practice to my treatment provider as soon as possible. I must advise any doctor whom I consult that I am on a Drug Court program.
3. I must not use any prescription medication unless it is prescribed *for me* by a doctor. At the first available opportunity, I will tell my treatment provider about the prescribed medication and provide my treatment provider with the name and telephone number of the prescribing doctor.
4. If I am too sick to attend Court or any other Drug Court commitment I must provide the Court with a detailed medical certificate from my usual medical practice in which the doctor states that he/she knows that I am on a Drug Court program and states that I am too sick to attend the specified commitment.
5. I understand that a medical certificate will not necessarily be accepted as an adequate excuse for failing to meet a Drug Court commitment.
6. I authorise any doctor who provides me with a medical certificate to provide the Drug Court and my treatment provider with any information they may request concerning my medical condition and treatment. I understand that I cannot withdraw this authority.
7. I understand that I must comply with all **mental health treatment**. I must attend one psychiatrist and/or mental health care unit.
8. I will provide the name, address and telephone number of that psychiatrist and /or mental health care unit to my treatment provider. I must inform these mental health practitioners that I am on the Drug Court Program.
9. I will take all medication as prescribed and I will show my treatment provider that I am continuing to take prescribed medication, either oral medication or medication by injection.

8 Community Corrections supervision

1. I must accept the supervision of my case manager, and comply with all directions.
2. I must comply with the requirements of my case management plan which will be provided to me when I commence my program. I understand that my case management plan will be varied from time to time and I must comply with any changes made to that plan.
3. I must be home for all arranged home visits.
- 4.** I must accept any home visit by my case manager, my treatment provider or any other person connected with the Drug Court, whether or not I have been given prior notice of the visit. I understand that my case manager will come to my home regularly, and will speak with the people with whom I live about me.

9 Residence

1. I must reside at the address given at the top of this undertaking and sleep there each night unless I have the prior approval of the Court or my case manager to be absent overnight.
2. I must not change my residential address unless the proposed address has been assessed as suitable by my case manager.
3. I must immediately notify my case manager of any change of telephone number.
- 4.** I must not travel overseas, interstate or even to another region or city without the express approval of the Drug Court.

10 Employment

1. I must not obtain any paid employment, whether full time, part time or casual without first obtaining the permission of my case manager.
2. I understand that my case manager may speak to any proposed employer about my

involvement in a Drug Court program before granting permission for me to work.

3. I understand that if I am in receipt of a Centrelink benefit, I must notify Centrelink of any wages or payments received.
4. I understand that I must also show my case manager payslips or other proof of payment of wages when such proof is requested.

11 Curfews and restrictions

1. During the first month of my program I must be at my place of residence between 7pm and 7 am each day, unless I have my case manager's approval to be absent.
2. I must not visit any prisoner at any correctional centre without the prior approval of the Drug Court.
3. I cannot be or continue to be an informant or source of information for any law enforcement agency.

12 My response to a program breach

1. I must report any breach of my program at the first opportunity I have to my case manager, treatment provider and the Drug Court.
2. If I use prohibited drugs I must
 - honestly and promptly disclose this use to the Court, my case manager and my treatment provider, and
 - contact my treatment provider as soon as possible to seek counselling to help me avoid any further use.
3. I accept that if I do not comply with any of the program conditions, my behaviour will be subject to sanctions such as:
 - withdrawal of privileges
 - a change in the frequency of counselling or other treatment,

- an increase in supervision
- an increase in the frequency of testing for drugs,
- being placed in custody to serve sanctions.

13 Important aspects of my Drug Court program

I understand the following important aspects of my Drug Court program

1. The Drug Court can change these conditions and impose any new conditions that it considers appropriate.
2. If I am unhappy with any existing or proposed program condition, I can ask the Drug Court to change it. I must obey any existing condition unless and until it is changed.
3. Completion of the three phases of my program will take at least twelve months. I will not progress from one phase to the next phase until I have completed the requirements of the previous phase.
4. My case manager and my treatment provider will provide the Drug Court with regular reports as to my progress. These will be considered by the Drug Court team prior to my appearance at Court. I will not be present at these meetings, but anything important will be raised with me when I report back to Court.
5. My case manager, my treatment provider and others connected with my program (except my lawyer) will immediately notify the Drug Court if I am suspected of breaching my program in any way and will give the Drug Court details of the suspected breach (including drug use).
6. Any suspected breach of my program may result in the Drug Court issuing a warrant for my arrest.
7. The Drug Court can terminate my program if I breach a condition of my program. If I fail to report to the Court as required my program may be terminated without notice to me and in my absence.

8. I cannot appeal against any sanction imposed, or the termination of my program.
9. At any time, I can request the Drug Court to terminate my program. The Drug Court may defer consideration of my application to self terminate for up to 14 days.
- 10.** If my program is terminated in any way, my initial sentence will be re-considered by the Drug Court. The final sentence imposed will not be greater than the initial sentence unless I am being sentenced for additional crimes.

14 Acknowledgement of explanation

1. I have received a copy of this undertaking. The undertaking has been explained to me and I understand it. I have discussed with my solicitor the important aspects of the program, and the consequences of entering my program, including successful completion and termination, and the consequences of not entering the program and continuing through the usual legal process.
2. I seek to enter a Drug Court program.

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Signature of Participant
Dated: 4 September 2013

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Signature of solicitor

15 Undertaking

I accept the conditions of the general program, and of the treatment plan and case management plan which have been given to me today, and undertake to comply with this Drug Court program.

Signature of Participant

16 Registrar's statement

I have explained the attached treatment plan and case management plan to the participant and answered all questions by the participant concerning his/her participation in a Drug Court program. I have explained to the participant the consequences of entering a Drug Court program, including failure on the program. I have asked the participant to sign the document only if the participant still wished to participate in a Drug Court program.

Signature of Registrar (or deputy)

date: 4 September 2013

INTERPRETER'S STATEMENT

I, _____, being a duly qualified interpreter, state that I have interpreted this document from the language _____ to the English language.

Signature of Interpreter NAATI

No. _____