



Gwaiak Miicon Healing to Wellness Court Participant Manual

“The right choice is not always the easiest choice.”

Sault Ste. Marie Chippewa Tribal Court
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I. INTRODUCTION

The Gwaiak Miicon Team welcomes you to the Sault Ste. Marie Chippewa Tribal Court Gwaiak Miicon Program. First and foremost, we would like to acknowledge your courageous choice to begin your life-long journey towards full and lasting recovery from your dependence on alcohol and/or other drugs. This will not be easy. We will expect a lot from you and you can expect a lot from us. You will have access to services that will increase your ability to become sober, stay sober, and improve your life. The Gwaiak Miicon Team will coordinate these services and collaborate to best meet your health and wellness needs.

The Gwaiak Miicon Program is a voluntary, alternative sentencing program that allows participants to obtain a full range of services to assist them in leading a drug- and alcohol-free life. The program offers services that are specifically coordinated, managed and comprehensive; including substance abuse treatment, judicial oversight, random drug screening, assistance in obtaining housing, education, mental health, family counseling, traditional teachings, and also other services as identified throughout the program. Gwaiak Miicon behavioral health treatment services are provided by Sault Tribe Behavioral Health.

Throughout the program, the team will follow your progress in recovery and you will receive incentives (rewards) for successful participation and progress. The participant passes through four phases of different lengths to complete the program over approximately an eighteen-month period. The program length, determined by each participant's progress, will not be less than fifty-two weeks. The four phases are designed to reflect the teaching of the four directions and the medicine wheel, and help participants to recognize how these values can guide you to a life of peace and wellness. Failure or dismissal from the program will result in the immediate entry of your alternative sentence.

Mission Statement

Gwaiak Miicon is a program designed to enhance public safety and the quality of our tribal community, and to reduce the abuse of alcohol and other drugs by tribal members, by providing intensive treatment and court supervision for individuals who admit guilt to drug- or alcohol-related offenses. By holding participants accountable for their actions and providing them with intensive services, participants are provided with the tools to lead drug-free, crime-free, productive lives.



II. THE GWAIK MIICON TEAM

The Gwaiak Miicon Team is a multidisciplinary team whose purpose is to provide the best intervention with each participant to allow them to become healthy and productive members of the community. It is essential for each team member to make a commitment to participate consistently and dependably in all proceedings during their tenure on the team. All team members are possible referral sources. The team shall meet weekly prior to the participants' review hearings to review the progress and compliance of each participant. The team will make recommendations and decisions regarding any action that should be taken on each case.

The team consists of individuals from the following disciplines:

1. **Role of Tribal Judge** - At the time of sentencing, if it appears that the defendant would be appropriate for the Gwaiak Miicon Program, the judge shall defer the sentencing until after the defendant has been screened for acceptance into the Gwaiak Miicon Program. The judge shall preside over all review hearings ensuring compliance with the program. The judge shall be responsible for imposing sanctions and incentives, with input from the team.
2. **Role of Tribal Prosecutor** - The Tribal Prosecutor shall screen all complaints for alcohol or drug induced criminal activity. The Prosecutor shall then refer appropriate defendants whose complaints appear to be drug or alcohol induced to the Gwaiak Miicon Team for screening to determine if the Gwaiak Miicon Program is a better way to address criminal behavior in a particular case.
3. **Role of Defense Attorney** - The Defense Attorney is responsible for making recommendations to the Gwaiak Miicon team for new participants and to ensure that the program conforms to the rights of each individual.
4. **Role of the Gwaiak Miicon Coordinator** - The Gwaiak Miicon Program Coordinator shall maintain all program agreements with all participating programs. This individual is also responsible for the case management of each program participant and to ensure that all team members attend weekly meetings. The coordinator will make appropriate referrals as recommended by the Team, along with giving weekly drug screens. They will also conduct weekly meetings as required within the different phases of the Program.
5. **Role of Law Enforcement** - Law enforcement is responsible for identifying possible candidates for the Program and attending all weekly meetings.
6. **Role of Treatment Provider** – The Behavioral Health Department shall evaluate each person accepted into the Gwaiak Miicon Program to develop a treatment plan. The Treatment Provider shall provide counseling to participants as necessary and appropriate. The Participant shall follow all recommendations of the treatment provider. The treatment provider is responsible for attending all weekly meetings or providing status updates in advance to the Coordinator if unable to attend.
7. **Role of Cultural Representative** - Cultural Representative is responsible for making the Team and participants aware of cultural events and traditional medicine opportunities that are available, and providing teachings as outlined within the Program phases.

8. **Role of Probation Officer** – The Probation Officer is responsible for ensuring each participant is compliant with the requirements outlined in their sentencing order and files violations when appropriate. The Probation Officer conducts intakes and administers risk/needs tools, performs drug testing and random house checks of the participants. The Probation officer is responsible for attending weekly meetings and providing updates to the Coordinator.
9. **Role of Peer Recovery Coach** – The Peer Recovery Coach provides support to the participants through face-to-face meetings, transportation assistance, and linking them to community recovery resources. The Peer Recovery Coach serves as a recovery and wellness role model and shares lived experience to benefit the client and the team. The Peer Recovery Coach is responsible for attending weekly meetings or providing status updates to the Peer Recovery House Manager if unable to attend.
10. **Role of Field Surveillance Officer** – The Field Surveillance Officer is responsible for assisting probation staff with drug testing, random house checks/field visits, and transporting clients. The Field Surveillance Officer is responsible for escorting team members and participants into the Courtroom.
11. **Role of Medical Representative** – The role of the Health Center Registered Nurse is to serve the participants' medical, nutrition, mental health/medication management and MAT needs and to provide the team with guidance on medical issues that may arise with participants.

III. ASSESSMENT AND ELIGIBILITY

In order to be eligible to participate in Gwaiak Miicon, the defendant must be charged with an alcohol- or drug-related criminal offense or probation violation and meet the following criteria:

- the defendant suffers from a substance abuse problem or addiction and needs treatment
- the defendant admits to having a substance abuse problem or addiction, and wants treatment
- there is a causal connection between the defendant's substance abuse and the current charge
- the defendant would likely re-offend if not treated for the substance abuse problem

The Prosecutor or Gwaiak Miicon Coordinator will submit the defendant's prior conviction information and substance abuse and social history to the Team for determination of acceptance. The defendant must also meet with the Team for an interview prior to their determination. Upon a request for consideration into Gwaiak Miicon, the Coordinator will immediately make a referral for a behavioral health assessment at Sault Tribe Behavioral Health.

Disqualification Criteria:

Anyone with serious mental health issues **will not** be eligible for the Program.

IV. GENERAL TERMS OF THE PROGRAM

As you progress through each phase of Gwaiak Miicon, some of your requirements will change. However, there are some requirements that are consistent throughout the program. During the entire program you are required to:

- Maintain sobriety. In other words, not use any intoxicating substances, including controlled substances, narcotics, alcohol or prescription drugs that you don't have a valid prescription for

- Attend at least 3 recovery Support Group meetings per week, such as Wellbriety, AA, NA, or Smart Recovery. (If in the Matrix program, only 2 AA/NA meetings per week are required). One recovery meeting per week is permissible via Zoom or other online format unless approved otherwise.
- Submit to at least 3 mandatory urine/alcohol tests per week, and any random urine/alcohol tests as requested by the Coordinator or Treatment Provider.
- Keep track of how long you have been sober.
- Establish a daily planner with all of your appointments. At each scheduled appointment with the Coordinator and at each review hearing, the participant will bring their daily planner so the Coordinator can review their progress.
- Attend all scheduled Behavioral Health appointments and follow all recommendations. Not enter any establishment that serves alcohol, including any restaurants, bars, or casinos.
- Obey all tribal, local, state and federal laws, and at all times conduct his/herself as a responsible, law-abiding citizen.
- Obtain the Court's permission before leaving the area overnight.

V. TREATMENT PHASES

Treatment Phase I
Waab(a)nong (Eastern Direction)
Cleansing Phase
88--12 weeks

In Phase I, you will complete the required assessments for the Gwaiak Miicon Program, including physical, dental and optical exams and a Behavioral Health Assessment. You must also attend a cultural teaching/event. You will also attend weekly appointments with the program Coordinator, attend 3 recovery support meetings per week (2 meetings if enrolled in a Matrix Program), submit to at least three drug/alcohol tests per week, and attend weekly review hearings. All Phase I requirements are discussed in the contract on page 10. The Drug Court Team will determine when you have completed Phase I.

Treatment Phase II
Zhaaww(a)nong (Southern Direction)
Action Phase
16-24 weeks

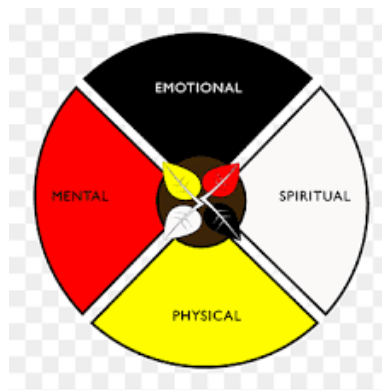
The main focus of Phase II is Actions. As a participant, you will focus on the steps necessary to recover. In Phase II, you will continue meeting with the Coordinator, attending recovery support meetings three times per week (2 meetings if enrolled in a Matrix Program), submit to at least three drug/alcohol tests per week, and continue attending weekly review hearings. You must also continue with behavioral health appointments as scheduled and attend a cultural teaching/event in this phase. Community work service requirements start in Phase II. All Phase II requirements are discussed in the contract on Page 11. The Drug Court Team will determine when you have completed Phase II.

Treatment Phase III
***Ningaabii(a)nong* (Western Direction)**
Building Phase
16-24 weeks

In Phase III, you will begin shifting from a primary education focus to changing your lifestyle and living in recovery. The focus of this phase is to support you in engaging in alternative activities to using substances. You will be expected to participate in recreational and either educational activities or obtain employment. In this Phase you will not be required to meet with the Coordinator or attend Court review hearings as often as Phases I and II. All Phase III requirements are discussed in the contract on Page 12. The Drug Court Team will determine when you have completed Phase III.

Treatment Phase IV
***Giiwed(i)nong* (Northern Direction)**
Maintenance Phase
-12-16 weeks

The purpose of Phase IV is to support you in maintaining your new healthy lifestyle. You will still be required to perform community work service, attend recovery support meetings three times per week, engage in recreational activities, continue with education or employment, and submit to at least three random drug/alcohol tests. Your meetings with the Coordinator and your number of review hearings will reduce. All Phase IV requirements are discussed in the contract on Page 13.



Upon completion of Phase IV and an exit interview with the team, the participant will graduate from the Gwaiak Miicon Program. The Drug Court Team will determine when the participant has qualified to graduate from the Gwaiiak Miicon Program.

Graduation

There will be a graduation ceremony for participants who successfully complete all the terms and conditions of Gwaiak Miicon. If the participant chooses, the Coordinator will assist the participant in scheduling a sweat.

******The Gwaiak Miicon Team may amend any phase conditions. If changes are to be made, you will be notified ahead of time.*

VI. REVIEW HEARINGS

As a Gwaiak Miicon participant, you will be required to appear in Court for review hearings on a regular basis. Gwaiak Miicon review hearings are held each week at 11:00 a.m. at the George K. Nolan Judicial Building, 2175 Shunk Road, Sault Ste. Marie, Michigan. The Team will meet before the hearings, and will be given a progress report prepared by the Coordinator regarding your drug test results, attendance and participation in treatment, community service performed, and any other relevant information regarding your progress. You have the right to ask to speak with the Gwaiak Miicon Team at any time or the Gwaiak Miicon Team may call you in at any time to speak with you.

At the hearing, the Judge may ask you questions about your progress, and discuss any specific problems you have been experiencing. You need to be on time for Court. If you do not appear in Court on the date and time scheduled, a bench warrant will be issued for your arrest. As a participant, you will be expected to dress appropriately for Court and all Gwaiak Miicon activities. Clothing bearing drug- or alcohol-related themes or advertising is prohibited. Sunglasses or hats are not to be worn in Court. Neither food nor beverages are permitted in the courtroom.

Incentives

If you are doing well, you may occasionally receive an incentive to continue with the program and work your services toward success. These incentives are designed to keep you on track towards your graduation. Incentives may include, but are not limited to:

1. Expungement of record - the charge you received in Court may be expunged/ removed from your record upon completion of the program. No other previous charges will be expunged from your record.
2. Reduction of charge – the charge the participant received in Court may be reduced to a lesser offense upon completion of the program. This incentive will have been established at the time of the plea.
3. Passes from court hearings
4. Gift cards
5. Advancement through the phases
6. Tickets/access to non-using social activities
7. Educational materials
8. Motivational materials
9. Verbal praise and compliments from the Judge and/or the Team

Sanctions

Sanctions are court-imposed restrictions, or negative consequences, that result from your non-compliance. That means that you are in control of whether you are “sanctioned” or not. Non-compliance includes but is not limited to: missing appointments or drug screens, failed screens, not cooperating with the service providers, dishonesty, and failing to appear at review hearings. Sanctions may include, but are not limited to:

1. Admonishment by Judge and/or the Team

2. Written assignments (such as papers on effects of specific drugs, honesty, accountability, someone who has had a positive influence on their life, importance of drug counseling, etc.)
3. Letters of apology
4. Community service/projects
5. Loss of privileges, such as constructive free time
6. Increased support group meetings
7. Monetary penalties
8. Increased drug testing
9. In-house arrest
10. Electronic monitoring
11. Short-term incarceration (up to 72 hours)
12. Long-term incarceration (over 72 hours but no more than 14 days)
13. Residential treatment
14. Return to beginning of phase
15. Discharge from program

VII. DRUG/ALCOHOL TESTING

You will submit to alcohol and drug testing throughout the Gwaiak Miicon program. You must call the Court every Monday through Friday morning between 8:00-8:30 a.m. to find out if you must come in for a random drug or alcohol screen on that day. If you are informed that you must come in for testing, you must be at the Court by 9:00 a.m. In addition, you may be requested to submit to a random screen at any other time by the Coordinator, Court probation staff, or Sault Tribe Law Enforcement officers. Therefore, you must have the ability to come to Tribal Court to submit to a test within 30 minutes of receiving notification of any random screen and must maintain a working telephone.

The team will have access to all drug and alcohol test results including any failures or refusals to test. Attempts to dilute, adulterate, or tamper with drug or alcohol testing may result in immediate termination from Gwaiak Miicon.

VIII. COMMUNITY SERVICE

Beginning in Phase II, participants will be required to begin performing community service. Community work service provides an opportunity for the participants to give back to the community they are a part of. The community was impacted by the actions of the participants that led to their court involvement, and community work service provides an opportunity for the participants to recompense in a positive way. Community work service also provides an opportunity for the members of our community to see the participants make a positive change in their lives and reduce the stigma attached to justice involved individuals.

Participants who are working or attending school full-time (at least 30 hours per week) must perform 5 hours per month. Participants who are working and/or attending school 20-30 hours per week must perform 20 CWS hours per month. Participants who are working or attending school less than 20 hours per week must perform 40 hours of CWS per month.

Up to one-half of a participant's monthly community work service requirement can be completed by engaging in "positive community engagement" activities. Positive community engagement activities are community events that do not involve drugs or alcohol. Example include: attending FAN Forums, attending Music in the Park with your family, attending an in-person Anishinaabewmowin class, or attending a pow wow. Attending events like your child's basketball game, your child's dance recital, or recovery support meetings would not qualify.

At least one-half of a participant's monthly community work service requirement must be met by performing volunteer work service. A maximum of one-half of volunteer work service hours you complete each month can be performed by performing service for an individual, such as mowing an elderly neighbor's lawn. Also, a maximum of one-half of volunteer work service hours can come from setting up or cleaning after a recovery meeting.

Participants are required to provide verification of community service hours completed. Verification must be signed by the organization in which the community service was completed and have contact information to verify the hours. Bring verification of community service hours to case management and probation appointments.

Participants are not permitted to "bank" hours for later months or convert the Gwaiak Miicon fee to community service.

A list of possible places to perform community work service can be found at the back of this manual. This list is non-exhaustive, but any other locations where you choose to perform community work service must be approved in advance by the Coordinator.



IX. RECOVERY SUPPORT GROUP MEETING ATTENDANCE

You are required to attend recovery support group meetings three times per week throughout the Gwaiak Miicon program. The time and location is your choice. We count meetings from Thursday at 12:00 p.m. to the next Thursday at 11:59 a.m. It is required that you arrive to meetings on time and that you stay the entire session. Always remember to have your log sheet signed. Signatures must be obtained on the day of the meeting. Falsification of logs will result in severe sanctions. Be careful not to lose your logs. Without your log sheet, there is no way to confirm compliance. If you lose your log, you must make up the meetings immediately.

X. FEES

As a participant, you must pay a \$500.00, non-refundable administrative fee, for participation in Gwaiak Miicon. Payments of \$125.00 are due for each Phase and must be received by the Court prior to the participant's promotion to the next Phase. Other resources may be able to help participants with this financial obligation, but it is the participant's responsibility to ensure payment is received by the Court. If you are ordered by the Court to pay restitution as related to the offense, the restitution must be paid in full prior to graduation from Gwaiak Miicon.

XI. PROGRAM TERMINATION

Involuntary Termination

Involuntary termination from Gwaiak Miicon occurs when the program can no longer serve the needs of the client, or the client is no longer taking advantage of the opportunities Gwaiak Miicon offers. A participant may be terminated if he or she repeatedly violates the terms and conditions of the program, including positive drug or alcohol tests, or if he or she engages in further criminal activity, among other reasons.

Termination decisions are based on many factors including, but not limited to: current situation/violation, length of time in program, number and level of treatment episodes, living situations, attitude, etc. If a participant is terminated, the Court will immediately impose the sentence previously held in abeyance and the defendant will receive the criminal conviction(s). Any Gwaiak Miicon fees paid are forfeited, and not credited towards any legal financial obligations imposed by the conviction.

Voluntary Termination

Gwaiak Miicon is a voluntary program, and you may choose to leave the program at any time. However, at such time, the alternative sentence previously held in abeyance by the Court at the time of your sentencing will be immediately imposed and you will receive the original criminal conviction(s). You will forfeit any Gwaiak Miicon fees already paid.

XII. CONCLUSION

Gwaiak Miicon has been developed to help you achieve total sobriety and is designed to promote self-sufficiency and to return you to the tribal community as a productive and responsible citizen. Gwaiak Miicon is voluntary and is your personal choice. The Judge, Coordinator, and other team members are present to guide and assist you, but the final responsibility is yours. You must be motivated to make this change and commit to a drug- and alcohol-free life.

GOOD LUCK TO YOU!!!

**GWAIK MIICON
PHASE I – CLEANSING PHASE - CONTRACT
Waab(a)nong (Eastern Direction)**

Name: _____ **Case Number:** _____

In addition to the “General Terms of the Program” listed on page 5, you will also be required to:

1. Report to Gwaiak Miicon Coordinator in person at least twice per week and/or as directed by the Coordinator.
2. Attend at least 3 recovery support meetings per week. (If in the Matrix program, 2 meetings per week.)
3. Complete a Behavioral Health Assessment and follow all resulting recommendations.
4. Submit to at least 3 mandatory urine/alcohol tests per week, and any random urine/alcohol tests as requested.
5. Attend 1 status review hearing per week.
6. Abide by a curfew of 10:00pm until 6:00am.
7. Attend a Cultural teaching or event, pre-approved by the Coordinator.
8. Schedule a Full Physical, Dental, and Optical exam. Each participant shall follow all recommendations that come from those exams, which can be completed at the Sault Tribal Health Center. Each participant shall turn in all documentation of each exam to the Coordinator.
9. Establish a daily planner with all of your appointments. At each scheduled appointment with the Coordinator and at each review hearing, the participant will bring their daily planner so the Coordinator can review their progress.
10. Before being promoted to Phase II, provide a list of written goals that you want to accomplish in your next phase and present the list to the Team.
11. Make a payment of \$125.00 toward your Gwaiak Miicon Fee.
12. OTHER: _____

I understand and agree to abide by all the conditions of the Phase I contract. Any violation of these conditions may result in possible incarceration and/or other sanctions.

Participant’s Signature

Date

Gwaiak Coordinator’s Signature

Date

GWAIK MIICON
PHASE II – ACTION PHASE– CONTRACT
Zhaaww(a)nong (Southern Direction)

Name: _____ **Case Number:** _____

In addition to the “General Terms of the Program” listed on page 5, you will also be required to:

1. Report to the Gwaiak Miicon Coordinator in person at least once per week and/or as directed by the Coordinator.
2. Attend at least 3 recovery support meetings per week. (If in the Matrix program, 2 meetings per week.)
3. Attend Behavioral Health Sessions as scheduled by the counselor/therapist and follow all recommendations.
4. Submit to at least 3 mandatory urine/alcohol tests per week, and submit to any additional random urine/alcohol tests as requested.
5. Attend a status review hearing each week.
6. Obtain a Sponsor/Spiritual Advisor.
7. Attend a Cultural teaching or event, pre-approved by the Coordinator.
8. Within 30 days of beginning Phase II, establish an education/employment plan and present it to the Team for approval.
9. Upon completion of the Matrix program, or when otherwise advised by the Coordinator, implement your educational/employment plan.
10. Maintain your daily planner, and bring it to all appointments with the Coordinator and all review hearings.
11. Perform community work service according to your education or employment hours as set forth in Section VII above, and provide documentation to the Coordinator.
12. Make consistent progress toward your Phase II goals and objectives.
13. Keep track of how long you have been sober.
14. Abide by a curfew of 10:00 P.M. until 6:00 A.M.
15. Before being promoted to Phase III, provide a list of written goals that you want to accomplish in your next phase and present them to the Team.
16. Make a payment of \$125.00 toward your Gwaiak Miicon Fee.
17. OTHER:

I understand and agree to abide by all the conditions of the Phase II contract. Any violation of these conditions may result in possible incarceration and/or other sanctions.

Participant's Signature

Date

Gwaiak Miicon Coordinator's Signature

Date

**GWAIK MIICON
PHASE III – BUILDING PHASE - CONTRACT
*Ningaabii(a)nong (Western Direction)***

Name: _____ **Case Number:** _____

In addition to the “General Terms of the Program” listed on page 5, you will also be required to:

1. Report to Drug Court Coordinator in person at least once per week and/or as directed by the Coordinator.
2. Attend at least 3 recovery support meetings per week.
3. Attend Behavioral Health Sessions as scheduled by your counselor/therapist and follow all recommendations.
4. Submit to at least 3 mandatory urine/alcohol tests each week and submit to any additional random urine/alcohol tests as requested.
5. Attend a status/review hearings every other week.
6. Maintain weekly contact with your Sponsor/Spiritual Advisor.
7. Attend a Cultural teaching or event, pre-approved by the Coordinator.
8. Implement and maintain your education/employment plan.
9. Maintain your daily planner, and bring it to all appointments with the Coordinator and all review hearings.
10. Make consistent progress toward your Phase III goals and objectives.
11. Keep track of how long you have been sober.
12. Abide by a curfew of 11:00 P.M. until 6:00 A.M.
13. Perform community work service according to your education or employment hours as set forth in Section VII above, and provide documentation to the Coordinator.
14. Engage in physical recreation a total of at least 1 hour per week.
15. Before being promoted to Phase IV, provide a list of written goals that you want to accomplish in your next phase and present them to the Team.
16. Make a payment of \$125.00 toward your Gwaiak Miicon Fee.
17. OTHER:

I understand and agree to abide by all the conditions of the Phase III contract. Any violation of these conditions may result in possible incarceration and/or other sanctions.

Participant's Signature

Date

Gwaiak Miicon Coordinator's Signature

Date

**GWAIK MIICON
PHASE IV – MAINTENANCE PHASE - CONTRACT
*Giiwed(i)nong (Northern Direction)***

Name: _____ **Case Number:** _____

In addition to the "General Terms of the Program" listed on page 5, you will also be required to:

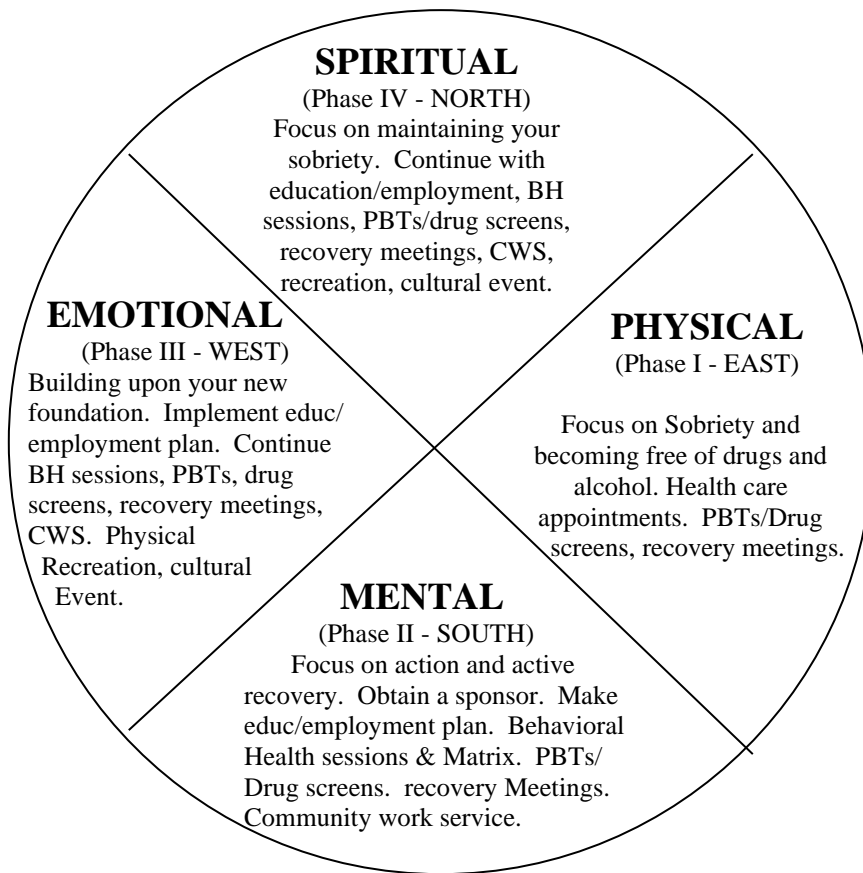
1. Report to Drug Court Coordinator in person at least once per week and/or as directed by the Coordinator.
2. Attend at least 3 recovery support meetings per week.
3. Attend Behavioral Health sessions as scheduled by your counselor/therapist and follow all recommendations.
4. Submit to at least 3 mandatory urine/alcohol tests each week, and submit to any additional random urine/alcohol tests as requested.
5. Attend 1 status/review hearing per month.
6. Maintain weekly contact with your Sponsor or Spiritual Advisor.
7. Attend a Cultural teaching or event, pre-approved by the Coordinator.
8. Maintain your education/employment plan.
9. Maintain your daily planner, and bring it to all appointments with the Coordinator and all review hearings.
10. Make progress toward your Phase IV goals and objectives.
11. Keep track of how long you have been sober.
12. Abide by a curfew of Midnight until 6:00 A.M.
13. Perform community work service according to your education or employment hours as set forth in Section VII above, and provide documentation to the Coordinator.
14. Engage in physical recreation a total of at least 1 hour per week.
15. Make a payment of \$125.00 to pay off your Gwaiak Miicon Fee.
16. OTHER:

I understand and agree to abide by all the conditions of the Phase IV contract. Any violation of these conditions may result in possible incarceration and/or other sanctions.

Participant's Signature

Date

GWAIK MIICON Medicine Wheel





GWAIK MIICON
Participation Agreement and Waiver of Rights

_____ I have read and understand the foregoing participant handbook, including the descriptions of the four phases of Gwaiak Miicon, as well as the possible sanctions that may be imposed by the Court for violation of any of the requirements of the program.

_____ I wish to participate in the Gwaiak Miicon program. I understand that if I successfully complete the Gwaiak Miicon program,

- the conviction as a result of my guilty plea in this case will be expunged or;
- the conviction as a result of my guilty plea in this case will be reduced to a _____ conviction; or
- the conviction in this case will remain on my record.

_____ I have had the Gwaiak Miicon program explained to me and have had sufficient opportunity to ask my attorney and the Coordinator any questions regarding the program.

_____ I understand that my participation in the Gwaiak Miicon program is **voluntary**.

_____ I understand that if I choose to withdraw from the Gwaiak Miicon program or am terminated, the alternative sentence held in abeyance by the Court will immediately be imposed. I further understand that if I do not complete Gwaiak Miicon, I do not get credit for any jail time that I served for Gwaiak Miicon sanctions.

_____ I understand that I must sign all releases requested by the Coordinator so that my progress may be effectively discussed by the Gwaiak Miicon team.

_____ I understand that if I participate in Gwaiak Miicon, I must give up certain legal rights. I hereby voluntarily agree and consent to give up the following legal rights upon my acceptance into Gwaiak Miicon:

- a) The exchange of information regarding clients that occurs between team members in staffing before court appearances is a key component of a successful drug court program. The Judge presiding over Gwaiak Miicon is a part of the staffing any may receive information about me from treatment providers, probation officers, law enforcement, prosecutors, social workers, and others. This is information received by the Judge in my absence is “ex parte communication” that otherwise would not be permitted. I understand and agree and waive any objection to the Judge initiating, permitting, or considering such ex parte communication in my absence. _____

- b) I have no legal right to participate in Gwaiak Miicon. At any time, the Program may be ended, restricted, or reduced, or I may be excluded from it. _____
- c) My behavioral health treatment provider(s) will set my individual treatment plan requirements, which will then be reviewed by the Gwaiak Miicon team. The decisions regarding my progress, compliance with the program requirements and continued participation are in the team's discretion, with the Judge having the final authority. I have no right to appeal the Court's decision. _____
- d) The Court may impose reasonable sanctions, including jail, for non-compliance with the requirements of the program. I agree that sanctions may be imposed immediately by the Court, without a violation petition being filed, my receiving notice or having the opportunity for a full evidentiary hearing. _____
- e) The right to remain silent. _____
- f) The right to a speedy trial. _____
- g) The right to be represented by an attorney at all stages of the Gwaiak Miicon program. _____
- h) The right to assert any privilege as set forth in tribal, state or federal law with respect to any communication I may have with a mental health professional or a medical doctor as a condition of my participation in Gwaiak Miicon. _____

I ACKNOWLEDGE that I have read the above waiver and agree to all its terms and conditions. I have discussed this agreement and waiver with my attorney, and fully understand them, and voluntarily agree to the terms contained herein.

Date

Client's Signature

I ACKNOWLEDGE that as the attorney representing this client, I have explained the foregoing Participant Agreement and Waiver of Rights and other conditions of participation in the Gwaiak Miicon program and I believe that the client's waiver is knowingly, voluntarily, and understandingly made.

Date

Attorney of Record



GWAIK MIICON
Exchange of Information Authorization

I, _____, DOB _____
SSN _____, DLN _____ represent that I am
currently participating in the Gwaiak Miicon Program.

I also represent that my participation in the Gwaiak Miicon Program is a condition of the disposition of a criminal proceeding against me. I hereby request and authorize the exchange of information about my treatment, urinalysis/PBT results and participation in the program between Gwaiak Miicon and the individuals and/or organizations listed below. I authorize this exchange of information only under the conditions listed below: I agree to sign any and all releases necessary to carry out the purposes of this authorization.

Person(s) and organizations to whom disclosure is to be made includes:

- The Gwaiak Miicon Team members
- Behavioral Health Program
- Medical Personnel
- Other: _____

I also understand that this program involves public court hearings at which my treatment and participation in this program may be discussed.

Specific information to be disclosed includes: my identity, assessment finding, diagnosis, urine screen and PBT results, criminal history, participation in the program, and any resulting recommendations. Disclosure may be made in writing or orally, including testimony before any court having jurisdiction over me.

The purpose or need for such disclosure is to provide information so that any Gwaiak Miicon Team member can determine if I have met the conditions which have been imposed for my disposition or status of any criminal proceedings against me. To coordinate and provide treatment services.

This consent shall expire (60) days after participation in the Gwaiak Miicon program ends. I also understand that any disclosures made are bound by Part 2 of Title 42 of the Code of Federal Regulations governing confidentiality of alcohol and drug abuse patient records and that recipients of this information may redisclose it only in connection with their official duties. I agree that I may not revoke this consent given herein until there has been a final disposition of the matter requiring my participation in treatment.

Client's Signature

Date

Gwaiak Miicon Coordinator's Signature

Date



GWAIK MIICON
Payment Agreement

I am aware that there is a \$500.00 administrative fee that is charged to all Gwaiak Miicon participants, to offset a portion of the expense of the program, that must be paid in \$125 increments per phase. I understand that I will not be promoted to a subsequent phase until my current phase fee is paid in full.

Client's Signature

Date

Coordinator's Signature

Date



GWAIK MIICON
Alcohol- and Drug-Free Home Agreement

I _____(Participant) understand that while said I am enrolled in the Gwaiak Miicon Program my residence must be that alcohol- and drug-free. In addition, I agree that my home is subject to random visits by a member of the Gwaiak Miicon Drug Court Team to assure that this is being complied with.

Non-compliance with this agreement can result in a sanction, up to and including, dismissal from the Gwaiak Miicon Program.

Client's Signature

Date

Coordinator's Signature

Date



GWAIK MIICON
Curfew Policy

A curfew of 10:00 p.m. until 6:00 A.M. will be in effect in Phases I and II of Gwaiak Miicon Program. Curfew is 11:00 p.m. – 6:00 a.m. in Phase III and 12:00-6:00 a.m. in Phase IV. As a participant, my curfew is subject to modification or amendment in the team’s discretion. I will be notified if the curfew is modified.

If I am found breaking curfew, I understand that Law Enforcement may detain me and administer a Drug Test and a Preliminary Breath Test if necessary. Law Enforcement will notify the Gwaiak Miicon Coordinator and the matter will be reviewed at the next Court Hearing.

Client’s Signature

Date

Coordinator’s Signature

Date



GWAIK MIICON
Drug Testing Protocol

Frequent, random and observed urine testing is a key component of Gwaiak Miicon. It is used as both a motivator, and a measure of compliance. Accordingly, I agree to submit to random drug tests when requested to do so by any representative of the Gwaiak Miicon Team. I understand that I will be tested at least three (3) times a week while in the Gwaiak Miicon Program. I must call into the Court’s main telephone line at 635-4963 each morning by 8:30 a.m. to find out if I must report for a drug or alcohol test. If I am advised to report for a drug and/or alcohol test, I must appear at the Court by 9:00 a.m. I understand that I may also randomly be tested in the field.

I understand that I will be allowed to provide only one urine sample for a drug screen. I understand that if I contest a positive test result, I can request that it be sent to the lab for confirmation. The confirmation test will use gas chromatography/mass spectrometry (GC/MS) and other appropriate chemical testing protocols. I understand that if the lab confirms the positive result, I will be liable for the expense of the testing and I will be subject to an additional sanction for dishonesty to the court.

I will be prepared to drug test each and every day. The consumption of large quantities of liquids prior to testing may result in the sample diluted thus being deemed “invalid.” Any attempts to “flush” my system by excessive fluid intake, or by the use of “commercial cleansing products,” may be considered forms of adulteration and could result in sanctions being imposed. If I refuse to take a drug test or do not provide an adequate drug test than it will be treated as a positive drug screen.

I understand that I will test in full view of an attending same-sex staff member if available, to ensure the integrity of the sample. Any attempt to manipulate or adulterate a sample, will result in sanctions, which could include termination from the program.

I understand that I shall be required to remove any coats or jackets prior to testing. In addition, any long sleeve shirts, blouses or sweaters must be pushed or rolled up. I must empty my pockets and wash my hands and thoroughly dry them immediately prior to testing, and wash and dry them thoroughly after testing.

Client’s Signature

Date

Coordinator’s Signature

Date



GWAIK MIICON
Medication Contract

I understand that I am responsible for everything that I put in my body and that I have been ordered not to consume alcohol and narcotics, and any other mind-altering substances including but not limited to, marijuana, Kratom, K2/Spice, bath salts, Ketamine, and Tramadol/Ultram. I also understand that I must have permission from the Gwaiak Miicon Team **BEFORE** consuming any medications or supplements, whether prescribed or over-the-counter.

I agree to **NOT** consume any herbal products, over-the-counter supplements, or Weight Reducing Products unless previously approved from the Gwaiak Miicon Drug Court Team. I agree to **NOT** consume any product that may contain poppy seeds, alcohol, or any other substance that may yield a positive drug or alcohol screen, including cough syrup. If I am sick and considering taking an over-the-counter medication, I will notify my probation officer immediately (no matter the day or time), stating exactly what I am going to take. If I am called to drug test, I will bring any such over-the-counter medication to my drug test and show the collector.

When seeking medication, I agree to advise medical personnel of my situation and the need to take **non-narcotic** medication. I will sign a release/authorization that allows free and open discussions between my physician and the Court. A discussion with the participant and prescribing doctor will occur regarding any medication that could interfere with the participant's recovery. Potential alternatives to, or abstinence from, prescribed medications that may interfere with recovery shall be considered. I will not discontinue any prescribed medications without consulting my probation officer, therapist, and prescribing doctor. Ingesting medication without a valid prescription will result in a violation of probation and sanction. I also agree that I will abide by the Gwaiak Miicon policy on prescription medications.

I understand that if I fail to get permission from Gwaiak Miicon before consuming any medication, I may be sanctioned by the court.

Listed below are the medications and/or supplements that I am currently taking. I understand that I must constantly update this list with the Coordinator in order to keep the Team informed of my current medications and supplements. I understand that I must bring the prescription bottle/container for review and pill counts at the request of the Court at any time.

<u>MEDICATION</u>	<u>DOSAGE</u>	<u>PRESCRIBING PHYSICIAN</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Client's Signature

Date

Coordinator's Signature

Date

**Sault Ste. Marie Chippewa Tribal Court
Gwaiak Miicon
Participant's Weekly Progress Report**

Name:

Case Number: CR

Judge: _____

Probation Officer: _____

* **Days of sobriety** _____

Please describe your progress since your last court appearance:

Number of Recovery Meetings: _____ Number of Meetings w/ Therapist: _____

Number of Meetings w/ Probation: _____ Number of Matrix sessions: _____

Number of Drug Screens: _____

Employment/ Education:

Recreation:

Community Service:

Family:

Friends:

Feelings about yourself:

Any Additional Comments:

Date

Signature



GWAIK MIICON
Community Work Service Locations

- 1. Traditional Medicine**
906-632-5200
2864 mun Street, Sault Ste. Marie, MI 49783
- 2. Language and Culture Department**
906-635-6050
2 Ice Circle, Sault Sainte Marie, MI 49783
- 3. Chippewa County Animal Shelter**
906-632-2519
3660 Mackinac Trail, Sault Ste. Marie, MI 49783
- 4. Salvation Army**
906-632-6521
Eric Gilbert: 906-203-9237
132 Spruce Street, Sault Ste. Marie, MI 49783
- 5. Habitat for Humanity**
906-632-6616
400 eridan Drive, Sault Ste. Marie, MI 49783
- 6. Feeding America West Michigan**
Kristen Corbiere: 231-622-5286
kccorbiere@gmail.com
FeedWM.org
- 7. Hearthside Assisted Living**
906-635-6911
1501 W. 6th Ave, Sault Ste. Marie, MI 49783
- 8. Any Church Organization**
- 9. Soo Theatre Project, Inc.**
906-632-1930
534 Ashmun Street, Sault Ste. Marie, MI 49783
- 10. Chippewa County Community Foundation**
906-635-1046
511 Ashmun Street Suite 202, Sault Ste. Marie, MI 49783
- 11. Hope Chest Resale Shop**
906-643-7360
250 Ferry Lane, St. Ignace, MI 49781
- 12. Cedar Post Thrift Shop**
906-484-9512
362 M-134, Cedarville, MI 49719
- 13. Goodwill**
906-208-4202
2510 N. Ashmun Street, Sault Ste. Marie, MI 49783