

WORKING THROUGH RECURRENCE with the COURT & INDIVIDUALS on probation

Opioid Use Disorder (OUD) is a chronic disease effectively treated with Medication for Opioid Use Disorder (MOUD). As a chronic condition, an individual may return to opioid use, even while engaged in treatment. This is a normal and frequent occurrence for individuals.

However, this means you may be required to report the recurrence to the court as a result of graduated sanction or mandatory reporting policies. While these reporting requirements are out of your control, you can contextual violation reports with information that provides the judge a full picture of how the individual is working through their disease.

Consider including several strength-based metrics and behaviors as part of your formal report you submit to the court.

STRENGTH BASED METRICS

Managing their OUD

- Has the individual begun working on their triggers for drug use? If so, which triggers have they identified? What behaviors are they working on to manage their triggers?
- In what ways has the individual successfully managed their triggers thus far?

Treatment

- How long have they been enrolled in treatment?
- How often do they attend treatment and how many appointments have they made?
- Have they reported any side effects of MOUD? If so, how have they been managing these side effects?

Return to Use

- When was the latest drug use? What was the situation and what triggers were present during this return to use?
- Average days between return to use? How has this improved over time?

VIOLATION REPORT LANGUAGE

Below includes language you can use to contextualize reporting to the court. This language emphasizes the strengths of the person on probation and the improvements they have made thus far on their recovery journey

Managing their OUD <<<

I began working with (Name) on (first contact date). Since this date, they are actively working on identifying and managing their triggers. They have identified (#) primary triggers, including (name triggers).

We have worked together to develop an action plan about managing these triggers when they come up. We have identified (#) ways to manage them, including (name managing behaviors).

Treatment <<<

(Name) enrolled in MOUD on (date). Since this date, they have made (#) or X% of appointments scheduled. While they have had a positive experience on MOUD, they have also reported side effects: (name). We have developed a plan together to manage these side effects including (detail).

Return to Use <<<

As opioid use disorder is a chronic disease and return to use is a part of the recovery process, there has been some return to use for (name). This report includes (#) of positive UA tests for (substances). On average, however, they go (#) of days between using. This is an improvement by (#) days from their initial intake on probation, and suggests treatment and support is working.

On the latest return to use on (date), (name) has identified (#) triggers present at the time, including (name). We have discussed why they were unable to use the behaviors we planned to manage these triggers. Based upon these events the progress (name) has made I am recommending...

Funding for this initiative was made possible by grant no. U01DA0500442 from NIDA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

