

A Court Counseling Program
9525 Katy Freeway, Suite 428
Houston, Texas 77024

The purpose of A Court Counseling Program (ACCP) is to build healthy relationships by ending substance and behavioral addictions, abuse, and violence. The IOP is 18 weeks long meeting every Tuesday and Thursday from 6 – 8 pm and 2 - 12 step or SMART Recovery Meetings a week, the SOP meets Tuesday evenings from 6 – 8 pm and 1 – 12 step or SMART Recovery meeting a week. Both the SOP and IOP participants are to complete a written version of steps 1 – 5 with the help of a sponsor or if in SMART Recovery 6 SMART Recovery ABC processes. They are also to have a sign in sheet signed every week and shown to me weekly before group and proof of their written step work progress brought in every 2 weeks.

A Court Counseling Program also offers 4-hour Saturday Classes on Anger Management, Anti-Theft, Thinking for a Change classes. These classes are \$80.00 each 4-hour block.

Some people are required to take more than 4-hours and they just come on additional Saturdays at \$80.00 a Saturday.

A. FEES

- ◆ The fee per group session is dependent on the program and the client's down payment. Remit all fees in cash.
- ◆ Group session fees are due at the start of each session. ACCP may refuse admittance without payment, which could result in the client being counted absent. Fees will not be refunded after the service is delivered.

B. ATTENDANCE

- ◆ The client agrees to attend and complete all aspects of their program to receive a Certificate of Completion.
- ◆ We expect the client to arrive by 5:45pm to sign in, pay for the group, show us completed work, as group begins at 6pm. Clients arriving after 6:05pm will not be allowed in groups and will be counted as an unexcused absence.
- ◆ We will charge \$20 for each absence that is not called 24 hours in advance.
- ◆ If two (2) unexcused absences occur client will be dismissed from the program and must restart program
- ◆ Restarting the program means no credit for sessions attended; the count starts from zero.
- ◆ If a client does "restart" he will be required to pay a \$50 restart fee, plus any balance due.

C. PARTICIPATION – GROUP

- ◆ Clients are responsible for their participation. ACCP expects clients to discuss their attitudes, feelings, beliefs, and behavior with themselves and others. We expect clients to take part in discussions and exercises.
- ◆ ACCP expects clients to refer to all persons, present or not, in respectful terms.
- ◆ We expect written assignments to show thought and effort.
- ◆ Facilitators sometimes assign homework. It is due at the start of the next session. Failure to turn in homework will result in no credit for that session and be treated as AN UNEXCUSED ABSENCE.
- ◆ Program staff determines completion from the program. Successful completion criteria include but are not limited to the co-operation with the group leader, compliance with Working Agreement and all ACCP policies, active involvement in discussions, and personal progress toward accountability and nonviolence.
- ◆ Noncompliance may result in dismissal from the program or additional requirements to client, as determined by ACCP staff.
- ◆ Clients are to attend 12 step or SMART Recovery Groups. In the SOP program clients are to attend 12 (1 a week) weekly - in the IOP this number jumps to 2 weekly AA/NA/ACA/AL-Anon/CODA or other type of 12 step group, or the same amount of meetings in SMART Recovery, In (SMART Recovery they are to complete 6 ABC processes with a SMART Recovery buddy) and (in 12 step groups they are to complete, in writing, the first 5 steps, with their temporary sponsors help). Clients are to bring this work in for review. They are also to have a sign-in sheet signed at their respective meetings and bring this in for review as well. Their consistency will be noted and turned in to their PO.

D. PROGRAM EVALUATION

- ◆ For purposes of program evaluation, we may contact partners and/or ex-partners three (3) and twelve (12) months following client's completion of the program. We will ask clients to sign a consent form for this.

E. CONFIDENTIALITY

- ◆ To provide the best conditions for therapeutic work, clients are entitled to confidentiality about their identity and other information shared in a group. Any information ACCP releases to a third party will be limited to that which is required by referral and sources. Each client is also required to keep the identity and personal information shared by group members confidential.
- ◆ There are limits to confidentiality, which include:
 - a. When a client is believed to be in imminent danger to him/herself or others.
 - b. When a client reveals information that suggests child or elder abuse or abuse of a person with a handicap, staff are obligated by law to inform the Texas Department of Family and Protective Services.
 - c. When a judge through a court-ordered subpoena requires records and/or testimony.
 - d. When a client provides written consent

F. OBSERVERS

- ◆ Observers may occasionally sit in a group. ACCP requires them to sign a confidentiality statement.
- ◆ Observers may include student interns, trainees, other professionals, or community members.

G. COMMUNICATION

- ◆ Clients are responsible for providing the Program Director with any changes in address or phone number(s).
- ◆ Call the Program Director if you are going to miss the group for a legitimate reason; you may need to provide documentation.
- ◆ In emergency situations, call 911.

H. PARTICIPATION- PERSONAL

- ◆ I agree with the program goals of safety, ending violence, healthy relationships based on equality and accountability.
- ◆ I agree to be non-violent, non-abusive, totally alcohol and other drug free, (except for use of prescription medications), while participating in the ACCP program.
- ◆ I will comply with all conditions of my court order, probation, personal bond, or other referral source.
- ◆ I will not bring weapons of any kind on the premises.
- ◆ If I demonstrate threatening, disruptive, or inappropriate behavior, or come to group under the influence of alcohol or drugs, I understand I will be asked to leave and counted absent, If I do not leave the premises when asked by any ACCP staff, I will be subject to termination from the program and removal from the program by local legal authorities.
- ◆ I agree to inform my group facilitator of any violent or intoxication incident or police call to my home resulting from a family disturbance and to discuss this in group or individually.

Costs of the ACCP programs are already at rock bottom. If one can afford to use alcohol, drugs and or nicotine, they can easily afford this extremely inexpensive program.

My normal fee is \$150.00 an hour BUT here prices have been greatly discounted for your benefit.

Anger management \$80.00 each 4hr. program

Anti-Theft \$80.00 each 4-hr. program

Anti-Shoplifting \$80.00 each 4hr. program

Cognitive Life Skills-Effective Decision Making \$80.00 each 4hr program.

Parenting Skill Training \$80.00 each 4-hr. program

IOP for chemical and behavioral addictions 18 weeks, meeting 2 times a week from 6-8pm + outside meetings \$1,800.00 or \$110.00 a week.

SOP for chemical and behavioral addictions 12 weeks, meeting 1 time a week from 6-8pm plus outside meeting \$600.00 or \$55.00 a week.

Co-dependency and affected family members therapy group 1 time a week each 2-hr. group
\$65+.00

We offer non-medical detoxification services using the NADA auricular acupuncture
protocol. This 30-day procedure is \$2,000.00

We offer individual and family therapy for addiction, co-dependency, unresolved grief,
PTSD and other traumas and we treat all behavioral addictive behaviors. The cost for
these services is \$150.00 per 1-hour session.

A Court Counseling Program (ACCP) reserves the right to change program fees, program
policies and procedures at any time, and for those changes to become effective immediately upon
adoption, and for them to apply to all current and future participants.

I understand the ACCP makes no guarantee as to the results of their efforts.

By my signature I understand and agree to the conditions of the ACCP as outlined above, and I
acknowledge that I have received a copy of this agreement. Failure to comply with these
agreements and rules may result in my suspension or dismissal from the program and, if the
court ordered, legal consequences.

I have read, understand, and agree to comply with all the above.

Signature and date: _____

Staff Signature and date: _____