This document serves as an agreement between the Madison County Problem Solving Courts (or “the Court”) and Aspire regarding the referral of Madison County Problem Solving Court participants to Aspire.

Pursuant to the Indiana Judicial Center rules for problem solving courts, this agreement is intended to verify and specify the extent of cooperation between Madison County Problem Solving Courts and Aspire. Aspire agrees to accept for mental health/substance abuse treatment the clients referred by the Madison County Problem Solving Courts in accordance with the guidelines established by the Indiana Judicial Center, the Division of Mental Health and Addictions, and the facilities’ charters. It is the responsibility of Aspire to provide treatment of Madison County Problem Solving Court participants who are referred by the Court. Aspire will resolve any disagreement with the Madison County Problem Solving Courts about treatment of Court participants before making any changes in their treatment status.

Communication between the Madison County Problem Solving Courts and Aspire will be carried out in accordance with all state and federal confidentiality codes, specifically 42CFR part 2. The Madison County Problem Solving Courts agree to release all pertinent information to Aspire upon receiving written consent from the participant. In turn, Aspire agrees to provide the Court with documentation concerning the treatment plan, weekly progress reports, significant treatment plan alterations, client non-compliance, drug screens, completion reports, and all other information that enables the Court to perform its participant-monitoring responsibilities. Aspire will permit Madison County Problem Solving Court staff to sit in and observe participants in the treatment setting upon reasonable request and scheduling.

Aspire will provide the Madison County Problem Solving Courts with a copy of the Division of Mental Health and Addictions’ Addictions Services Provider certification and/or other applicable program certificates, a list of available services, an outline of the exact nature of any group structured activities, program fee schedules, payment schedule information, and any other information regarding treatment programs involving Madison County Problem Solving Courts referrals.
Any financial obligations incurred by the participant at **Aspire** are the sole responsibility of the participant. The Madison County Problem Solving Courts may, at times, have funds available to help offset the fees of participants who are referred for treatment at **Aspire**. This will be determined on a case-by-case basis before a participant begins his/her treatment at **Aspire**.

This agreement will remain in effect unless terminated, in writing, by either party. Such written notice must be given 60 days prior to the planned date to terminate this agreement.

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Edward Fry, Coordinator  
Madison County Problem Solving Courts

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Richard Raven, President  
Aspire Representative

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7-16-10  
Date

7-28-10  
Date
March 5, 2012

To Whom It May Concern:

Aspire is a private, not-for-profit community mental health center that serves as a treatment provider for the Madison County Problem-Solving Court and has been an active and committed participant and key mental health and drug court member since initial planning began in December, 1997.

Aspire roles and responsibilities include facilitating mental health and chemical dependency evaluations on any participant referred by the problem-solving court to assess clinical eligibility and appropriateness for the court program and to provide a full continuum of behavioral health care to the court participants. Aspire staff members participate in the problem-solving court client-review meetings.

Aspire is very proud to be a part of the Madison County Court program. We at Aspire are committed to being an active partner with the problem-solving court team and will continue to fulfill our roles and responsibilities to the court and its participants. The holistic approach of the problem-solving model provides opportunities for a true assessment and actualization of a lifestyle change which is critical for ongoing recovery and productive citizenship. We will do whatever we can do to create a strong, open partnership with the court so that each participant can be provided with the services they need to recover from their mental health and/or substance abuse problem and attain a personal sense of pride and hope for the future.

Aspire appreciates our partnership with the Problem-Solving Court System of Madison County and will continue to support its growth and development both now and in the future.

Sincerely,

Susie Maler, LCSW, LCAC, BCD
Clinical Director, Outpatient Services
Aspire Indiana
2020 Brown Street
Anderson, IN 46016
State of Indiana
Family and Social Services Administration
Division of Mental Health and Addiction

COMMUNITY MENTAL HEALTH CENTER
REGULAR CERTIFICATION

THIS IS TO CERTIFY: That Certification is hereby granted to

Aspire Indiana, Inc.
dba Aspire Indiana
9615 East 146th Street, Noblesville, IN 46060

THIS CERTIFICATION is subject to the provisions of IC 12-21 and rules of the Division of Mental Health and Addiction. This Certificate is not assignable or transferable, and is subject to revocation at any time by the Director of the Division of Mental Health and Addiction for failure to comply with the laws of the State of Indiana or the rules issued thereunder.

IN WITNESS WHEREOF, this CERTIFICATE is issued by:

[Signature]
DIRECTOR

Effective: 06/01/2011
Expires: 05/31/2014
Reference: 430-0-CMHC
This document serves as an agreement between the Madison County Problem Solving Courts (or “the Courts”) and Sower of Seeds regarding the referral of Madison County Problem Solving Court participants (Drug Court, Reentry Court, Mental Health Court, etc.) to Sower of Seeds.

Pursuant to the Indiana Judicial Center rules for problem solving courts, this agreement is intended to verify and specify the extent of cooperation between Madison County Problem Solving Courts and Sower of Seeds.

Sower of Seeds agrees to accept for mental health/substance abuse treatment the clients referred by the Madison County Problem Solving Courts in accordance with the guidelines established by the Indiana Judicial Center, the Division of Mental Health and Addictions, and the facilities’ charters. It is the responsibility of Sower of Seeds to provide treatment of Problem Solving Court participants who are referred by the Court. Sower of Seeds will resolve any disagreement with the Madison County Problem Solving Courts about treatment of Court participants before making any changes in their treatment status.

Communication between the Madison County Problem Solving Courts and Sower of Seeds will be carried out in accordance with all state and federal confidentiality codes, specifically 42CFR part 2. The Madison County Problem Solving Courts agree to release all pertinent information to Sower of Seeds upon receiving written consent from the participant. In turn, Sower of Seeds agrees to provide the Court with documentation concerning the treatment plan, weekly progress reports, significant treatment plan alterations, client non-compliance, drug screens, completion reports, and all other information that enables the Court to perform its participant-monitoring responsibilities. Sower of Seeds will permit Madison County Problem Solving Courts staff to sit in and observe participants in the treatment setting upon reasonable request and scheduling.

Sower of Seeds will provide the Madison County Problem Solving Courts with a copy of the Division of Mental Health and Addictions’ Addictions Services Provider certification and/or other applicable program certificates, a list of available services, an outline of the exact nature of any group structured activities, program fee schedules, payment schedule information, and any
other information regarding treatment programs involving Madison County Problem Solving Court referrals.

Any financial obligations incurred by the participant at Sower of Seeds are the sole responsibility of the participant. The Madison County Problem Solving Courts may, at times, have funds available to help offset the fees of participants who are referred for treatment at Sower of Seeds. This will be determined on a case-by-case basis before a participant begins his/her treatment at Sower of Seeds.

This agreement will remain in effect unless terminated, in writing, by either party. Such written notice must be given 60 days prior to the planned date to terminate this agreement.

Edward Fry, Coordinator
Madison County Problem Solving Courts

Sower of Seeds Representative

Date

Date
State of Indiana
Family and Social Services Administration
Division of Mental Health and Addiction

ADDITION SERVICES PROVIDER OUTPATIENT CERTIFICATION

THIS IS TO CERTIFY: That a Certification is hereby granted to

Sowers of Seeds Counseling, Inc.
dba S.O.S. Counseling
1009 South Central Avenue, Anderson, IN 46016

THIS CERTIFICATION is subject to the provisions of IC 12-23 and rules of the Division of Mental Health and Addiction. This Certificate is not assignable or transferable, and is subject to revocation at any time by the Director of the Division of Mental Health and Addiction for failure to comply with the laws of the State of Indiana or the rules issued thereunder.

IN WITNESS WHEREOF, this CERTIFICATE is issued by:

[Signature]

DIRECTOR

Effective: 06/01/2011
Expires: 05/31/2013
Reference: 1217-0-ASO
MEMORANDUM OF UNDERSTANDING

SECTION ONE.
ENGAGEMENT OF SERVICES

The Madison County Drug Court proposes to engage the services of Treatment Provider/Counselor, [name] to commence on Dec. 3, 2010.

SECTION TWO.
DUTIES

The Treatment Provider/Counselor functions as part of the Madison County Drug Court team. This position is responsible for: the conduct of in-house, Intensive Out-Patient treatment and Relapse Prevention counseling of drug court participants; the development of individual treatment plans; the documentation of participant activity; the referral to community resources; and participation in weekly Drug Court staff meetings and other administrative meetings as requested. The Treatment Provider/Counselor will function as an independent contractor. The amount of time spent, the methods to be used and the tools needed shall be determined by the Treatment Provider/Counselor consistent with the needs of the Drug Court program and its participants.

SECTION THREE.
BEST EFFORTS OF CONTRACTOR

The Treatment Provider Counselor agrees to, at all times, faithfully, industriously, and to the best of her ability, perform all duties to be undertaken in a professional manner and proposed relationship between the Treatment Provider/Counselor and the Madison County Drug Court shall continue as long as services are being provided to the satisfaction of the Madison County Drug Court Judge.

SECTION FOUR.
TERMS OF COMPENSATION

The Treatment Provider/Counselor is participant fee-funded. The engagement of Treatment Provider/Counselor shall, at all times, remain at the pleasure of the court. The Judge of the Drug Court may terminate this agreement with or without cause and, without prior notice, at any time.
SECTION FIVE.

COMPENSATION

The compensation for the position of Treatment Provider/Counselor is to be $13.00 per participant per counseling session. The periodic payments to Treatment Provider/Counselor will be bi-weekly and claims-based. Said claims shall be certified as correct by the Treatment Provider/Counselor, and approved by the Drug Court Coordinator and the Drug Court Judge before submission of same to the Madison county Auditor for payment. There will be no State and Federal withholding taxes and Medicare and Social Security contributions will not be deducted from the Treatment Provider/Counselor's bi-weekly payments. The Treatment Provider/Counselor will be responsible for the payment of all taxed due on said compensation.

SECTION SIX.

PRIVATE PRACTICE LIMITATIONS

The Drug Court Treatment Provider/Counselor shall not engage in other private consulting or counseling practices that could require appearing before the Madison County Superior or Circuits Courts.

Thomas Newman, Jr., JUDGE
Madison County Drug Court

Kathleen Noel, Coordinator
Madison County Drug Court

I understand and accept the terms of engagement outlines in each paragraph of this Memorandum of Understanding.

Maxine Cook, "no face to face" 12-30-2010

Date
State of Indiana
Family and Social Services Administration
Division of Mental Health and Addiction

ADDITION SERVICES PROVIDER OUTPATIENT CERTIFICATION

THIS IS TO CERTIFY: That a Certification is hereby granted to

Maxine L. Cook
dba Integrity Recovery Services
5698 South Cladwell Drive, Pendleton, IN 46064

THIS CERTIFICATION is subject to the provisions of IC 12-23 and rules of the Division of Mental Health and Addiction. This Certificate is not assignable or transferable, and is subject to revocation at any time by the Director of the Division of Mental Health and Addiction for failure to comply with the laws of the State of Indiana or the rules issued thereunder.

IN WITNESS WHEREOF, this CERTIFICATE is issued by:

[Signature]
DIRECTOR

Effective: 08/09/2011
Expires: 08/31/2013
Reference: 1628-0-ASO
MEMORANDUM OF UNDERSTANDING

SECTION ONE.

ENGAGEMENT OF SERVICES

The Madison County Drug Court proposes to engage the services of Treatment Provider/Counselor, to commence on December 30, 2010.

SECTION TWO.

DUTIES

The Treatment Provider/Counselor functions as part of the Madison County Drug Court team. This position is responsible for: the conduct of in-house, Intensive Out-Patient treatment and Relapse Prevention counseling of drug court participants; the development of individual treatment plans; the documentation of participant activity; the referral to community resources; and participation in weekly Drug Court staff meetings and other administrative meetings as requested. The Treatment Provider/Counselor will function as an independent contractor. The amount of time spent, the methods to be used and the tools needed shall be determined by the Treatment Provider/Counselor consistent with the needs of the Drug Court program and its participants.

SECTION THREE.

BEST EFFORTS OF CONTRACTOR

The Treatment Provider Counselor agrees to, at all times, faithfully, industriously, and to the best of her ability, perform all duties to be undertaken in a professional manner and proposed relationship between the Treatment Provider/Counselor and the Madison County Drug Court shall continue to long as services are being provided to the satisfaction of the Madison County Drug Court Judge.

SECTION FOUR.

TERMS OF COMPENSATION

The Treatment Provider/Counselor is participant fee-funded. The engagement of Treatment Provider/Counselor shall, at all times, remain at the pleasure of the court. The Judge of the Drug Court may terminate this agreement with or without cause and, without prior notice, at any time.
SECTION FIVE.

COMPENSATION

The compensation for the position of Treatment Provider/Counselor is to be $13.00 per participant per counseling session. The periodic payments to Treatment Provider/Counselor will be bi-weekly and claims-based. Said claims shall be certified as correct by the Treatment Provider/Counselor, and approved by the Drug Court Coordinator and the Drug Court Judge before submission of same to the Madison county Auditor for payment. There will be no State and Federal withholding taxes and Medicare and Social Security contributions will not be deducted from the Treatment Provider/Counselor's bi-weekly payments. The Treatment Provider/Counselor will be responsible for the payment of all taxes due on said compensation.

SECTION SIX.

PRIVATE PRACTICE LIMITATIONS

The Drug Court Treatment Provider/Counselor shall not engage in other private consulting or counseling practices that could require appearing before the Madison County Superior or Circuits Courts.

Thomas Newman, Jr., JUDGE
Madison County Drug Court

Kathleen Noel, Coordinator
Madison County Drug Court

I understand and accept the terms of engagement outlines in each paragraph of this Memorandum of Understanding.

Date: 12/30/10
Date: 12/30/10

12/22/10
STATE OF INDIANA
MITCHELL E. DANIELS

Personal Information:
Name: Susan Jameson Goode
Address: 6034 West Pleasant Valley Drive
         Anderson, IN 46011
Date of Birth: 08/31/1945

License Information:
Number Issued: 34001607A
License Type: Clinical Social Worker
Status: Active
Issue Date: 02/22/1993
Expiration Date: 04/01/2012
Obtained By: Endorsement
Disciplinary Action: None

Valid as of: Sun Sep 18 11:25:55 AM EDT 2011