

Jackson County Wellness Court Referral

Inquiries can be directed to: JAC.MHprograms@ojd.state.or.us however, referrals must come from the defense attorney.

Do not proceed with the referral if:

- Cases are closed or outside of Jackson County Circuit Court
- Defendant is not facing prison on their charges
- Defendant is a registered sex offender or facing sex offenses
- Defendant is facing Measure 11 charges (without opt-out) and/or the State opposes treatment court

Defendant's Name & DOB:

Date of Referral:

Current housing:

Assigned Defense & Prosecution:

Contact info:

Case Numbers:

**If Defendant is out of custody, they should be directed to view a WC session on any Tuesday at 1pm, courtroom 203.*

Referral Checklist:

I. Defendant has a *Qualifying Mental Diagnosis (*must select one*):

- Schizophrenia
- Schizoaffective disorder
- Bipolar 1 disorder
- Major Depressive Disorder – specified as severe, recurrent, with psychosis

Diagnosis is established by:

****If none can be selected, do not proceed with this referral.***

NOTE: “Unspecified Schizophrenia Spectrum or Other Psychotic Disorder” does not guarantee eligibility.

II. Defendant agrees to (*must check all to proceed*):

- Take an antipsychotic and/or mood stabilizers
- Abstain from alcohol, marijuana, and illicit substances
- Submit to random alcohol/drug screens
- Participate in mental health AND substance abuse treatment
- Live in housing approved by the WC Team, in Jackson County

III. Describe the nexus between the *qualifying mental diagnosis and the criminal charges:

IV. Additional information:

This referral will not be considered without indictments and police reports, and any referenced forensic evaluations/medical records. The WC Coordinator will review the documents, meet with the applicant, and request additional records ***before a case staffing will be scheduled.***

All documents shall be sent to: JAC.MHprograms@ojd.state.or.us