

## Talbert House Prevention Services in Clinton and Warren Counties

Talbert House Prevention Services seeks to develop strong, resilient individuals and communities. Based on the public health model, Prevention Services strives to equip individuals with the necessary attitudes, behaviors, and skills to achieve personal well-being, satisfaction, and resilience. In addition, Prevention Services works with community partners to develop and strengthen conditions that ensure communities are safe places to live and thrive.

### ***Alternatives: An In-school Response to Violation of Substance Use Policies***

**Goal:** To provide targeted support and education for students regarding substance use related topics. Students will discuss how to identify and manage emotions, strengthen social and coping skills, maintain positive social interactions, and learn about the negative impacts of substance use. Note: This is a prevention education group, *not a therapy group*. Mental health diagnoses will not be discussed. Group/Individual members will be asked not to discuss information shared in the group with others outside the group. Talbert House Prevention Services is funded by the Mental Health Recovery Board of Warren and Clinton Counties. There is no charge to the family or school district for the *Alternatives* program. Education sessions will be during school hours.

**Questions:** # \_\_\_\_\_ @ \_\_\_\_\_ h \_\_\_\_\_

Thomas (tom) Bowman  
Tobacco/Vape Intervention Provider  
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† \_\_\_\_\_

Danielle Burris  
Tobacco/Vape Intervention Provider  
Dannielle.Burris@talberthouse.org  
† \_\_\_\_\_

**Please return this consent form as soon as possible.**

**Student Name** \_\_\_\_\_ has been referred to the following intervention:

- ☐ Fresh Start (Tier 1) first offense with vape/tobacco- two 45minute sessions
- ☐ New Direction (Tier 2) second offense with vape/tobacco-four 45minute sessions
- ☐ Commitment to Change (Tier 3) third offense with vape/tobacco OR first offense with any other drug or alcohol- six 45minute sessions

I agree to participate in the targeted education and intervention group offered by Talbert House Prevention Services. I agree to keep all information shared private and will not discuss with others outside the group. I understand that the facilitators are "mandated reporters" and must disclose statements related to risks of harm to self or others or if someone else is harming me. All other information will remain confidential.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

My child, \_\_\_\_\_ has permission to participate in *Alternatives*, the targeted education and intervention group, provided by Talbert House Prevention Services at Wilmington City Schools.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_