FOR THE COMMUNITY | BY THE COMMUNITY

THE POWER OF COLLECTIVE IMPACT

Restore Hope 2026 Conference

CLEARING THE PATH

A PRACTICAL GUIDE TO LEGAL RESOLUTION SERVICES

Presented by: Caden Chapman and Nikki Stone

JUDICIAL SERVICES

The Judicial Services Division of Restore Hope includes:

- **SMART JUSTICE SERVICES**
- **LEGAL RESOLUTION SERVICES**
- **10:33 REENTRY PROGRAM**

MEET THE TEAM:

Caden Chapman

LEGAL ANALYST

Janet Camp

DIRECTOR OF JUDICIAL SERVICES

Zac George

JUDICIAL SERVICES SPECIALIST

Jennifer Hawthorne

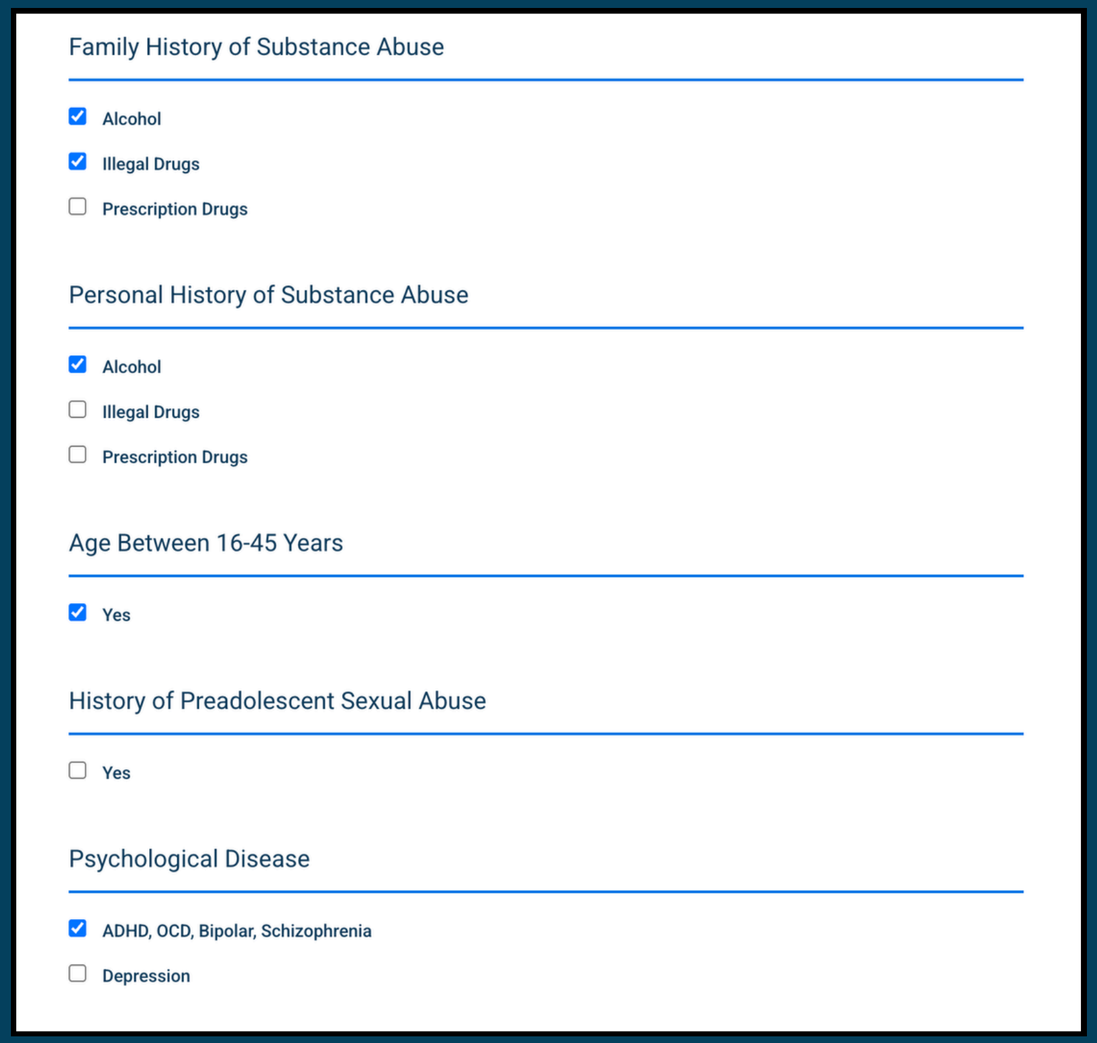
10:33 REENTRY SPECIALIST

Nikki Stone

LEGAL ANALYST

Legal Resolution Services: A voluntary support service that helps individuals remove legal barriers by connecting them with attorneys and other legal resources.

RESTORE HOPE
COMMUNITY JUSTICE INNOVATIONS

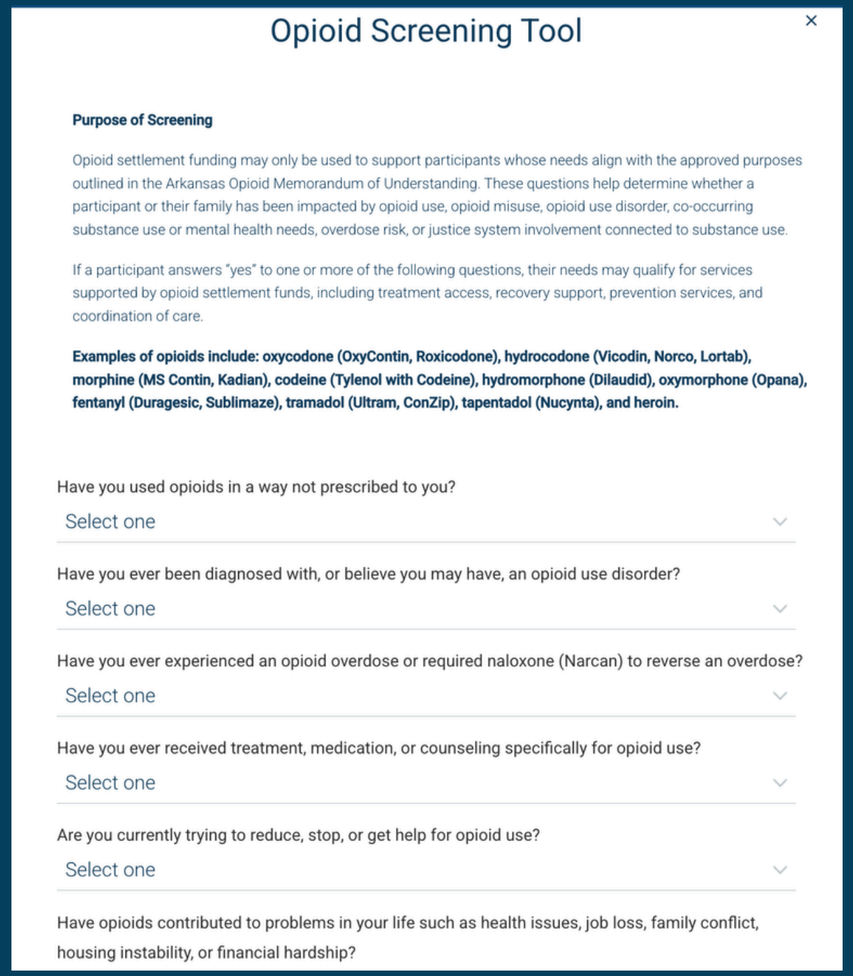


Opioid Risk Tool

- Provides insight into the scope of the opioid epidemic
- Keep it conversational
- Checked boxes are normal

****REQUIRED FOR ALL PARTICIPANTS****

Opioid Screening Tool



Opioid Screening Tool

Purpose of Screening

Opioid settlement funding may only be used to support participants whose needs align with the approved purposes outlined in the Arkansas Opioid Memorandum of Understanding. These questions help determine whether a participant or their family has been impacted by opioid use, opioid misuse, opioid use disorder, co-occurring substance use or mental health needs, overdose risk, or justice system involvement connected to substance use.

If a participant answers "yes" to one or more of the following questions, their needs may qualify for services supported by opioid settlement funds, including treatment access, recovery support, prevention services, and coordination of care.

Examples of opioids include: oxycodone (OxyContin, Roxicodone), hydrocodone (Vicodin, Norco, Lortab), morphine (MS Contin, Kadian), codeine (Tylenol with Codeine), hydromorphone (Dilaudid), oxymorphone (Opana), fentanyl (Duragesic, Sublimaze), tramadol (Ultram, ConZip), tapentadol (Nucynta), and heroin.

Have you used opioids in a way not prescribed to you?

Select one

Have you ever been diagnosed with, or believe you may have, an opioid use disorder?

Select one

Have you ever experienced an opioid overdose or required naloxone (Narcan) to reverse an overdose?

Select one

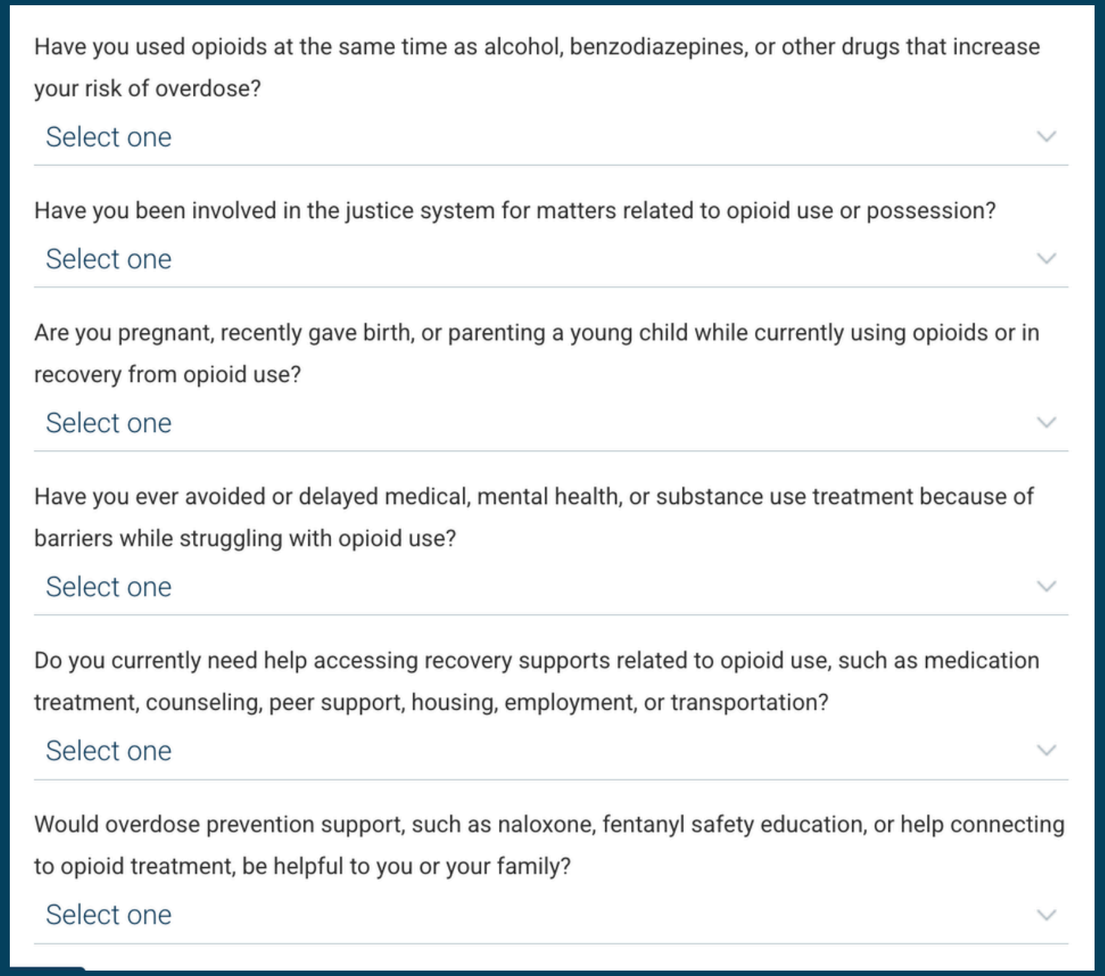
Have you ever received treatment, medication, or counseling specifically for opioid use?

Select one

Are you currently trying to reduce, stop, or get help for opioid use?

Select one

Have opioids contributed to problems in your life such as health issues, job loss, family conflict, housing instability, or financial hardship?



Have you used opioids at the same time as alcohol, benzodiazepines, or other drugs that increase your risk of overdose?

Select one

Have you been involved in the justice system for matters related to opioid use or possession?

Select one

Are you pregnant, recently gave birth, or parenting a young child while currently using opioids or in recovery from opioid use?

Select one

Have you ever avoided or delayed medical, mental health, or substance use treatment because of barriers while struggling with opioid use?

Select one

Do you currently need help accessing recovery supports related to opioid use, such as medication treatment, counseling, peer support, housing, employment, or transportation?

Select one

Would overdose prevention support, such as naloxone, fentanyl safety education, or help connecting to opioid treatment, be helpful to you or your family?

Select one

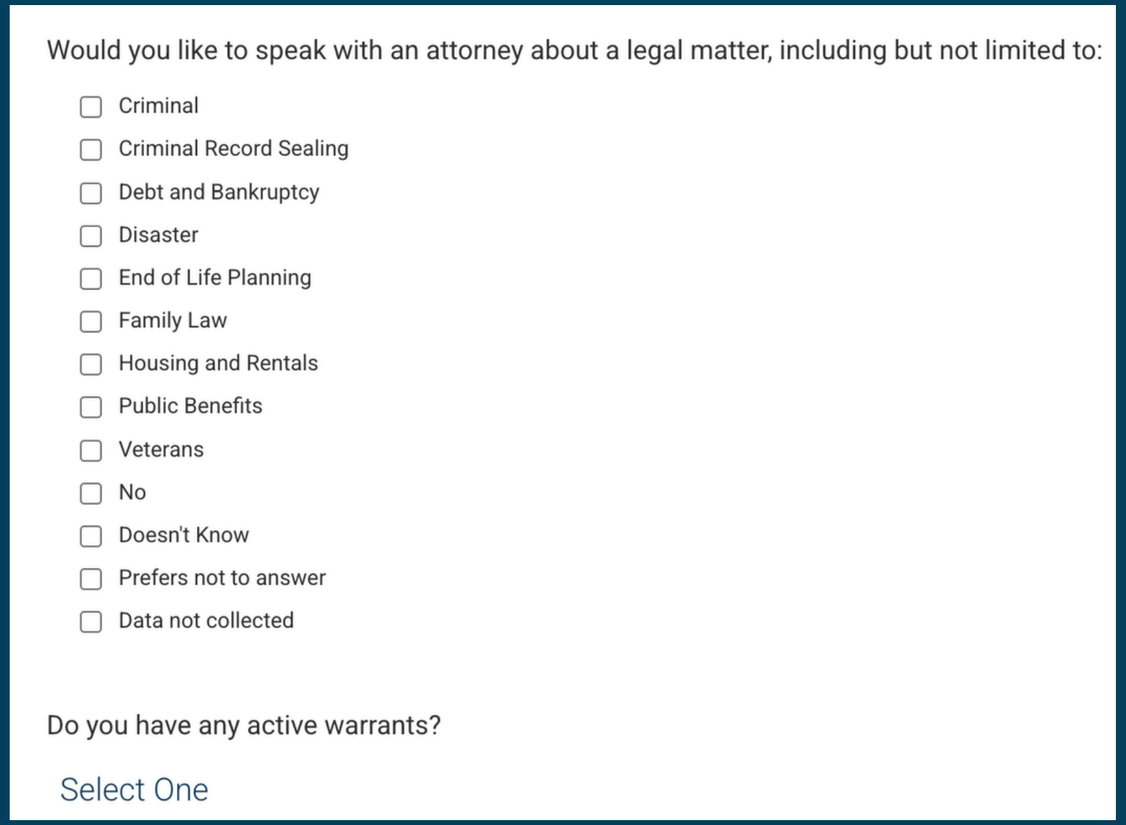
****REQUIRED FOR ALL PARTICIPANTS****

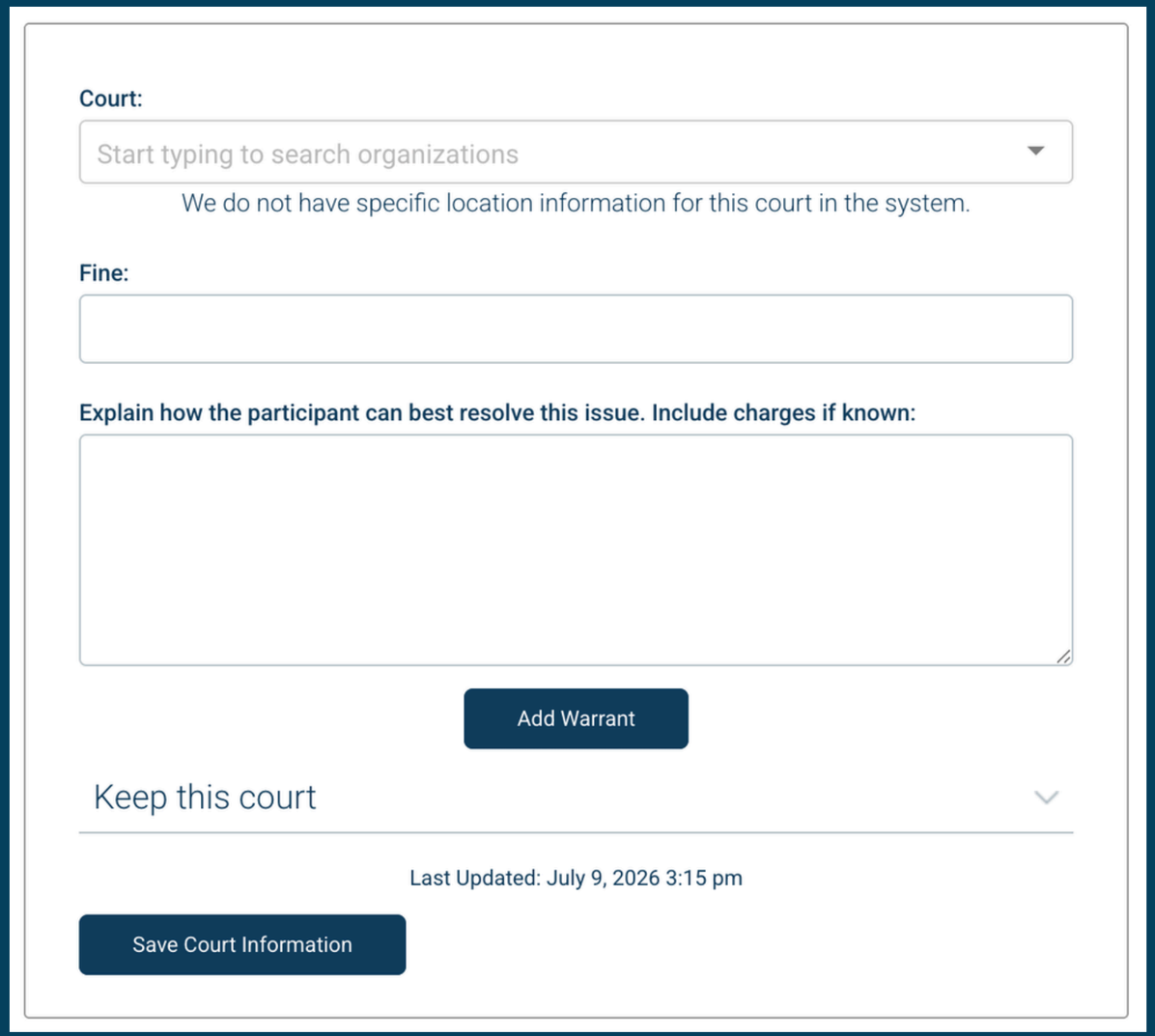
Legal Section of Assessment

The More Info The Better!

Watch for Inconsistencies

Guides LRS Investigations





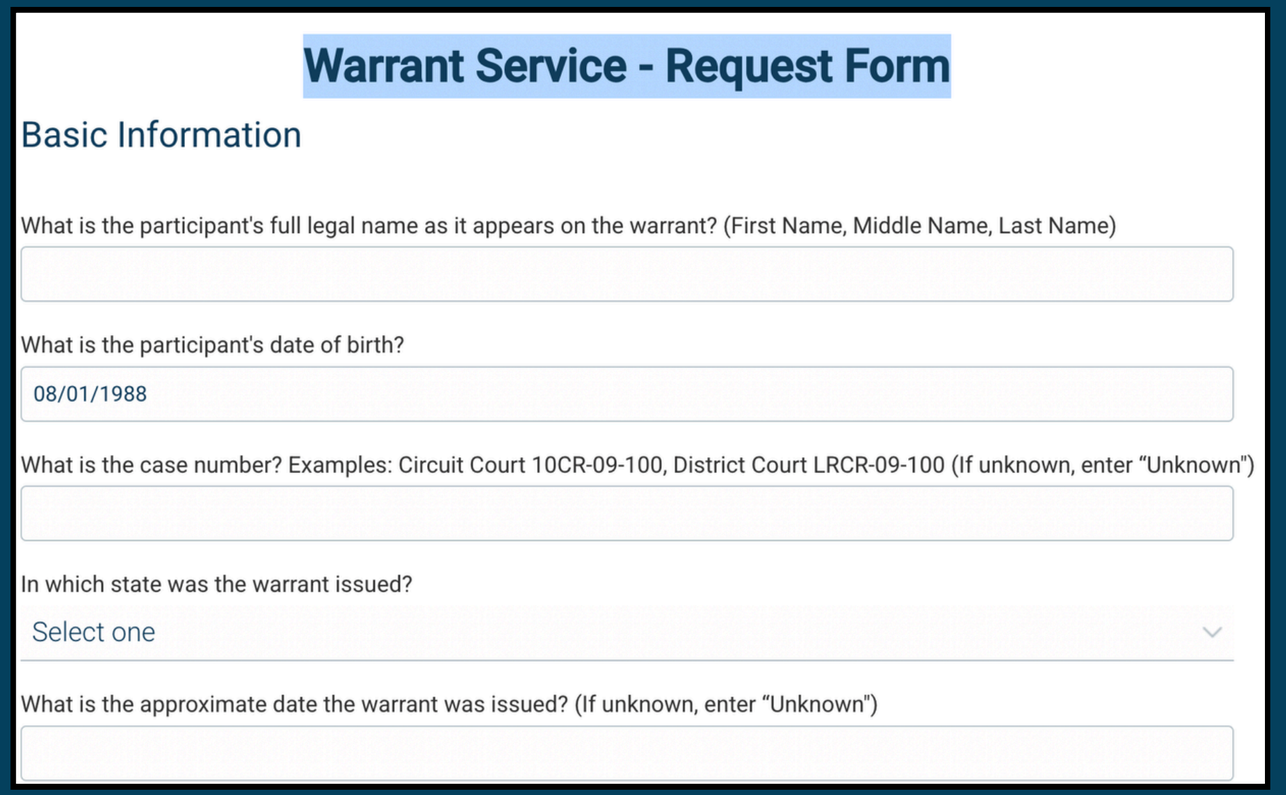
Driver's License Reports

- "Arkansas Driver..." Consent Form Required.
- Reevaluated Every 30 Days Until Valid
- Tag LRS On CCMB If A Review Is Needed
- State ID vs. DL

Warrants

-Submit the Warrant Service – Request Form For Help Reviewing Outstanding Warrants

-More Detail = Better Results



Warrant Service - Request Form

Basic Information

What is the participant's full legal name as it appears on the warrant? (First Name, Middle Name, Last Name)

What is the participant's date of birth?

08/01/1988

What is the case number? Examples: Circuit Court 10CR-09-100, District Court LRCR-09-100 (If unknown, enter “Unknown")

In which state was the warrant issued?

Select one

What is the approximate date the warrant was issued? (If unknown, enter “Unknown")

Fine & Fee Investigations

Fine and Fee Investigation

Full Name Associated with Case *Required

Please enter the name that was used when this case was filed

Case Number *Required

If unknown, put unknown.

Court Location *Required

Please enter city and county of court

Court Type *Required

Is this a misdemeaner (District Court) or felony (Circuit Court)? If unknown, just type unknown.

Date of charge

Please enter the date of the charge. If exact date isn't known, please put as close as possible date.

Other Information

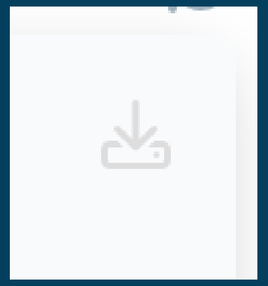
Please enter any other helpful information or questions you may have about this case.

We would love to help you gather information!

- Fine/Fee Payment Information
- Questions? Contact Legal Resolution Services via HopeHub.

Ability to Pay

- For Participants Who Need Help Modifying Fine/Fee Payment Arrangements
- Complete With Participant



- Download/Print From Coordinated Care Tab
- Participant Submits To Court
- Court Reviews Financial Status For Modification

Record Sealing

Record Sealing - Request Form

- Only 1 Case Per Form
- It’s A Process - It Takes Time
  - Attorney Review
  - Prosecution Objection Time Window
- Questions – Reach Out!

Record Sealing - Tracking Form

- All Updates Tracked Here
- Petition & Order – Status Tracked From Request Received Through Granting

Office of Child Support Enforcement

Arkansas Department of Finance and Administration, Office of Child Support Enforcement - Authorization to Release Information To Designated Third-Party

Authorization Form
Allows LRS to speak with OCSE

LRS Post Information Here

Arkansas Department of Finance and Administration, Office of Child Support Enforcement - Customer Return Information Form

Need to Request A Modification?
Contact the local Child Support Enforcement Office

Child Maltreatment Registry

Option 1

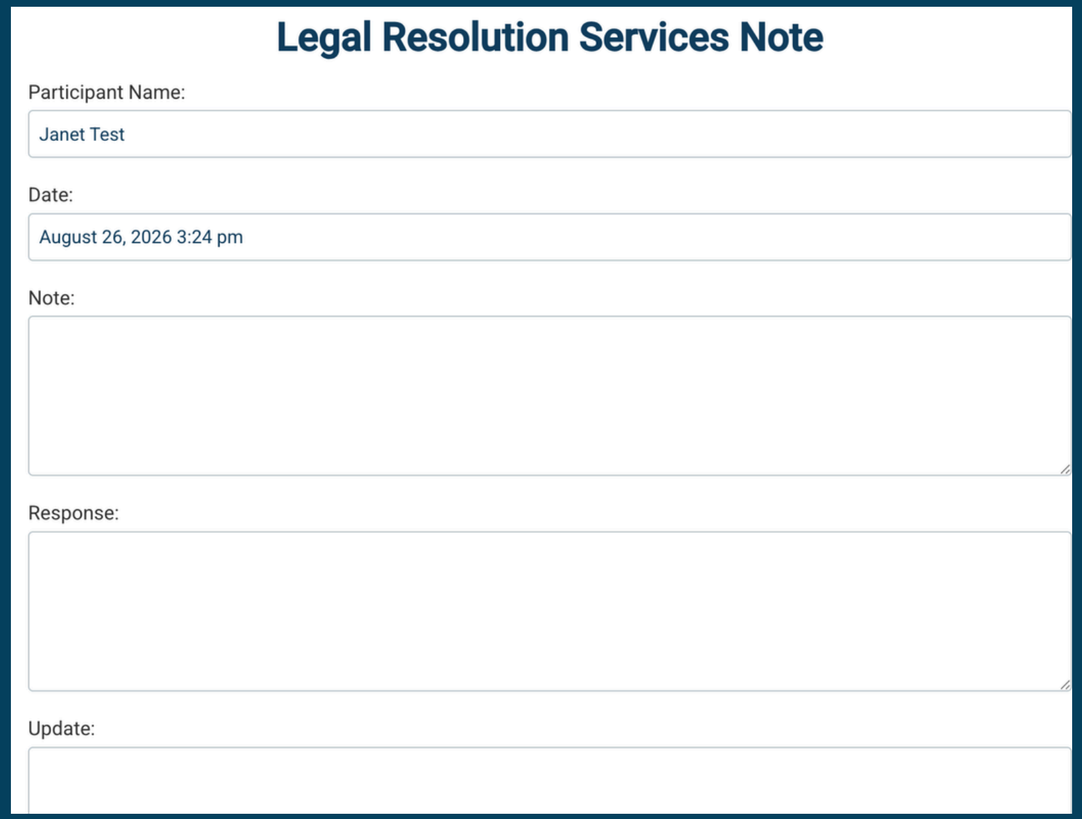
Child Maltreatment Central Registry Removal Request Form

On Registry → Wants Removal: Removal Request Form → LRS Returns Packet, Checklist, and Instructions

Option 2

Unsure → LRS Note → Contact Information Provided - Registry Will Only Confirm With Participant

General Questions



Legal Resolution Services Note

Participant Name:

Janet Test

Date:

August 26, 2026 3:24 pm

Note:

Response:

Update:

Have A Question?

Tag LRS on CC Message Board When Messaging & Responding

Tag *ONLY* the LRS Profile

THANK YOU

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