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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Completed by: | |  |  | Title/Position: | |  |  | Date: |  |
| County: |  | | | |  | |  | | |
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**Instructions:**

Please complete the questions below. Please be as specific and detailed as possible with your answers. The SC-CMS Project Team will use your answers to discuss business processes with you and to help with the configuration of Odyssey for your implementation.

**Therapeutic Courts**

1. What, if any, Therapeutic Courts are currently operating in your court? (e.g. Family, Drug, Mental Health)

1. How are cases assigned to these Therapeutic Courts? Are judges assigned to any cases as part of the assignment to Therapeutic Court?

1. How do you indicate in SCOMIS or on the physical case file that the case is assigned to a Therapeutic Court?

1. Are there any other unique scheduling or data entry needs for Therapeutic Courts?

1. Do you currently use a case management system in support of your Therapeutic Courts?

1. If yes, what system is currently in use? (e.g., Excel, Access, DCCM, etc.)

1. Who enters data into your current system?

1. Who are your team members?  Please provide their name and agency.

1. How do your team members receive case information and status reports?

1. How do team members submit their status or treatment reports?

**Pretrial Services**

**1.** Do you have a Pretrial Services Unit?

2. If yes, are they part of Superior Court or do they work under another section or agency?

3. What JIS programs do they currently have access to? (e.g., ASRA)

**List Existing Forms and Reports**

1. Please list any forms (in Word format, if possible) the court originates at any time during a Therapeutic Court process.

1. Please list any reports necessary for completion of a Therapeutic Court process.

Please submit the completed worksheet and supporting documentation, if any, to [sccmsproject@courts.wa.gov](mailto:sccmsproject@courts.wa.gov).