# APPLICATION PACKET AND CONTRACT RENEWAL FOR SFY2025 STATE FUNDING

Therapeutic Courts in Courts of Limited Jurisdiction

The Administrative Office of the Courts is pleased to continue the availability of state funding to support new and existing therapeutic courts in courts of limited jurisdiction for SFY2025 (July 1, 2024 – June 30, 2025).

Although this is ongoing funding, contract renewal forms and budget updates are required each state fiscal year. *Please note: AOC state funding for therapeutic courts in courts of limited jurisdiction may not supplant already existing local, state, or federal monies for this purpose. Continuing AOC funding for prior AOC funding is not considered supplanting.*

In this packet, you will find:

* Timeline of events….…….…………………………………… [Page 1](#_Timeline_of_Events)
* Application/Renewal Form….……………………………….. [Pages 2-7](#_SFY2025_Application_&)
* Frequently Asked Questions………………………………… [Pages 8-9](#_Frequently_Asked_Questions)
* Terms & Definitions…………….…………………………….. [Pages 10-12](#_Terms_&_Definitions)
* Resources for Accessing Treatment & Support Services... [Pages 13-14](#_Resources_for_Accessing)
* Allowable & Non-allowable Spending Categories…….…… [Attachment A](#_Attachment_A)
* Sample Budget……………………………………….……….. [Attachment B](#_Attachment_B)

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| Timeline of Events | |
| **Activity** | **Date** |
| Applications – Announcement & Publication | April 12, 2024 |
| Zoom Office Hours | April 16, 2024 at 12:00pm  April 18, 2024 at 8:00am |
| Applications Due | May 17, 2024 at 5:00pm |
| Application/Renewal Review Start | May 20-31, 2024 |
| Notification Letter &/or Contract | June 14, 2024 |

# SFY2025 Application & Renewal Form

Please submit to [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov)

**SECTION 1 – CONTACT INFORMATION**

Please enter contact information for person(s) completing this application or renewal

1. Court Name
2. Court Mailing Address
3. Applicant Name
4. Applicant Email
5. Applicant Phone

Please enter contact information for signing agent(s) or person(s) who can authorize acceptance of funds, if approved

1. Signatory Name
2. Signatory Email
3. Signatory Phone

**SECTION 2 – PROGRAMMATIC DETAILS**

1. Please select the category that best represents your request. Please select only one for each application
   * New Therapeutic Court
     + Program Type (e.g. Community Court, Veteran’s Court, Mental Health/Behavioral Health Court, SUD/Drug Court etc.):
   * Existing Therapeutic Court, adding a new court/program type
     + New Program Type:
   * Existing Therapeutic Court, but not currently funded through the AOC CLJ Therapeutic Court Program
   * Existing Therapeutic Court, exists under the CLJ Therapeutic Court Funding administered by the AOC and are renewing funding agreement
     + **STOP HERE and COMPLETE SECTION 4 ONLY**
2. Please briefly describe the following:
   1. The number of participants you currently serve or plan to serve in a contract year (July – June)
   2. Referral process (how do/will participants enter the program)
   3. Entry Criteria (allowable legal charges, must have a diagnosis, etc.)
   4. Risk-Needs Assessment Tools – if no tools are being used, please describe which one you may utilize (see [resources pgs. 9-10](#_Resources_for_Accessing))
   5. Please describe any formal agreements your court has with behavioral health agencies that provide evidence-based treatment and intervention (e.g. Moral Reconation Therapy (MRT), Acceptance and Commitment Therapy, etc. See [resources pgs. 9-10](#_Resources_for_Accessing)) *Please note: if chosen for funding, evidence-based and/or best practice standards will be required.*
   6. Substance use testing process

**SECTION 3 – ADMINISTRATIVE DETAILS**

This section is to inform the AOC of the possible technical assistance or training opportunities we can provide. A “no” answer will not jeopardize a funding decision. Please answer the following questions **using 350 words or fewer**.

1. Does your program track data? If yes, how is it tracked? What data do you track? As a requirement of this funding source, courts must complete the Washington Therapeutic Court Evaluation and Review (WATER) tool. *Support from the AOC will be provided.*
2. Has your program built and implemented a policies and procedures manual? If so, please include it with your application. If not, when do you anticipate completion? *The AOC can support you in the completion of this requirement.*
3. Equity and inclusion means ensuring equitable access, services, and outcomes for all sociodemographic and sociocultural groups. Does your program have a diversity, equity, and inclusion plan? If so, please include it with your application. If not, describe your intention to create a plan and please include a timeline. *The AOC will require that courts receiving funding under this program develop an equity and inclusion plan tailored to their therapeutic court program.*
4. Please list community partners (e.g. behavioral health agencies, law enforcement, social services agencies, etc.) your court collaborates with or plans to collaborate with to address the needs of your target population. Please include copies, if available, of the Memorandums of Understanding (MOUs) or letter of support.
5. What sources of funding currently contribute to the operations of your therapeutic court?
6. Have you submitted application for other funding? If yes, please state the funding source, the dollar amounts awarded or sought, the operations supported, and when/if the funding begins.
   * No
   * Yes, already awarded funds
   * Yes, we have an application under consideration

**SECTION 4 – EXISTING THERAPEUTIC COURTS**

Please provide your budget with justification below or attach to this application. Answer the following question **using 600 words or fewer.**

1. What steps have to taken to improve your best practices during the SFY2024 contract?

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# Frequently Asked Questions

**Q: Who can apply for these funds?**

**A:** New and existing therapeutic courts in Courts of Limited Jurisdiction (CLJ) are eligible for this funding. Types of therapeutic courts include but are not limited to:

* Substance Use Disorder (SUD) or Drug Court
* Mental Health (MH) or Behavioral Health (BH) Court, which may include participants with developmental disabilities
* DUI/DWI Court
* Veteran’s Court
* Domestic Violence (DV) or Domestic Violence Intervention Treatment (DVIT) Court
* Problem Gambling Court
* Community Court
* Other treatment court types

**Q: How are these awards prioritized?**

**A:** CLJ courts currently receiving funding to operate their therapeutic courts will be prioritized. New applications will be considered once a reconciliation of remaining funds is complete.

**Q: What does the reimbursement process look like?**

**A:** You will work with your fiscal agent to submit A19 forms with supporting documents to the AOC for reimbursement. You may choose to submit an A19 form on a monthly or quarterly cycle. Submit your A19s to [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov) AND to [Payables@courts.wa.gov](mailto:Payables@courts.wa.gov)

**Q: Can we move money between spending categories?**

**A:** Yes. You may move money between categories up to 10% of each spending category without AOC approval. Please notify [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov) for tracking purposes.

**Q: I have a previous award with unspent funds. When do I need to close that agreement out?**

**A:** The last day to use SFY2024 funds is June 30, 2024 and the final A19 must be submitted by July 15, 2024.

**Q: How can funds be spent?**

**A:** Spending categories include (see [Attachment A](#_Attachment_A)):

* Personnel Costs – staff salaries and benefits
* Staff Equipment & Technology – office supplies, cell phones and bills, computers and computer accessories, software licenses and subscriptions, etc.
* Team Training & Travel – conference registration fees and related travel expenses
* Treatment Services – lab and toxicology testing, MH/BH services, other costs not covered by participants’’ insurance, etc.
* Recovery Supports – transportation, hygiene items, cell phones and minutes, food, recovery housing, etc.
* Other Direct Costs – other miscellaneous expenses directly related to program operations.

# Terms & Definitions

**Best Practice Standards:** Best practices are the working standards or ethical guidelines that provide the best course of action, in this case, for Adult Treatment Courts.

**Criteria:** Refers to a set of standards, principles, or conditions used to evaluate, judge, or make decisions about something. Criteria are often established to assess the suitability of a potential participant.

**Data:** Data refers to raw facts, figures, and statistics that are collected, processed, and analyzed to derive meaningful information. In its most basic form, data consists of individual pieces of information without context or interpretation. When organized and interpreted, data becomes a valuable resource that can inform decision-making, support research, and provide insights into various phenomena. Data can be qualitative or quantitative and can take various forms, including text, numbers, images, audio, and more.

Types of Data:

**Qualitative Data:** Descriptive information that cannot be easily measured or quantified. Examples include text, images, and audio.

**Quantitative Data:** Numerical information that can be measured and expressed with numbers. Examples include counts, measurements, and statistical figures.

Data Sources:

**Primary Data:** Collected directly from original sources through methods such as surveys, experiments, or observations.

**Secondary Data:** Derived from existing sources, such as databases, research studies, or historical records.

**Evidence-based therapy (EBT):** Refers to therapeutic interventions and practices that are supported by scientific evidence demonstrating their effectiveness in treating specific mental health conditions or psychological issues. The goal of evidence-based therapy is to use approaches that have been rigorously researched and shown to produce positive outcomes in a systematic and reliable manner.

**Cognitive-Behavioral Therapy (CBT):** Focuses on identifying and changing negative thought patterns and behaviors to improve mental health.

**Dialectical Behavior Therapy (DBT):** Developed to treat borderline personality disorder, DBT combines cognitive-behavioral techniques with acceptance strategies.

**Acceptance and Commitment Therapy (ACT):** Emphasizes acceptance of thoughts and feelings, mindfulness, and commitment to behavior change.

**Letters of support:** A letter of support is a document written to express endorsement, encouragement, or approval for a person, project, cause, or idea. It is typically written by someone who has a vested interest in the success of the recipient or the initiative being supported. Letters of support are often used in funding applications.

**MoU:** A memorandum of understanding (MoU) is a type of agreement between two or more parties. It expresses a convergence of will between the parties, indicating an intended common line of action.

**Policies:** Policies are statements that outline an organization's principles, values, and overall direction. They set the tone for decision-making and behavior within the organization.

**Procedures:** Procedures are detailed, step-by-step instructions or guidelines that outline the specific actions to be taken in various situations. They are more specific than policies and provide a roadmap for carrying out tasks or processes.

**Referral Process:** A referral process is a systematic and structured approach through which individuals are recommended or direct others to a particular service or program.

**Supplanting:** Grant supplanting refers to a situation where funds provided by a grant/funding source are used to replace or substitute existing funds that were originally allocate for a particular purpose.

# Resources for Accessing Treatment & Support Services

**Resource links to assist with application completion and program planning:**

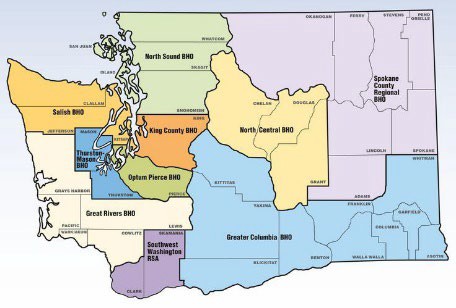
* [Adult Treatment Court Best Practice Standards - All Rise](https://allrise.org/publications/standards/)
* [Defining Drug Courts: THE KEY COMPONENTS (ojp.gov)](https://www.ojp.gov/pdffiles1/bja/205621.pdf)
* [E-Learning Center - All Rise](https://allrise.org/trainings/e-learning/)
* [Fact-Sheet-Risk-Assessment.pdf (allrise.org)](https://allrise.org/wp-content/uploads/2023/05/Fact-Sheet-Risk-Assessment.pdf)
* [NACM-2023-DEI-Guide\_Online.pdf (nacmnet.org)](https://nacmnet.org/wp-content/uploads/NACM-2023-DEI-Guide_Online.pdf)
* [Sample Documents Archive - All Rise](https://allrise.org/sample-documents/)
* [Training Archive - All Rise](https://allrise.org/trainings/)

**Supportive participant services contacts:**

* Participants should be referred to [Washington Health Plan Finder](https://www.wahealthplanfinder.org/us/en/home-page.html) 1-800- 562-3022 or [askmagi@hca.wa.gov](mailto:askmagi@hca.wa.gov) to complete an application for Medicaid or find a navigator (when appropriate)
* [SSI/SSDI Outreach, Access, and Recovery (SOAR) | SAMHSA](https://www.samhsa.gov/soar)
* [Housing and Recovery through Peer Services Program (HARPS)](https://www.hca.wa.gov/assets/program/harps-fact-sheet.pdf)
* [Housing and Essential Needs (HEN) Referral Program | DSHS (wa.gov)](https://www.dshs.wa.gov/esa/community-services-offices/housing-and-essential-needs-hen-referral-program)
* [Supportive Housing Services | DSHS (wa.gov)](https://www.dshs.wa.gov/altsa/stakeholders/supportive-housing-services)

**The Behavioral Health Administrative Service Organization** (BHASO) in your region are an integral partner to this work and should be able to assist you in making connections with behavioral health treatment and other useful community behavioral health initiatives and supports.

|  |  |
| --- | --- |
| **BHASO Region** | **Phone Number** |
| Great Rivers | (360) 953-5117 |
| Greater Columbia | (509) 737-2475 |
| North Central (Carelon) | (360) 787-8633 |
| North Sound | (360) 416-7013 |
| Pierce (Carelon) | (253) 313-2275 |
| Salish | (360) 337-4422 |
| Southwest (Carelon) | (360) 787-8633 |
| King | (206) 263-8997 |
| Spokane | (509) 477-4570 |



# Attachment A

|  |  |
| --- | --- |
| FY2025 Use of Funds | |
| **Allowable Expenses**  Supporting documents are required for all allowable expenses. See what’s required under each spending category. | **Unallowable Expenses** The list of unallowable expenses is not exhaustive. If you are unsure whether your expense is allowable, please contact [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov) for clarification before making a purchase. |
| **Personnel Costs**  Personnel salaries and benefits for staff while working on therapeutic court duties or procedures  Court Staff including:   * Coordinator * Case Manager * Peer Support * Prosecution * Defense * Probation * Judicial Officers   + Judges   + Pro Tem Judges   + Commissioners   Supporting documents must list staff member name, staff member title, pay period   * Payroll Ledgers * Pay Stubs   Please highlight/write amount charged to AOC funding on supporting documentation and ensure it matches amount listed on A19. | **Personnel Costs**  Court Staff including:   * Security Personnel * Supporting the salary/benefits of any staff member not related to the therapeutic court |
| **Staff Equipment & Technology**  Includes equipment, supplies, software, and IT maintenance for staff that support the program   * Computers * Cell Phones * Printers/Fax Machines * Staff Desk equipment and supplies   + Office Chairs for Staff   + Office Desk for Staff   + Desk Phone   + Keyboard/Mouse   + Monitor(s)   + Headsets   + Computer Webcams   + Desk Organizers/Storage   + Pens/Pencils   + Paper/Notebooks   + Paper Clips/Binders/Stapler   + Other Office supplies * IT Maintenance and Tech Support * Software Subscriptions * Supplies for community meetings and staff retreats   Supporting documents must list name of vendor, purchase date, amount paid, and method of payment   * Receipts * Invoices   Please highlight/write amount charged to AOC funding on supporting documentation and ensure it matches amount listed on A19. | **Staff Equipment & Technology**   * Furniture   + Couches   + Beds   + Armoire   + Atelier   + Chaise longue   + Chifforobe   + Dresser   + TV Stands   + Bookcases   + Accent Chairs   + Conference Table * Software   + *New* subscriptions for case management software   + OCourt Subscriptions * Other Technology   + A/V equipment for conference rooms |
| **Team Training/Travel**  Training for program staff on the use of Risk-Needs-Responsivity (RNR) assessments and evidence-based treatment modalities  Exceptions to below list can be submitted for preapproval to [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov)  Prioritized Trainings   * WSADCP trainings/conferences * All Rise trainings/conferences     Other Eligible Training Suggestions   * NADCP trainings/conferences * Center for Justice Innovation (CJI) trainings/conferences   Travel expenses related to training   * Meals (per diem rate) * Air travel – travel insurance/refundable tickets recommended * Lodging (per diem rate) – the AOC will not reimburse until after checkout * Transportation   + Mileage   + Car rental   + Parking   + Other Transport     - Ferries     - Taxis     - Uber/Lyft     - Bus fare     - Shuttle fare     - Subway/Link/Railway fare   Supporting documents must list names and titles of staff attending, name of vendor, purchase date, amount paid, and method of payment   * Receipts * Invoices   Please highlight/write amount charged to AOC funding on supporting documentation and ensure it matches amount listed on A19. | **Team Training/Travel**   * Training and travel expenses not pre-approved by AOC staff * Staff mileage to/from work site |
| **Treatment Services**  Treatment services not covered by participants’ insurance or co-insurance, costs that are deemed unaffordable to the participants, and compliance monitoring. Participants are encouraged to apply for Apple Care.   * Participant Medical Insurance Deductibles and Spend Downs * Therapeutic Services not covered by participant insurance but recommended by treatment or therapeutic court staff (i.e. DV treatment) * Lab & Toxicology Testing * Treatment Staff/Peer Support contracted by the court   + Mental Health Services   + Peer Support Services   + SUDp   + Veteran’s Support Services   Supporting documents must list name of vendor, purchase date, amount paid, and method of payment   * Receipts * Invoices   Please highlight/write amount charged to AOC funding on supporting documentation and ensure it matches amount listed on A19. | **Treatment Services**   * Professional Licensing Fees * Services that are eligible and covered via participants medical insurance (i.e. Ongoing treatment for a participant with Medicaid/private insurance in lieu of local BHA) |
| **Recovery Supports**  Other services for participants that are not accessible through other local, state, or federal programs, services meant to ensure participants’ success in program. *Not an exhaustive list*   * Participant Transportation   + Bus Passes   + Uber/Lyft Rides   + Car Services   + Other Transit Services * Food & Beverages   + Meals   + Snacks   + Water   + Nonalcoholic Beverages * Cell Phones through a checkout program * Cell Minutes * Hygiene Products * Recovery Housing- when all other supports have been exhausted * Education   + Parenting Classes   + Financial Literacy * Graduation supplies   Supporting documents must list name of vendor, purchase date, amount paid, and method of payment   * Receipts * Invoices   Please highlight/write amount charged to AOC funding on supporting documentation and ensure it matches amount listed on A19. | **Recovery Supports**   * Gas cards * Gift Cards * Gifts * Logoed apparel |
| **Other Direct Costs** Miscellaneous expenses directly related to program. Requires pre-approval. Submit to [CLJTherapeuticCourtsApplications@courts.wa.gov](mailto:CLJTherapeuticCourtsApplications@courts.wa.gov) | **Other Direct Costs** |

# Attachment B

Sample Budget

Below is MS Excel table to be used for calculating your own totals. Use this for completing Section 4 of the application or attach your own budget and justification.

