



FAMILY WELLNESS COURT

Superior Court Of California,  
 County of El Dorado  
 495 Main Street Placerville, CA 95667  
[www.eldoradocourt.org](http://www.eldoradocourt.org)

Shingle Springs Band Of Miwok Indians  
 P.O. Box 531, Shingle Springs, CA  
 95682 [www.shinglespringsrancheria.com](http://www.shinglespringsrancheria.com)



1. Please rate the importance of the following in your decision to enter the Family Wellness Court

**Circle one number**

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. Possibility to have my charges reduced or dismissed	1	2	3
b. Possibility to not go to jail/juvenile detention	1	2	3
c. Possibility to get treatment for my alcohol/drug problem	1	2	3
d. Possibility to get a job	1	2	3
e. Possibility to get back with my family	1	2	3
f. Possibility to get back into/on track with school	1	2	3
g. Other:	1	2	3
	1	2	3

2. Please rate the importance of the following in your decision to remain in the Family Wellness Court

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. The opportunity to talk with the judges about your problems and progress	1	2	3
b. The quality of services provided	1	2	3
c. The drug/alcohol testing	1	2	3
d. The possibility of consequences for not complying	1	2	3
e. The possibility of incentives for complying	1	2	3
f. Improvements in your family, vocational or education situation	1	2	3
g. The native teachings, activities and ceremonies included as part of my treatment	1	2	3
h. Other:	1	2	3
	1	2	3

3. Please rate the following in your success in the Family Wellness Court

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. The judges monitoring my progress	1	2	3
b. The high frequency of Court appearances	1	2	3
c. Intensity/Frequency of treatment	1	2	3
d. The quality of treatment	1	2	3
e. The long period of treatment	1	2	3
f. The high frequency of drug/alcohol testing	1	2	3
g. My having received consequences	1	2	3

h. My having received incentives	1	2	3
i. Support from my family and friends	1	2	3
j. Other:	1	2	3

4. What change in the Family Wellness Court do you suggest?

	<b>Very Important</b>	<b>Somewhat Important</b>	<b>Not Important</b>
a. Time with the judges	1	2	3
b. Frequency of Court appearances	1	2	3
c. Intensity/Frequency of treatment	1	2	3
d. Quality of treatment	1	2	3
e. Educational or vocational opportunities	1	2	3
f. Frequency of drug/alcohol testing	1	2	3
g. Use of incentives	1	2	3
h. Use of consequences	1	2	3
i. Length of time in the program	1	2	3
k. Other:	1	2	3
	1	2	3

5. Do you have other suggestions?

6. Were you given enough information about the program before you entered?

- a.  Yes, I was given enough information
- b.  No, I was not given enough information

If "No", what else should you have been told?

7. Would you be interested in service as a supportive mentor for people currently in the Family Wellness Court?

- a.  Yes, definitely
- b.  No, definitely
- c.  Possibly, Please send me more information