WEST VIRGINIA ADULT TREATMENT COURTS

(Mental Health Court and Drug Court)

EXIT INTERVIEW

Part	cicipant: [print name]										
Date	e of Exit Interview:	/	/								
Inte	nt to Continue Treatment	?									
	No, Not Needed		nmended/Should Be								
	Yes [If yes, check all that ap	pply]	, -								
	□ For MI		Outpatient			Local MH facility					
	□ For SA		Inpatient			Private Provider					
Inte	nt to Continue Attending (Communi	ity Support Pr	ogram(s)?						
	No, Not Needed	ded									
			Why Not?								
	Yes [If yes, check all that ap	oply]									
	□ NAMI		AA		Other:	[Identify]					
	□ WVMHCA		NA								
Inte	nt to Further Education P	ost Progr	am?								
	No										
	Yes [Check All Applicable]										
	□ HS/GED										
		□ College Classes									
	□ College Degree seeking										
	☐ Certificates seeking (I										
	□ Vocational Classes (d	escribe ty	pe)								
the l	would you rank the Treatmowest and 10 being the higher of Treatment Court:	est?									
How	do you respond to the follo SA= STRONGLY AGREE A= AGREE N= NEITHER AGREE NOR D= DISAGREE SD= STRONGLY DISAGRE	DISAGRE									

		[Circle Response Given]			
• MHCT/ DCT changed my life for the better.	SA	A	N	D	SD
 I would recommend the program to others. 	SA	A	N	D	SD
 The program helped me while I was participating in it. 	SA	A	N	D	SD
 The program has helped prevent my becoming involved in other criminal activity. 	SA	A	N	D	SD
 The program has helped me re-establish relationships with family, friends or others in my community. 	SA	A	N	D	SD
• I left the program better than when I came into the program.	SA	A	N	D	SD
this sentence.]					
The program could be improved by: [Hav sentence.]	e exiti	ng po	articipant	finish	this
Interviewer: [signature] [Copy of completed form is to be forwarded to MHCT/DCT Project I	 Director	West Vi	rginia Sup	гете Сои	rt of

Appeals Administrative Office]

MHCT

DCT