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APPENDIX A: Intervention Logic Models

FAMILY ENGAGEMENT LOGIC MODEL

INPUTS	PROCESS	OUTPUTS	OUTCOMES
<ol style="list-style-type: none"> 1. Target population: Received report of A/N (PA 5) or youth in conflict (PA 4), and assessed in need of services or placement (need to open case). 2. Trained Facilitator, Impartial/ Neutral. 3. Caseworkers. 4. Community Services. 	<ol style="list-style-type: none"> 1. Caseworker notifies facilitator of new case (via referral form). 2. Caseworker schedules initial meeting to be held within 7 days of case opening or initial placement (i.e. within 69 days of the report). 3. Facilitator or caseworker prepare family, child, all participants. 4. Facilitator/caseworker and family Identify who should be at the meeting, with an emphasis on identifying a wider array of natural supports. 5. Meeting scheduled at a time that works for the family; with the option of holding it in a community based location. 6. The meeting has an established process/structure. The meeting may discuss: safety concerns; risk statements; the family's understanding of what is happening; what is going well; complicating factors and risks/barriers; identification of extended family members; what services to put in place, timeframes, who is paying for them; plans to prevent removal; transition planning; establishing parenting time. 7. Facilitators distribute a summary report outlining decisions to participants. Facilitator follows up with all parties in between meetings to check on progress. 8. Subsequent meetings occur at least every 90 days if the child is living with kin or in OOH placement; at least every 6 months if the child is at home. 	<ol style="list-style-type: none"> 1. Parents attend. 2. Family feels heard, respected, understands safety concerns and what they need to do. 3. Appropriate services are identified and referrals are authorized. 4. All participants are aware of next steps, responsibilities, timeframe. 5. Participants are held accountable to follow through on services. 6. Kin are identified who can sustain support, assure safety and/or mitigate risk (e.g. becoming part of a safety plan, providing placement or permanency). 7. Parents improve their capacity to protect. 	<ol style="list-style-type: none"> 1. Case not opened. 2. Case doesn't need to be court involved (i.e. voluntary). 3. Children remain safely at home (decrease in removals). 4. Placement is in least restrictive setting (increase in kinship placements, decrease in use of congregate care). 5. Decreased length of stay. 6. Decreased re-entry to care. 7. Decreased reoccurrence of maltreatment. 8. Adoption and relative guardianship more timely.

KINSHIP SUPPORTS LOGIC MODEL

INPUTS	PROCESS	OUTPUTS	OUTCOMES
<ol style="list-style-type: none"> Designated Kinship Supports Worker (KSW) Target populations: <ul style="list-style-type: none"> In OOH non-kin placement In Kin placement Not in CW system Services in community 	<ol style="list-style-type: none"> Training for KSW, Kinship caregivers (KCG), casework staff, and community partners. Do comprehensive assessment of KCG needs <ul style="list-style-type: none"> Within 7 days of child placed with kin and ongoing. Assure home safety: <ul style="list-style-type: none"> Immediately for emergency placement Emergency consultation among staff to stabilize and prevent disruption Consistent use of safety plan KCG participate in family engagement Meetings: <ul style="list-style-type: none"> Develop skills of facilitator to deal with interaction of KCG and parents Identify kin (potential caregivers and supports) via family meetings, and word of mouth. KSW contacts KCG on an ongoing basis. Develop KCG support plan. Educate community partners regarding kin supports and kin placements. KSW develop resources for KCG. Develop network to connect kin to each other. Regular contact between KSW and family caseworker. Provide specific kinship services (required and optional). 	<ol style="list-style-type: none"> KCG offered consistent and sufficient support from KSW. Community has enriched service array to support KCG. KSW are more knowledgeable. Staff are more educated about dynamics of kin placement and are more supportive with accessing services in the community. KCG has increase in skills and greater willingness to continue as KCG. KCG has more connections and knows how to get help. More Kin come forward to be KCGs. Increased percentage of KCG needs assessments completed within 7 days after placement or first contact. 	<ol style="list-style-type: none"> Greater number of children in kinship permanency. For children in temporary placement: <ul style="list-style-type: none"> increased proportion living with kin greater proportion of time in temporary placement spent with KCG Increased number of children who step down from OOH non-kin placement (specifically congregate care) to kinship or kinship foster placement. Shorter time from kinship or kinship foster placement to permanency (reunification, adoption, guardianship). Improved placement stability. Children better able to maintain connections, have greater sense of belonging, and have more connections to family and community. Child experiences less stress/trauma More stable well-being outcomes for child (mental health, behavioral health, educational). Less disruption/failed kin adoptions. Less financial stress for KCG family. Increased percentage of children in kinship foster placements who exit to guardianship.

PERMANENCY ROUNDTABLES LOGIC MODEL

INPUTS	PROCESS	OUTPUTS	OUTCOMES
<ol style="list-style-type: none"> 1. Target population: a) youth over age 16 in OPPLA, b) youth under age 16 in OPPLA, c) children/youth in care more than 12 months. 2. All staff are trained. 3. Partners and stakeholders are trained. 4. Coaching model to ensure fidelity to the PRT model and improve staff competence. 5. Community resources. 	<ol style="list-style-type: none"> 1. Youth are identified as eligible for PRT when administrator signs off upon designation of OPPLA goal or CWSA review. Scheduling process is determined by the county. 2. Caseworker PRT meeting is held. The meeting includes key staff and has an established structure which includes case presentation, brainstorming, action plan creation, and debrief. 3. Action plan may suggest undertaking intensive family finding or diligent search effort. 4. Youth is prepared for Youth Voice meeting, based on action plan developed at the caseworker meeting. 5. Youth support(s) (identified by the youth) are prepared for PRT, based on their role (caregiver, birth parent, other). 6. Youth Voice PRT meeting held within 90 days of the initial caseworker PRT to rework the action plan with youth input. 7. Follow up Youth Voice meetings held quarterly to monitor the action plan, assure progress towards permanency, review permanency status rating, and develop new goals as needed. 	<ol style="list-style-type: none"> 1. Key staff develop a Permanency Action Plan which includes acknowledgement of the barriers to permanency and how they may be addressed. 2. Youth, stakeholders and relatives/ non-relatives/vested adults participate in reworking the action plan and addressing barriers. 3. Placement providers understand the options for permanency. 4. Community resources that can meet youth needs are identified and improved. 5. Resources are provided so that youth needs for the following are addressed: permanent connections, a place to live, financial and emotional support, connections to siblings, post adoption supports, mental health treatment, behavioral health treatment, substance abuse treatment, educational supports, and other needs. 	<p>Intermediate:</p> <ol style="list-style-type: none"> 1. Youth have increased social support; each youth has at least one permanent connection. 2. Youth have increased connections to kin, who can become a permanent connection, and/or provide placement or permanency. 3. Increase in youth in safe family settings believed to be lifelong; permanency issues being addressed/near resolution/resolved (as measured by the child permanency). <p>Long term:</p> <ol style="list-style-type: none"> 1. For children/ youth needing placement, increase in placement with kin status rating). 2. Decrease in length of stay in care; decrease in length of stay in congregate care. 3. Increase in exits to permanency.

	TRAUMA INFORMED CARE INTERVENTION				
	TARGET POPULATION: Children and Youth as identified in the approved county IV-E Waiver Demonstration plan – implementation beginning July 1, 2014				
INPUTS	INTERVENTION	OUTPUTS	OUTCOMES		
			Short Term		Long Term
County staff Involvement; Child/youth/family involvement. ➡	Trauma screening. ➡	Child/youth referred for non-trauma service, or children/youth referred for trauma assessment. ➡	Families and casework staff have a better understanding of child/youth needs.		<div>➡</div>
<div>⬇</div>					
Mental health clinician involvement; Child/youth/family involvement. ➡	Trauma assessment. ➡	Child/youth referred for non-trauma treatment, or children/youth referred for trauma treatment. ➡	Child/youth receives assessment and referral for appropriate treatment.		
<div>⬇</div>					
Mental health clinician involvement; Child/youth/family involvement; County staff involvement. ➡	Trauma treatment. ➡	Child/youth receive trauma treatment. ➡	Child/youth decreases trauma symptoms.		
					Child/youth experience stability in their living situation, either in home or in out of home placement.
					Parents are better able to maintain their child/youth in the home safely.
					Child/youth experience permanency quickly.
					Child/youth experience less re-entry into foster care.
					Child/youth increases well-being.

APPENDIX B: Intervention Checklists



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Permanency Roundtable Checklist Title IV-E Waiver County

* Complete on each Youth every 6 Months

Client
ID#:

County: _____ Date: _____

Roundtable Make-up

- ☐ Caseworker
- ☐ Caseworker's Direct Supervisor
- ☐ Scribe
- ☐ Master Practitioner/Facilitator
- ☐ Internal Consultant
- ☐ External Consultant
- ☐ Administrator

Scheduling

- ☐ Transition Roundtable scheduled prior to leaving
- ☐ Quarterly Roundtable follow-up scheduled or discussed

Facilitator Observations

- ☐ Establishing a non-blaming atmosphere
- ☐ Setting a tone for a strength base, solution focused consultation
- ☐ Soliciting inclusion from all participants
- ☐ Demonstrating respect for all participants
- ☐ Balancing support for worker and supervisor while promoting sense of urgency for permanence
- ☐ Encouraging multiple brainstorm strategies for consideration
- ☐ Encouraging broad participation in the implementation of the Action Plan
- ☐ Strategic use of leadership role

Comments regarding any box NOT checked:

Phase 1: Welcome and Overview

- ☐ Establish Purpose, process and expectations
- ☐ Set stage for appreciative listening

Phase 2: Present the Case

- ☐ Case overview without interruption
- ☐ Use of allocated time
- ☐ Additional information provided by other with knowledge of the case

Phase 3: Clarify and Explore

- ☐ Non-blaming inquiry
- ☐ Resisting tendency to offer "brainstorming" strategies
- ☐ Exploration of worker/supervisor perceptions
- ☐ Questions, when answered, support creative thinking and strategy formulation

Phase 4: Brainstorm

- ☐ 5 key questions directly or indirectly highlighted
- ☐ Creativity, "no bad ideas"
- ☐ Willingness to step outside traditional services
- ☐ Ideas generated in all 5 areas

Phase 5: Create Permanency Action Plan

- ☐ Specificity and concreteness (SMART)
- ☐ Impact potential
- ☐ Realistic
- ☐ Team shares responsibility
- ☐ Caseworker willingness and investment

Phase 6: De-Brief

- ☐ How can worker best explain the Action Plan to families, youth and key stakeholders?
- ☐ Are there any unanswered questions or concerns?
- ☐ What did we learn in this Roundtable that could be applied to other cases?



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Family Engagement Checklist Title IV-E Waiver County

County: _____ Household #: _____ Date: _____

Family Preparation REQUIRED

- ☐ Understand purpose, live decision-making
- ☐ Role of the Department, who Department can bring to the meeting
- ☐ Expectations of the Department, what can the family expect
- ☐ Family roles and expectations
- ☐ Who can the family bring, why they want to bring these individuals
- ☐ Meeting process and agenda, potential safety concerns and solutions
- ☐ Provide copy of written appeal process
- ☐ Copy of report for the meeting and any plan developed at the meeting

RECOMMENDED

- ☐ Levels of confidentiality, who and what can be shared
- ☐ Rights and responsibilities
- ☐ Consent
- ☐ What to bring

Staff Preparation

- ☐ Facilitator is impartial
- ☐ Facilitator is not connected to the case
- ☐ Staff in attendance prepared and trained in Family Engagement Meetings

Time and Location of Meeting

- ☐ The family provided input regarding the date, time, and location of the meeting
- ☐ The Department was flexible in determining the date, time and location of the meeting

Involvement

- ☐ Parent(s) in attendance
- ☐ Absent parent involved in meeting
- ☐ Youth/child in attendance or involved in meeting should attendance not be appropriate
- ☐ Family Identified Support in attendance
- ☐ Interpreter services present for non-English and/or deaf participants

Family Engagement means joining with the family/kin to establish common goals of safety, well-being, and permanency through the involvement and is inclusive of other systems. This is an overarching theme of practice throughout service assessment, planning and delivery.

Timeliness

Family Engagement meeting conducted at determined decision points:

- ☐ Case Open - within 7 business days *
- ☐ Within 7 business days of initial placement (If case opened due to removal, only one meeting necessary)
- ☐ Every 90 Days during Out-of-Home placement
- ☐ Every 6 Months when provided In-Home services to an open case

Family Engagement Meeting Process

FACILITATOR

- ☐ Provides a structure meeting, facilitating a process
- ☐ Assures safe environment
- ☐ Assures use of family-friendly language, including no use of acronyms
- ☐ Defines issues, goals, and options to address concerns
- ☐ Leads a strength-based, solution-focus process
- ☐ Remains impartial throughout the meeting
- ☐ Assures everyone has a voice, all voices are heard, and everyone is engaged
- ☐ Supports participants in problem solving
- ☐ Moves group toward consensus, assisting participants through the process
- ☐ Provides summary report

CASEWORKER

- ☐ Provides facilitator with specific concerns to include: circumstances, safety, cultural, and/or adaptive (No-Contact orders, large group attendance, interpreter, child care needs, etc.)
- ☐ Actively participates
- ☐ Provides honest and open dialogue
- ☐ Articulates safety, risk, needs for all concerned, sharing the safety and risk tools
- ☐ Articulates a clear understanding of Department involvement
- ☐ Shares strengths of the family
- ☐ Remains open-minded to the family's input
- ☐ Prepared to assist in solution development with knowledge of community and multi-systemic resources
- ☐ Moves group toward consensus, assisting participants through the process
- ☐ Provides summary report

SUPERVISOR REQUIRED

☐ Supervisor or other member present to authorize services within the same day of the meeting

RECOMMENDED

☐ Available for support and consultation

☐ Clarifies information, provides resources on agency, policy, resources, and/or requirements

☐ Voice and representative of the Department's perspective

Documentation

☐ Family Engagement meeting entered into Trails

☐ Documented Plan provided to the family



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Kinship Supports Checklist Title IV-E Waiver County

County: _____ Kinship Family: _____ Date: _____

Category I - Case Management Services

ASSESSMENT

☐ Kinship Needs Assessment completed within 5 business days of initial contact by county

STRENGTH-BASED CONSULTATION AND SUPPORT

☐ Kinship Supports Worker assigned to individual family

☐ Kinship Supports Worker initial contact made face to face

☐ Ongoing contact type based on kinship family discretion and diligent efforts to engaged documented

☐ Contact include:

☐ Discussion of kinship family's concerns ☐ Crisis intervention

☐ Expectations of the Department ☐ Conflict resolution

☐ Problem solving ☐ Other: _____

PLAN DEVELOPMENT

☐ Develop workable plans to address:

☐ Short term needs

☐ Sustainability of placement

☐ Long term needs

☐ Financial needs moving forward

☐ Permanence

☐ Other: _____

SERVICE COORDINATION

☐ Kinship Supports Worker coordinates services to meet the needs of kinship family

☐ Kinship Supports Worker communicates with child/youth Caseworker

☐ Kinship Supports Worker communicates with providers

NAVIGATION

☐ Kinship Supports Worker provides kinship family with information and referral services

☐ Kinship Supports Worker assists kinship family with navigating support services to possibly include: TANF, Medicaid, Child Welfare, legal, and other community services

☐ Kinship Supports Worker assist kinship family with accessing provided orientation and/or training

ONGOING ASSESSMENT

☐ Kinship Supports Worker routinely completes and/or updates the Kinship Supports Needs Assessment

Category II - Kinship Support Services

☐ Kinship Supports Worker ensures Immediate and Ongoing Needs met as assessed on the Kinship Supports Needs Assessment

OPTIONAL

☐ In addition to the needs encompassed in the Kinship Supports Needs Assessment:

☐ Attendance at Family Engagement Meeting

☐ Attendance at Court as kinship family support

☐ Attendance at IEP/school meeting

☐ Services to support placement stability

☐ Intensive Family Finding efforts

☐ Other: _____

APPENDIX C: Kinship Supports Needs Assessment

Kinship Supports Needs Assessment

Provider Name: _____ Date: _____
 # of Children in Your Care: _____ Ages of Children: _____ Relationship to Children: _____ Date of Placement: _____

This assessment is designed to help identify and prioritize you and your family's needs. We want to assist with meeting these needs to support you providing care. Please indicate your needs below by circling a number: 1 - no need, 2 - low need, 3 - moderate need, 4 - high need, and 5 - urgent need.

INITIAL NEEDS	NO	LOW	MOD	HIGH	URGENT	COMMENTS
Clothing	1	2	3	4	5	
Baby Items (Car Seat)	1	2	3	4	5	
Bedding (Beds/Cribs)	1	2	3	4	5	
Food	1	2	3	4	5	
Rent/Utility Assistance	1	2	3	4	5	
Child Care	1	2	3	4	5	
Emergency Financial Support	1	2	3	4	5	
Medical Assistance for Child/Self	1	2	3	4	5	
Transportation	1	2	3	4	5	
Hygiene Products	1	2	3	4	5	

ONGOING NEEDS	NO	LOW	MOD	HIGH	URGENT	COMMENTS
Training/Support:						
Financial (TANF/Child Support/SSI/Snap/Food Stamps/ Nutrition/WIC)	1	2	3	4	5	
Advocating for Child/Self	1	2	3	4	5	
Budgeting (Credit Counseling)	1	2	3	4	5	
Parenting/Discipline/Rules/Boundaries	1	2	3	4	5	
Child Development	1	2	3	4	5	
Nutrition	1	2	3	4	5	
Home Safety/Childproofing	1	2	3	4	5	
Child Exposure (Domestic Violence/Substance Abuse/Sexual Abuse/Trauma)	1	2	3	4	5	
Family Communication (Bio Parents/Extended Family)	1	2	3	4	5	
Role Definition	1	2	3	4	5	
Education (School Enrollment/ Tutoring/ Mentoring/IEP/College)	1	2	3	4	5	

ONGOING NEEDS						COMMENTS
Mental Health Services:	NO	LOW	MOD	HIGH	URGENT	
ADHD/ADD	1	2	3	4	5	
Children and Trauma	1	2	3	4	5	
Stress Relief	1	2	3	4	5	
Grief and Loss	1	2	3	4	5	
Anger Management	1	2	3	4	5	
Conflict Resolution	1	2	3	4	5	
Family Counseling	1	2	3	4	5	
Individual Counseling	1	2	3	4	5	
Other Services:						
Respite	1	2	3	4	5	
Activities (Child/Self/Summer Programs)	1	2	3	4	5	
Support Group (Child/Self)	1	2	3	4	5	
Employment Resources	1	2	3	4	5	
Legal Issues	1	2	3	4	5	
Other: _____	1	2	3	4	5	

IDENTIFIED SOCIAL SUPPORTS – Who can you count on? How can they help?

Immediate/Extended Family Member: _____

Neighbors/Friends: _____

Church: _____

Community Based Organizations: _____

Others: _____

MOVING FORWARD

What is the greatest strength you bring as a kinship caregiver? _____

What is your greatest worry in being a kinship caregiver? _____

Plan to Address Needs and Next Steps: _____

APPENDIX D: Waiver Theory of Change

Theory of Change: Underlying the waiver plan is the basic belief that lack of comprehensive family and kin involvement when a referral is made to the county department causes additional harm to the child or youth due to unnecessary out-of-home placements. In addition to changing agency culture, the implementation of the waiver through use of family engagement, Permanency Roundtables, trauma-informed assessment and treatment, and kinship supports will result in better long-term outcomes for children and youth.

Theory of Change for Children and Youth in their own Home

Title IV-E Waiver interventions including family engagement, Permanency Roundtables, kinship supports, trauma-informed assessment, and trauma-informed treatment are provided;

SO THAT

Families, including parents and kin guardians, are actively engaged in identifying needed in-home services and supports;

SO THAT

The county and their community partners can offer the services and supports necessary for families, including trauma-informed treatment and other services;

SO THAT

The behavioral and mental health needs of children/youth can be addressed;

SO THAT

Families can care safely for their children and youth and address their children and youth's well-being needs;

SO THAT

The likelihood that children/youth in contact with the child welfare system are removed from their home is decreased;

SO THAT

Child and youth experience improved safety, permanency, and well-being.

Theory of Change for Children and Youth in Out-of-Home Placement

Title IV-E Waiver interventions including family engagement, Permanency Roundtables, kinship supports, trauma-informed assessment, and trauma-informed treatment are provided;

SO THAT

Families, kin, and other permanency resources are engaged early;

SO THAT

Children and youth's well-being and permanency service needs and supports are assessed at the time of their removal from the home;

SO THAT

Children, youth, families and kin receive services and supports to move children and youth to permanency safely and as quickly as possible;

SO THAT

Children/youth entering out-of-home care are more likely to be placed with kin and less likely to be placed in congregate care;

SO THAT

Children and youth's well-being and safety needs are met through living in home-like permanent settings as quickly as possible.

APPENDIX E: Colorado Implementation Index Tool

Colorado Title IV-E Waiver Implementation Index

[| PDF of the Implementation Index](#) | [PDF of last year's Index with your answers](#) | [Log Out](#) |

Welcome to the Colorado Title IV-E Waiver Implementation Index.

For a full explanation of the Implementation Index, [please click here](#).

Use this home screen to determine which modules need to be completed in your county, access those modules, and monitor the county's completion status. The evaluation team appreciates your time and attention to this evaluation effort.

Survey Code: malamosa

Screening Question	Module (click to edit)	Completion Status	Last Modified
<p>Does the county conduct meetings with families (regardless of how they are funded) that are:</p> <ul style="list-style-type: none"> • facilitated by an impartial person, • include family support people, service providers, and/or other partner • for the purposes of case planning? <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	FAMILY ENGAGEMENT		
<p>Does the county provide supports or services to kin so that they can care for children and youth involved in the child welfare system (regardless of how these supports and services are funded)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	KINSHIP SUPPORTS		
<p>Is the county conducting Permanency Roundtables (regardless of how the practice is funded)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	PERMANENCY ROUNDTABLES		
<p>Does the county currently have any process to consistently screen, assess, or treat children's trauma (regardless of how that process is funded)?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	TRAUMA-INFORMED CARE		
<p>Have there been any efforts in the past year to educate child welfare agency staff or other community members about the impact trauma may have on children and families in the community?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	COMMUNITY CAPACITY FOR TRAUMA-INFORMED CARE		

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Survey: malamosa

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ABOUT THE SURVEY

Thank you for logging into the Colorado Title IV-E Waiver Demonstration Project Implementation Index.

The Implementation Index is an instrument based on research about the process of program implementation. This Index will track the degree and timing of implementation of four child welfare interventions in each of the child welfare departments across Colorado. The evaluation will use the information to look at implementation over time and identify which aspects of the IV-E Waiver have been implemented more or less widely and how the implementation process is related to outcomes.

The Implementation Index is designed in recognition of the following features of Colorado's Title IV-E Waiver Demonstration Project:

1. Counties will vary in which of the interventions they are implementing during the 5-year Demonstration Project.
2. Counties may have implemented some components of an intervention before or after IV-E Waiver funding became available, even if they have not formally indicated an intention to implement the full intervention.
3. Implementation of the identified interventions is a developmental and incremental process that will continue over an extended period of time, perhaps indefinitely.
4. There are no cutoff points at which implementation can be or should be deemed "adequate," "complete," etc.

The Implementation Index is therefore not intended, and will not be used, to assess compliance. Its purpose is to track the nature and extent of intervention activities over time across the state for purposes of the evaluation. For each intervention being implemented in the county, regardless of whether the intervention is funded by the IV-E Waiver, please address the questions in that intervention's module.

Answers to last years' questions can be viewed as reference, but please report on current practice rather than what was indicated in the previous year.

For a full explanation of the Implementation Index, [please click here](#). The evaluation team appreciates your involvement in this evaluation effort.

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FAMILY ENGAGEMENT

This section explores the county's implementation of Family Engagement activities. This survey specifically focuses on Family Engagement meetings, that is, meetings that are:

- Facilitated by a neutral, third party (someone who does not have line responsibility for the case)
- Include support people, service providers and/or other partners
- For the purposes of involving the family in their child welfare case planning and decision-making.

In this section, the evaluation would like to know about all of the Family Engagement meetings done in the county, regardless of whether or not they are funded specifically with IV-E dollars.

1. When did family engagement meetings begin in the county?

☐ Prior to 7/1/2012

☐ Between 7/1/2012 and 7/1/2013

☐ After 7/1/2013: Enter month and year began: (MM/YYYY)

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2. Does the county currently utilize any specific model of facilitated family meetings?

☐ Family Group Decision Making (FGDM)

with county-specific modifications ☐ Yes ☐ No

☐ Team Decision Making (TDM)

with county-specific modifications ☐ Yes ☐ No

☐ Family Group Conference (FGC)

with county-specific modifications ☐ Yes ☐ No

☐ Family Team Meetings (FTM)

with county-specific modifications ☐ Yes ☐ No

☐ Partnering for Safety/Safety Organized Practice framework

☐ Listening to the Needs of Kids (LINKs)

☐ Family Safety Resource Team (FSRT)

☐ Family Unity Meeting (FUM)

☐ Voices

☐ Other

specify:

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3. TARGET POPULATION

a. Which children/families are currently identified for family engagement meetings :

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
i. Newly opening PA4 cases (cases that opened after July 1, 2013, regardless of prior history)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Newly opening PA5 cases (cases that opened after July 1, 2013, regardless of prior history)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PA4 cases that opened prior to July 1, 2013	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. PA5 cases that opened prior to July 1, 2013	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Families served through FAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other, specify <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Where there is overlap in the target populations of the Family Engagement practice and the Permanency Roundtables practice currently being used by the county, do these children/youth receive just one intervention or both?

- ☐ Just FE intervention
- ☐ Just PRT intervention
- ☐ Receive both interventions—meetings are scheduled back-to-back
- ☐ Receive both interventions—meetings not necessarily synchronized
- ☐ Not applicable

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4. TIMING

Under your current family engagement practice, how often do the following events in a case trigger any type of family engagement meeting to be held?

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. When there is a risk of removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Once there has been a removal/placement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Placement change being considered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Upon recommendation for reunification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Change in permanency goal or permanency decisions (other than reunification)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Upon case opening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Follow up meetings every 90 days for children in out-of-home care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Follow-up meetings every 6 months for children in home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Other <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. STAFFING AND ROLES

- a. The evaluation would like some information about the county's current family engagement meeting facilitators. When did they begin facilitating FE meetings? About how many hours per week do they spend in Family Engagement-related tasks? About how much Family Engagement-specific training have they received?

Please note:

1. Family Engagement-related tasks include all tasks related to engaging families and facilitating meetings: preparing for meetings; contact with clients, staff, community members; documentation; etc.
2. Training may have been received prior to the start of the Waiver.
3. Even if facilitators are paid through a contract, please answer the questions as completely as possible. The county may wish to check with their contractor to answer the following questions.

For counties implementing Family Engagement as part of a regional model under the Waiver:

Is the Family Engagement facilitator based in another county? ☐ Yes ☐ No

If yes, please name the county in which the Family Engagement facilitator is based:

Click here to see staff from last year's Index	Date began facilitating FE meetings? (MM/YYYY)	Average hours per week in Family Engagement-related tasks	How much Family Engagement-related training have they received?	
Add Facilitator				

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5. STAFFING AND ROLES (continued)

b. Is there currently a facilitator job description?

☐ Yes ☐ No

If yes,

i. Does it include specific Family Engagement training or qualifications?

☐ Yes ☐ No

ii. Does it include specific Family Engagement role/duties?

☐ Yes ☐ No

c. For case workers that work with families who are expected to be offered Family Engagement meetings, does the job description for case workers currently include:

i. Specific Family Engagement training or qualifications?

☐ Yes ☐ No

ii. Specific Family Engagement role/duties?

☐ Yes ☐ No

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6. TRAINING

a. What training regarding the following models have the *current* family engagement facilitators in the county received to date?

	No facilitators received	Few facilitators received (~25%)	Some facilitators received (~50%)	Most facilitators received (~75%)	All facilitators received (~100%)
i. Team Decision Making (TDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Family Group Decision Making (FGDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Family Group Conference (FGC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Family Team Meetings (FTM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Partnering for Safety/Safety Organized Practice framework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Listening to the Needs of Kids (LINKs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vii. Family Safety Resource Team (FSRT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
viii. Family Unity Meeting (FUM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ix. Mediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. General Facilitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xi. Other, specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>					

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6. TRAINING (continued)

b. What training regarding the following models have the county's *currently employed* caseworkers received to date (beyond what they received in the core training)?

	No workers received	Few workers received (~25%)	Some workers received (~50%)	Most workers received (~75%)	All workers received (~100%)
i. Team Decision Making (TDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Family Group Decision Making (FGDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Family Group Conference (FGC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Family Team Meetings (FTM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Partnering for Safety/Safety Organized Practice framework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Listening to the Needs of Kids (LINKs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vii. Family Safety Resource Team (FSRT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
viii. Family Unity Meeting (FUM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ix. Mediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. General Engagement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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6. TRAINING (continued)

c. What training regarding the following models have the county's *currently employed* supervisors received to date (beyond what they receive in their core training)?

	No supervisors received	Few supervisors received (~25%)	Some supervisors received (~50%)	Most supervisors received (~75%)	All supervisors received (~100%)
i. Team Decision Making (TDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Family Group Decision Making (FGDM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Family Group Conference (FGC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Family Team Meetings (FTM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Partnering for Safety/Safety Organized Practice framework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Listening to the Needs of Kids (LINKs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vii. Family Safety Resource Team (FSRT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
viii. Family Unity Meeting (FUM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ix. Mediation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. General Facilitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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6. TRAINING (continued)

d. Does the county currently require any family engagement training for caseworkers, supervisors, and supervisors of the facilitators (beyond what they receive in their core training)? If so, how long is the required training?

	No training is required	Less than two hours	Two hours to one day	More than one day
i. Intake/Assessment Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Ongoing/Services Workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Supervisors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Supervisors of the Facilitators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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7. TOOLS

a. Does the county currently use TRAILS to monitor cases or create reports?

☐ Yes ☐ No

If yes, how does the county use this data? (check all that apply)

☐ Use this data to provide case level data to line staff to document case activities

☐ Use this data in aggregate for quality improvement purposes

☐ Other, specify:

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7. TOOLS (continued)

b. For families with a case opening after 2/1/2014, would all of the family's Family Engagement meetings be entered into Trails under the Framework with a meeting type of "facilitated family meeting"? (choose only one)

- ☐ Yes, all Family Engagement meetings are entered under the Framework with a meeting type of "facilitated family meeting"
- ☐ Some Family Engagement meetings are entered in the Framework with a meeting type of "facilitated family meeting" but other Family Engagement meetings are entered with a different meeting type or in other areas of Trails
- ☐ No Family Engagement meetings are entered in the Framework with a meeting type of "facilitated family meeting"

c. Does the county currently use any of the following quality assurance activities to assess the success of Family Engagement Meetings?

- ☐ Family survey focused on satisfaction
- ☐ Family interviews or focus groups
- ☐ Other, specify:

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8. POLICIES AND PROCEDURES

a. Does the county have a written policy or procedure to guide Family Engagement activities?

☐ Yes ☐ No

If yes, most recently updated:

b. If yes, do they cover: (check all that apply)

- ☐ Role and responsibilities of facilitator
- ☐ Role and responsibilities of caseworker
- ☐ Role and responsibilities of supervisor
- ☐ Process for referring families for their first Family Engagement Meeting
- ☐ Process for authorizing services in the meeting
- ☐ Family rights and responsibilities
- ☐ Documentation to be completed in preparation for the meeting
- ☐ Documentation to be completed during the meeting

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9. DEBRIEF

a. Persons completing: Please note the job title/role(s) of the person(s) completing the Family Engagement module of the Implementation Index:
(check all that apply)

☐ Manager or Administrator

☐ Supervisor

☐ Family Engagement Facilitator

☐ Group Process, specify:

☐ Other, specify:

b. Please use the following textbox to enter any comments or clarifications related to any of the following questions:

- Were there any questions where it was difficult to explain the county's implementation, given the options provided?
- Were there any questions that were unclear?
- Is there any important aspect of the county's implementation that was not addressed in this section of the Index?

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This completes the Family Engagement module.

If the county is ready for the evaluation to view its answers, please click here: [Finish](#)

Click [here](#) or use the home link above to return to the survey home page.

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ABOUT THE SURVEY

Thank you for logging into the Colorado Title IV-E Waiver Demonstration Project Implementation Index.

The Implementation Index is an instrument based on research about the process of program implementation. This Index will track the degree and timing of implementation of four child welfare interventions in each of the child welfare departments across Colorado. The evaluation will use the information to look at implementation over time and identify which aspects of the IV-E Waiver have been implemented more or less widely and how the implementation process is related to outcomes.

The Implementation Index is designed in recognition of the following features of Colorado's Title IV-E Waiver Demonstration Project:

1. Counties will vary in which of the interventions they are implementing during the 5-year Demonstration Project.
2. Counties may have implemented some components of an intervention before or after IV-E Waiver funding became available, even if they have not formally indicated an intention to implement the full intervention.
3. Implementation of the identified interventions is a developmental and incremental process that will continue over an extended period of time, perhaps indefinitely.
4. There are no cutoff points at which implementation can be or should be deemed "adequate," "complete," etc.

The Implementation Index is therefore not intended, and will not be used, to assess compliance. Its purpose is to track the nature and extent of intervention activities over time across the state for purposes of the evaluation. For each intervention being implemented in the county, regardless of whether the intervention is funded by the IV-E Waiver, please address the questions in that intervention's module.

Answers to last years' questions can be viewed as reference, but please report on current practice rather than what was indicated in the previous year.

For a full explanation of the Implementation Index, [please click here](#). The evaluation team appreciates your involvement in this evaluation effort.

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1. PERMANENCY ROUNDTABLES

This section explores the county's implementation of Permanency Roundtables (PRT). Permanency Roundtables have the following features:

- PRTs have a structured, case consultation approach.
- The purpose is to establish a Permanency Action Plan in conjunction with the youth and their supports, which will expedite legal permanency.
- PRTs are generally for youth who have been in care for extended periods and are aimed at identifying and addressing the barriers to permanency.
- Attending the PRT are the child/youth, and their supports, caseworker, supervisor, administrator, external consultant, and a trained facilitator/master practitioner. Participants could also include family or kin, GAL, CASA, or others that the child/youth has invited.
- The child/youth voice is encouraged and heard.

Please describe the county's Permanency Roundtables efforts, regardless of whether or not they have been funded under the IV-E waiver.

1. When did Permanency Roundtables begin in the county?

☐ Prior to 7/1/2012

☐ Between 7/1/2012 and 7/1/2013

☐ After 7/1/2013: Enter month and year began: (MM/YYYY)

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2. TARGET POPULATION

Which children/youth are currently identified for the county's PRT practice:

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. Youth over 16 in OPPLA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Youth younger than age 16 in OPPLA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Children/Youth in care > 12 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Determined on case by case basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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3. PRT REFERRAL PROCESS

How does the county currently determine that a case needs a PRT? At what point in the case is the determination made?

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. Designated staff person reviews case lists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Caseworker fills out a referral form when youth reaches target population (per county policy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Caseworker, supervisor or consultation team recommends PRT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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4. STAFFING AND ROLES

The evaluation team would like some information about the county's *current* Master Practitioners/PRT facilitators. When did they begin facilitating PRTs? About how many hours per week do they spend in PRT-related tasks? About how much PRT-specific training have they received? (PRT-related tasks include all tasks related to holding PRTs: preparing for Roundtables; contact with clients, staff, community members; documentation; etc. Training may have been received prior to the start of the Waiver.)

a. For counties implementing PRT as part of a regional model under the Waiver:

Is the Master Practitioner/facilitator based in another county? ☐ Yes ☐ No

If yes, please name the county in which the master practitioner/facilitator is based:

b.

Click here to see staff from last year's Index	Date began facilitating PRTs?	Average hours per week in PRT-related tasks?	How much PRT-related training have they received?	If the facilitator has received more than 2 days of training, please specify the nature of the training:	
Add Master Practitioner					

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4. STAFFING AND ROLES (continued)

c. What types of External Consultants are currently trained and available to participate in PRTs in the county?

- ☐ Judges
- ☐ GALs
- ☐ CASAs
- ☐ Probation
- ☐ Mental health agency staff
- ☐ Community volunteers (i.e. board members of community organizations)
- ☐ Master Practitioners from nearby counties
- ☐ Other, specify

d. In total, how many External Consultants are currently trained and available to participate in PRTs in the county?

- ☐ None
- ☐ 1 - 2
- ☐ 3 - 5
- ☐ 6 - 10
- ☐ More than 10

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5. TRAINING

a. What training has been received by the caseworkers *currently employed* in the county?

	No caseworkers received	Few caseworkers received (~25%)	Some caseworkers received (~50%)	Most caseworkers received (~75%)	All caseworkers received (~100%)
i. Achieving Permanency Through Roundtables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. PRT Skills Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PRT Youth Voice Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Intensive Family Finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Cross-over Youth Practice Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other permanency-related training, specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. TRAINING (continued)

b. What training has been received by the supervisors *currently employed* in the county?

	No supervisors received	Few supervisors received (~25%)	Some supervisors received (~50%)	Most supervisors received (~75%)	All supervisors received (~100%)
i. Achieving Permanency Through Roundtables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. PRT Skills Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PRT Youth Voice Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Intensive Family Finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Cross-over Youth Practice Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other permanency-related training, specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. TRAINING (continued)

c. What training has been received by the administrators/managers *currently employed* in the county?

	No administrators / managers received	Few administrators / managers received (~25%)	Some administrators / managers received (~50%)	Most administrators / managers received (~75%)	All administrators / managers received (~100%)
i. Achieving Permanency Through Roundtables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. PRT Skills Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PRT Youth Voice Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Intensive Family Finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Cross-over Youth Practice Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other permanency-related training, specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. TRAINING (continued)

d. What training has been received by the (aides, reception, scribes, etc.) *currently employed* in the county?

	No aides received	Few aides received (~25%)	Some aides received (~50%)	Most aides received (~75%)	All aides received (~100%)
i. Achieving Permanency Through Roundtables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. PRT Skills Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PRT Youth Voice Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Intensive Family Finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Cross-over Youth Practice Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other permanency-related training, specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. TRAINING (continued)

e. What training has been received by the the program specialists (intervention leads, family engagement facilitators, kinship support workers, etc.) *currently employed* in the county?

	No specialists received	Few specialists received (~25%)	Some specialists received (~50%)	Most specialists received (~75%)	All specialists received (~100%)
i. Achieving Permanency Through Roundtables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. PRT Skills Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. PRT Youth Voice Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Intensive Family Finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Cross-over Youth Practice Model	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other permanency-related training, specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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6. TOOLS

a. For children/youth with their first PRT after 2/1/2014, would all of their PRT meetings be entered into the Trails PRT Module? (choose only one)

- ☐ Yes, all PRTs are currently entered into the Trails PRT Module
- ☐ Some PRT meetings are currently entered into the Trails PRT Module
- ☐ No PRT meetings are currently entered into the Trails PRT Module

b. Does the county currently use Trails to monitor cases or create reports? (check all that apply)

- ☐ Use this data to provide case level data to line staff to document case activities
- ☐ Use this data in aggregate for quality improvement purposes
- ☐ Other, specify:

c. Does the county currently use any of the following methods to assess the perceptions of youth and caretakers involved in PRTs? (check all that apply)

	Youth	Caretakers
i. Survey focused on satisfaction	<input type="checkbox"/>	<input type="checkbox"/>
ii. Interviews or focus groups	<input type="checkbox"/>	<input type="checkbox"/>
iii. Other, specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

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7. POLICIES AND PROCEDURES

a. Does the county have a policy or procedure to guide staff as they implement PRT?

☐ Yes ☐ No

a.i. If yes, most recently updated:

a.ii. If yes, does it include: (check all that apply)

- ☐ Role and responsibilities of facilitator/master practitioner
- ☐ Role and responsibilities of caseworker
- ☐ Role and responsibilities of supervisor
- ☐ Process for referring child/youth for their first PRT
- ☐ Process for creating a Permanency Action Plan
- ☐ Documentation to be completed in preparation for PRT
- ☐ Documentation to be completed during or after a PRT

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8. DEBRIEF

a. **Persons completing:** Please note the job title/role(s) of the person(s) completing the PRT module of the Implementation Index for your county:
(check all that apply)

☐ Manager or Administrator

☐ Supervisor

☐ PRT Facilitator or Master Practitioner

☐ Group Process, specify

☐ Other, specify

b. **Please use the following textbox to enter any comments or clarifications related to any of the following questions:**

- Were there any questions where it was difficult to explain the county's implementation, given the options provided?
- Were there any questions that were unclear?
- Is there any important aspect of the county's implementation that was not addressed in this section of the Index?

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This completes the Permanency Roundtables module.

If the county is ready for the evaluation to view its answers, please click here: [Finish](#)

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ABOUT THE SURVEY

Thank you for logging into the Colorado Title IV-E Waiver Demonstration Project Implementation Index.

The Implementation Index is an instrument based on research about the process of program implementation. This Index will track the degree and timing of implementation of four child welfare interventions in each of the child welfare departments across Colorado. The evaluation will use the information to look at implementation over time and identify which aspects of the IV-E Waiver have been implemented more or less widely and how the implementation process is related to outcomes.

The Implementation Index is designed in recognition of the following features of Colorado's Title IV-E Waiver Demonstration Project:

1. Counties will vary in which of the interventions they are implementing during the 5-year Demonstration Project.
2. Counties may have implemented some components of an intervention before or after IV-E Waiver funding became available, even if they have not formally indicated an intention to implement the full intervention.
3. Implementation of the identified interventions is a developmental and incremental process that will continue over an extended period of time, perhaps indefinitely.
4. There are no cutoff points at which implementation can be or should be deemed "adequate," "complete," etc.

The Implementation Index is therefore not intended, and will not be used, to assess compliance. Its purpose is to track the nature and extent of intervention activities over time across the state for purposes of the evaluation. For each intervention being implemented in the county, regardless of whether the intervention is funded by the IV-E Waiver, please address the questions in that intervention's module.

Answers to last years' questions can be viewed as reference, but please report on current practice rather than what was indicated in the previous year.

For a full explanation of the Implementation Index, [please click here](#). The evaluation team appreciates your involvement in this evaluation effort.

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1. KINSHIP SUPPORTS

This section of the survey explores the supports and services that are provided to kin so that they can care for children and youth involved in the child welfare system. Please complete this section regardless of whether these supports and services are funded under the IV-E Waiver.

The intent of this intervention is to ensure kinship caregivers' needs are assessed early and often during their involvement with child welfare. The county is then able to meet the needs of the kinship caregiver through two primary service components: Case management, which includes the kinship support worker's responsibilities for contact, plan development, service coordination, and navigation; and services, which includes child care, respite, transportation, educational or therapeutic services not met by public or private insurance, and access to recreational services.

1. Does the county have a designated kinship supports worker(s) or caseworker(s) to provide case management and supports to kinship caregivers (regardless of how the position is funded)?
 - ☐ Yes, the county has designated kinship support worker(s)
 - ☐ Yes, the county has caseworker(s) to provide case management and supports to kinship caregivers (Skip to Question 3c)
 - ☐ No (Skip to Question 3c)

If the county has designated kinship support worker(s), enter date began (MM/YYYY):

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2. STAFFING AND ROLES

The evaluation team would like some information about the county's Kinship Support Workers. When were they hired for their role? About how many hours per week do they spend in Kinship Support-related tasks?

a. For counties implementing Kinship Supports as part of a regional model under the Waiver:

Is the Kinship Support Worker based in another county? ☐ Yes ☐ No

If yes, please name the county in which the Kinship Support Worker is based:

b. The evaluation team would like some information about the county's Kinship Support Workers. When were they hired for their role? About how many hours per week do they spend in Kinship Support-related tasks?

Click here to see staff from last year's Index	Hired for their role? (MM/YYYY)	Average hours per week in Kinship-Support-related tasks	
Add Kinship Support Worker			

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3. TRAINING

- a. Have the Kinship Supports Workers currently working in the county received kinship-specific training?

- ☐ Yes, prior to 7/1/2012
☐ Yes, between 7/1/2012 and 7/1/2013
☐ Yes, since 7/1/2013 (enter up to 3 dates in MM/YYYY format)

- ☐ No (skip to question 3c)

- b. How much Kinship-specific training has been received by the Kinship Support Workers currently working in the county? (Training may have been received prior to the start of the Waiver)

- ☐ More than 10 days
☐ 6-10 Days
☐ 3-5 Days
☐ 2 Days or less

- c. Have the currently employed caseworkers (other than designated kinship workers) from any of the following units received kinship-specific training? (check all that apply)

- ☐ FAR / Intake
☐ Ongoing
☐ Permanency
☐ Other, specify

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3. TRAINING (continued)

d. Were the following topics discussed in training? (check all that apply)

- i. ☐ Safety concerns in kinship settings
- ii. ☐ Safety guidelines for certified and non-certified kinship caregivers
- iii. ☐ What it takes to help kinship caregivers succeed
- iv. ☐ Ways of identifying potential kinship caregivers
- v. ☐ Interaction between kinship caregivers and parents
- vi. ☐ Core components of the kinship supports intervention
- vii. ☐ Process for working with caseworkers
- viii. ☐ Kinship needs assessment
- ix. ☐ Kinship caregiver support plan
- x. ☐ Process of identifying/making referrals to community resources
- xi. ☐ Ways to keep kinship caregivers engaged
- xii. ☐ Conflict resolution
- xiii. ☐ Other, specify

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3. TRAINING (continued)

e. Have any community partners received kinship-specific training in your county?

- ☐ Yes, prior to 7/1/2012
- ☐ Yes, between 7/1/2012 and 7/1/2013
- ☐ Yes, since 7/1/2013 (enter up to three dates in MM/YYYY format)
-
- ☐ No (skip to question 4)

f. What groups of community partners were involved in the kinship-specific training? (check all that apply)

- ☐ Behavioral Health Providers
- ☐ CASA
- ☐ DYC
- ☐ GALs
- ☐ Non-profit or faith-based organizations
- ☐ Schools
- ☐ Other, specify

g. Topics that have been discussed in training: (check all that apply)

- i. ☐ Safety concerns in kinship settings
- ii. ☐ Safety guidelines for certified and non-certified kinship caregivers
- iii. ☐ What it takes to help kinship caregivers succeed
- iv. ☐ Ways of identifying potential kinship caregivers
- v. ☐ Interaction between kinship caregivers and parents
- vi. ☐ Core components of the kinship supports intervention
- vii. ☐ Process for working with caseworkers
- viii. ☐ Kinship needs assessment
- ix. ☐ Kinship caregiver support plan
- x. ☐ Process of making referrals to community resources or CDHS resources
- xi. ☐ Ways to keep family engaged
- xii. ☐ Conflict resolution
- xiii. ☐ Other, specify

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4. TARGET POPULATION

Which children/families are currently identified to receive kinship supports in the county?

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. Children/youth for whom a kinship placement appears to be imminent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. i. Children/youth in non-kinship/relative foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. ii. Children/youth in congregate care that can be stepped down to kinship foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Children/youth in kinship family foster care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Children/youth living with non-certified kin through child welfare involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Children/youth living with non-certified kin through an informal family arrangement (no child welfare involvement)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Kinship caregivers seeking information and referral and/or hard goods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other, specify <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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5. REFERRAL PROCESS

How is the Kinship Supports Worker currently notified that a family needs kinship supports in your county?

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. Caseworker completes referral form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Kinship Supports worker reviews list of new cases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Other, specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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6. TOOLS

a. How does the county currently conduct an assessment of kinship caregiver needs when a child is placed with kin?

☐ A comprehensive assessment of the needs of kinship caregivers is systematically conducted

Enter date began (MM/YYYY):

☐ Assessment is done informally or on a case-by-case basis

☐ No assessment is conducted at this time

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6. TOOLS (continued)

b. Does the county complete a support plan for kinship caregivers as part of the needs assessment?

☐ Support plans for kinship caregivers are systematically documented

Enter date began (MM/YYYY):

☐ Support plans for kinship caregivers are documented as needed or on a case-by-case basis

☐ Support plans for kinship caregivers are not written at this time

c. Does the county currently have any of the following resources developed specifically for kinship caregivers? (note date began)

☐ County-specific brochure
Enter date (MM/YYYY):

☐ County-specific resource directory
Enter date (MM/YYYY):

☐ Training
Enter date (MM/YYYY):

☐ Support group
Enter date (MM/YYYY):

☐ Special events or conferences
Enter date (MM/YYYY):

☐ Other, specify :
Enter date (MM/YYYY):

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7. POLICIES AND PROCEDURES

- a. Does the county have a written policy or procedure to guide Kinship Supports Workers when working with kinship caregivers?

☐ Yes ☐ No ☐ NA

- i. If yes, when was the policy most recently updated? (MM/YYYY)

- ii. If yes, does the policy or procedure cover:

- ☐ Roles and responsibilities of the designated kinship worker
☐ Roles and responsibilities of the caseworkers
☐ Roles and responsibilities of the supervisor
☐ Timelines for when the Kinship Needs Assessment and/or support plan should be completed
☐ Services and/or supports provided to certified kinship caregivers
☐ Services and/or supports provided to non-certified kinship caregivers

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7. POLICIES AND PROCEDURES (continued)

b. Does the county enter non-certified kinship caregivers into Trails as a resource or provider?

- ☐ No, non-certified kinship caregivers are not currently entered.
- ☐ Yes, whenever a child is living with kin and the county provides a support to the kin, the kin are entered into Trails as a provider with a service type Kinship Care.
- ☐ Sometimes the non-certified kinship caregivers are entered as a provider, depends on the extent of the services being provided by the county.

If Yes or Sometimes, when were data first regularly entered in Trails for non-certified kinship caregivers:

- ☐ Prior to 7/1/2012
- ☐ Between 7/1/2012 and 7/1/2013
- ☐ After 7/1/2013: Enter month and year began:

c. Does the county currently use any of the following quality assurance activities to understand if kinship caregivers are receiving the supports they feel they need and/or feel knowledgeable about the options or services available to them?

- ☐ Satisfaction survey of kinship caregivers
- ☐ Interviews or focus groups with kinship caregivers
- ☐ Case-level data on kinship caregivers
- ☐ Other, specify

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8. DEBRIEF

- a. **Persons completing:** Please note the job title/role(s) of the person(s) completing the Kinship Supports module of the Implementation Index for your county:
(check all that apply)

☐ Manager or Administrator

☐ Supervisor

☐ Kinship Supports Worker

☐ Group Process, specify

☐ Other, specify

- b. **Please use the following textbox to enter any comments or clarifications related to any of the following questions:**

- Were there any questions where it was difficult to explain the county's implementation, given the options provided?
- Were there any questions that were unclear?
- Is there any important aspect of the county's implementation that was not addressed in this section of the Index?

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This completes the Kinship Supports module.

If the county is ready for the evaluation to view its answers, please click here:

Click [here](#) or use the home link above to return to the survey home page.

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ABOUT THE SURVEY

Thank you for logging into the Colorado Title IV-E Waiver Demonstration Project Implementation Index.

The Implementation Index is an instrument based on research about the process of program implementation. This Index will track the degree and timing of implementation of four child welfare interventions in each of the child welfare departments across Colorado. The evaluation will use the information to look at implementation over time and identify which aspects of the IV-E Waiver have been implemented more or less widely and how the implementation process is related to outcomes.

The Implementation Index is designed in recognition of the following features of Colorado's Title IV-E Waiver Demonstration Project:

1. Counties will vary in which of the interventions they are implementing during the 5-year Demonstration Project.
2. Counties may have implemented some components of an intervention before or after IV-E Waiver funding became available, even if they have not formally indicated an intention to implement the full intervention.
3. Implementation of the identified interventions is a developmental and incremental process that will continue over an extended period of time, perhaps indefinitely.
4. There are no cutoff points at which implementation can be or should be deemed "adequate," "complete," etc.

The Implementation Index is therefore not intended, and will not be used, to assess compliance. Its purpose is to track the nature and extent of intervention activities over time across the state for purposes of the evaluation. For each intervention being implemented in the county, regardless of whether the intervention is funded by the IV-E Waiver, please address the questions in that intervention's module.

Answers to last years' questions can be viewed as reference, but please report on current practice rather than what was indicated in the previous year.

For a full explanation of the Implementation Index, [please click here](#). The evaluation team appreciates your involvement in this evaluation effort.

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TRAUMA-INFORMED CARE

The following questions will help the evaluation team understand if the county is currently providing any systematic practices around trauma-informed care to the child welfare population. This set of questions is designed to explore processes to screen, assess and treat child welfare families with trauma-focused practices.

For some questions, the county may be able to provide more complete answers by consulting with its mental health partners. To facilitate discussion between the county child welfare staff and mental health partners, refer to the Trauma-Informed Care section in the [PDF of the Implementation Index](#).

According to the definitions being developed for the IV-E Waiver intervention, the following trauma questions are divided into three sections:

1. Screening: A screen checks for exposure to traumatic events and for trauma-related symptoms.
2. Assessment: A comprehensive assessment documents trauma-related mental health needs for children and caretakers who have been exposed to traumatic events and/or who exhibit trauma-related symptoms.
3. Treatment: In this context, refers to the treatment of mental health needs in a trauma-informed manner.

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I. TRAUMA SCREENING

TRAUMA SCREENING

1. Indicate if the county currently has any process to assure that children are screened for trauma.

- ☐ No formal trauma screening process is in place (skip to Trauma Assessment section)
- ☐ Child welfare caseworkers consistently screen but do not use a standard instrument
- ☐ Child welfare caseworkers screen using a standard tool

Date began using standard tool (MM/YYYY)

If you answer 'No formal trauma screening process is in place', please continue to Trauma Assessment.

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I. TRAUMA SCREENING (continued)

2. TARGET POPULATION

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. When children are determined to need a trauma screening, how often do the following children in the family receive the trauma screening?					
i. Only the child(ren) that is/are the subject of the referral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. All children named in the referral, assessment or case plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Other, specify: <div></div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. What age are children currently screened for trauma?					
i. Age 0 to 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. Age 3 to 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Age 8 to 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. Age 12 to 16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Age 16 and older	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I. TRAUMA SCREENING (continued)

2. TARGET POPULATION

c.	How often do the following types of child welfare cases currently receive a trauma screening?	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
i.	Founded Assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii.	Open FAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii.	Open traditional/High Risk Assessment - PA4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv.	Open traditional/High Risk Assessment - PA5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v.	Other, specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

d. Are caretakers ever screened for trauma? ☐ Yes ☐ No

If yes, under what circumstances?

- ☐ Caretakers of children identified as needing to be screened for trauma
- ☐ Caretakers of children who are screened-in (whose screen indicates that the child has been exposed to traumatic events or exhibits trauma-related symptoms)
- ☐ Caretakers of children who are being assessed for mental health needs due to exposure to trauma or exhibiting trauma-related symptoms
- ☐ Caretakers of children who are being treated for mental health needs
- ☐ Other

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I. TRAUMA SCREENING (continued)

3. TIMING

When a trauma screening is identified as needed, is there a timeframe within which the screening must be completed?

☐ There is no established timeframe

☐ There is an established timeframe

☐ Other, specify:

Established timeframe: days after:

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I. TRAUMA SCREENING (continued)

4. STAFFING ROLES AND TRAINING

a. Who in the child welfare agency currently administers the trauma screen to children?

☐ Completed by the assigned child welfare case worker

☐ Other, specify:

b. Have the current staff administering the screening been trained on how to conduct the trauma screening?

☐ Yes ☐ No

i. If yes, did the training cover

☐ Information about the effects of trauma on children

☐ Information about the effects of trauma on parents/caretakers

☐ Information about how to administer a specific screening tool

ii. If yes, how long was the training?

☐ less than 2 hours

☐ 2 hours to 1 day

☐ more than 1 day

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I. TRAUMA SCREENING (continued)

5. TOOLS

- a. What tool is currently used to screen children for trauma?**
- | | Never
(~25%) | Rarely
(~50%) | Sometimes
(~75%) | Usually
(~100%) | Always
(~100%) |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| i. Southwest Michigan Children's Trauma Assessment Center Tool | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ii. Other (1), specify: <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| iii. Other (2), specify: <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| iv. Other (3), specify: <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- b. How do county child welfare staff use the trauma screening information to determine if comprehensive trauma assessment is needed?**
- ☐ Objective guidelines based on the screening information indicate need for trauma assessment
- i. What are the guidelines?
- ii. Can these guidelines be overridden? ☐ Yes ☐ No
- iii. If so, by whom?
- ☐ Subjective decision of staff who completes the screening
- ☐ Other, specify:
- c. Is trauma screening data currently entered into any data system?**
- ☐ Yes (check all that apply)
- ☐ TRAILS
- ☐ A local data system
- ☐ No

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I. TRAUMA SCREENING (continued)

6. POLICIES AND PROCEDURES

Are there written child welfare policies and procedures regarding the practice of completing the trauma screening?

- ☐ Policies and procedures regarding eligibility
- ☐ Policies and procedures regarding target population
- ☐ Policies and procedures regarding how trauma screening is completed
- ☐ Other policies and procedures regarding trauma screening - Please describe:

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II. TRAUMA-INFORMED ASSESSMENT

1. Indicate if the county currently has any process to comprehensively assess children for trauma.

- ☐ Trauma assessment is currently not done (Skip to Trauma-informed treatment section)
- ☐ Nothing systematic; child welfare workers determine if a referral should be made for a trauma assessment
- ☐ Nothing systematic; mental health clinicians determine if a child should be assessed for trauma
- ☐ Yes, the county has a systematic process to assess children for trauma

If yes, date began (MM/YYYY)

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II. TRAUMA-INFORMED ASSESSMENT (continued)

2. TARGET POPULATION

	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
a. How often do the following individuals receive a comprehensive trauma assessment?					
Children with a trauma screening that indicates trauma is negatively impacting their functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caretakers with a trauma screening that indicates trauma is negatively impacting their functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. How often do the following types of child welfare cases receive a trauma assessment?					
Founded assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open FAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open traditional/High Risk Assessment - PA4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open traditional/High Risk Assessment - PA5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. For the non-Medicaid eligible population, how often does a lack of Medicaid funding limit the ability to provide trauma informed assessments to the following individuals?					
Children (i.e. children not in out-of-home care and with income too high for Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caregivers (i.e. those with income too high for Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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II. TRAUMA-INFORMED ASSESSMENT (continued)

3. REFERRAL PROCESS

a. Is there currently a systematic process by which a referral for a comprehensive trauma assessment is made?

☐ Yes

☐ No, informal referral system

If yes,

i. Is there a standardized form? ☐ Yes ☐ No

ii. Is a trauma screening tool included with the referral for assessment? ☐ Yes ☐ No

iii. Who makes the referral?

☐ Assigned Caseworker

☐ Supervisor

☐ Automated referral out of TRAILS

☐ Other, specify:

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II. TRAUMA-INFORMED ASSESSMENT (continued)

3. REFERRAL PROCESS

b. Where are individuals referred to for a comprehensive trauma assessment? (check all that apply)

☐ Community mental health center

☐ Private Practitioner

☐ Other, specify:

c. What if any barriers does the county currently encounter in getting individuals in to have a comprehensive trauma assessment completed? (check all that apply)

☐ No barriers

☐ Waitlist

☐ Eligibility criteria

☐ Funding (e.g. non-Medicaid eligible families)

☐ Lack of qualified providers

☐ Limited availability of providers

☐ Lack of child welfare involvement (child welfare case closes prior to trauma assessment because no safety/risk concerns)

☐ Resistance from families

☐ Other, specify:

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II. TRAUMA-INFORMED ASSESSMENT (continued)

4. TIMING

a. When a comprehensive trauma assessment is identified as needed, is there a timeframe within which the first trauma assessment must be completed?

☐ There is no established timeframe

☐ There is an established timeframe

☐ Other, specify:

Established timeframe: days after referral for trauma assessment

b. What is the frequency of subsequent trauma assessments?

☐ No standardized subsequent assessments

☐ Every three months during trauma treatment

☐ At other regular intervals during trauma treatment

☐ At the end of trauma treatment

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II. TRAUMA-INFORMED ASSESSMENT (continued)

5. STAFFING ROLES AND TRAINING

a. If the need for a comprehensive trauma assessment is identified, who conducts the trauma assessment?

☐ Staff in child welfare agency

☐ Mental Health Clinician

☐ Other, specify:

b. Have the current staff administering the comprehensive trauma assessment been trained on how to conduct trauma informed assessments?

☐ All individuals conducting trauma assessment (approximately 100%)

☐ Most individuals conducting trauma assessment (approximately 75%)

☐ Some individuals conducting trauma assessment (approximately 50%)

☐ Few individuals conducting trauma assessment (approximately 25%)

☐ No individuals conducting trauma assessment (approximately 0%)

☐ Unknown

c. Describe training received (e.g. Child Welfare Trauma Toolkit Training):

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II. TRAUMA-INFORMED ASSESSMENT (continued)

6. TOOLS

a. Is a specific tool currently mandated to be used by the staff conducting the trauma assessment?

- ☐ Child PTSD Symptom Scale (PCSS)
- ☐ Trauma Symptom Checklist for Young Children (TSCYC)
- ☐ PTSD checklist for Adults
- ☐ Other (1), specify::
- ☐ Other (2), specify::

b. Is there a systematic process to share results of the trauma assessment with the assigned child welfare worker?

- ☐ No
- ☐ Yes

i. If yes, indicate how results are shared

- ☐ Sharing is informal
- ☐ Sharing is formal discussed in a regularly scheduled meeting
- ☐ Sharing is through a written report
- ☐ Other, please describe:

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II. TRAUMA-INFORMED ASSESSMENT (continued)

6. TOOLS

c. Is trauma assessment data currently entered into any data system?

☐ No

☐ Yes

i. If yes, what kinds of data systems?

☐ TRAILS

☐ The Office of Behavioral Health survey process (i.e. Survey Monkey)

☐ A local data system

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II. TRAUMA-INFORMED ASSESSMENT (continued)

7. POLICIES AND PROCEDURES

Does the county child welfare agency or mental health provider have written policies and procedures regarding the practice of completing the comprehensive trauma assessment?

- ☐ Policies and procedures regarding eligibility
- ☐ Policies and procedures regarding target population
- ☐ Policies and procedures regarding how trauma assessment is completed
- ☐ Other policies and procedures regarding trauma assessment
Please describe:

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III. TRAUMA-INFORMED TREATMENT

1. Indicate if the county currently has any systematic process to assure that children who have received a comprehensive assessment and found to be in need of trauma treatment receive trauma treatment.

- ☐ Trauma treatment is currently not available for child welfare population
- ☐ Nothing systematic; worker determines if a referral should be made for trauma treatment
- ☐ Nothing systematic; mental health clinicians determine if an individual should receive trauma treatment
- ☐ Yes, the county has a systematic process to ensure that children receive trauma treatment

If yes, date began (MM/YYYY)

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III. TRAUMA-INFORMED TREATMENT (continued)

2. TARGET POPULATION

a. Which individuals currently receive a trauma treatment?	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
Children with a trauma assessment that indicates trauma is negatively impacting their functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caretakers with a trauma assessment that indicates trauma is negatively impacting their functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. For the non-Medicaid eligible population, how often does a lack of Medicaid funding limit the ability to provide trauma informed assessments to the following individuals?	Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
Children (i.e. children not in out-of-home care and with income too high for Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caregivers (i.e. those with income too high for Medicaid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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III. TRAUMA-INFORMED TREATMENT (continued)

3. REFERRAL PROCESS

a. Once a comprehensive trauma assessment has been completed, who makes the recommendation for the trauma treatment?

☐ Assigned child welfare case worker

☐ Child welfare supervisor

☐ Mental health practitioner

☐ Other, specify:

b. Is there a systematic process by which a referral for trauma treatment is made?

☐ Yes

☐ No, informal referral system

If yes,

i. Is there a standardized form? ☐ Yes ☐ No

ii. Is the trauma assessment included with the referral for treatment? ☐ Yes ☐ No

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III. TRAUMA-INFORMED TREATMENT (continued)

3. REFERRAL PROCESS

c. How is it determined which provider to refer the client to for trauma treatment?

- ☐ The mental health provider who conducted the comprehensive trauma assessment provides the treatment.
- ☐ Other, specify:

d. What if any barriers does the county currently encounter in getting individuals into trauma treatment?

- ☐ No barriers
- ☐ Waitlist
- ☐ Eligibility criteria
- ☐ Funding (e.g. non-Medicaid eligible families)
- ☐ Lack of qualified providers
- ☐ Lack of child welfare involvement (child welfare case closes prior to trauma assessment because no safety/risk concerns)
- ☐ Resistance from families
- ☐ Other, specify:

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III. TRAUMA-INFORMED TREATMENT (continued)

4. TIMING

a. When trauma treatment is identified as needed, is there a timeframe within which the first trauma treatment session must be completed?

☐ There is no established timeframe

☐ There is an established timeframe

☐ Other, specify:

Established timeframe: days after referral for trauma treatment

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III. TRAUMA-INFORMED TREATMENT (continued)

5. STAFFING ROLES AND TRAINING

a. If the need for trauma treatment is identified, who provides the trauma treatment?

☐ Mental Health Clinician

☐ Other, specify:

b. Have the staff currently providing trauma treatment been trained on trauma informed treatment?

☐ All individuals conducting trauma treatment (approximately 100%)

☐ Most individuals conducting trauma treatment (approximately 75%)

☐ Some individuals conducting trauma treatment (approximately 50%)

☐ Few individuals conducting trauma treatment (approximately 25%)

☐ No individuals conducting trauma treatment (approximately 0%)

☐ Unknown

c. Describe training received

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III. TRAUMA-INFORMED TREATMENT (continued)

6. AVAILABILITY

How often is trauma-based treatment available for those who need it?

Never Rarely (~25%) Sometimes (~50%) Usually (~75%) Always (~100%)

- | | | | | | |
|---------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Age 0 to 3 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Age 4 to 8 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Age 9 to 12 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Age 13 to 16 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Age 17 and older | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Adults | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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III. TRAUMA-INFORMED TREATMENT (continued)

7. TOOLS

a. For those clients receiving a trauma treatment, what evidence based treatment methods or promising practices are currently used?		Never	Rarely (~25%)	Sometimes (~50%)	Usually (~75%)	Always (~100%)
i.	Individual psychotherapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii.	Child parent psychotherapy for 0-5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii.	Trauma focused Parent Child Interaction Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv.	TF-CBT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v.	Adolescent Dialectical Behavioral Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi.	Alternative for Families CBT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vii.	SPARKS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
viii.	Complementary or adjunctive supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ix.	Addressing goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x.	Alternative therapies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xi.	Bruce Perry work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xii.	Other (1), specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
xiii.	Other (2), specify: <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. Is there a systematic process to determine which trauma treatment is needed ?

☐ Yes ☐ No

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III. TRAUMA-INFORMED TREATMENT (continued)

7. TOOLS

c. Is there a systematic process to share progress of the trauma treatment with the assigned child welfare worker?

☐ No

☐ Yes

i. If yes, indicate how results are shared

☐ Sharing is informal

☐ Sharing is formal discussed in a regularly scheduled meeting

☐ Sharing is through a written report

☐ Other, please describe:

d. Is data related to the trauma treatment currently entered into any data system?

☐ No

☐ Yes (check all that apply)

☐ TRAILS

☐ A local data system

Name the system and describe type of data entered into these systems:

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TRAUMA-INFORMED CARE

DEBRIEF

a. **Persons Completing:** Please note the job title/role(s) of the person(s) completing the Trauma module of the Implementation Index:
(check all that apply)

☐ Manager or Administrator

☐ Supervisor

☐ Group Process, specify:

☐ Other, specify:

b. **Please use the following textbox to enter any comments or clarifications related to any of the following questions:**

- Were there any questions where it was difficult to explain the county's implementation, given the options provided?
- Were there any questions that were unclear?
- Is there any important aspect of the county's implementation that was not addressed in this section of the Index?

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This completes the Trauma-Informed Care module.

If the county is ready for the evaluation to view its answers, please click here: [Finish](#)

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COMMUNITY CAPACITY FOR TRAUMA-INFORMED CARE

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ABOUT THE SURVEY

Thank you for logging into the Colorado Title IV-E Waiver Demonstration Project Implementation Index.

The Implementation Index is an instrument based on research about the process of program implementation. This Index will track the degree and timing of implementation of four child welfare interventions in each of the child welfare departments across Colorado. The evaluation will use the information to look at implementation over time and identify which aspects of the IV-E Waiver have been implemented more or less widely and how the implementation process is related to outcomes.

The Implementation Index is designed in recognition of the following features of Colorado's Title IV-E Waiver Demonstration Project:

1. Counties will vary in which of the interventions they are implementing during the 5-year Demonstration Project.
2. Counties may have implemented some components of an intervention before or after IV-E Waiver funding became available, even if they have not formally indicated an intention to implement the full intervention.
3. Implementation of the identified interventions is a developmental and incremental process that will continue over an extended period of time, perhaps indefinitely.
4. There are no cutoff points at which implementation can be or should be deemed "adequate," "complete," etc.

The Implementation Index is therefore not intended, and will not be used, to assess compliance. Its purpose is to track the nature and extent of intervention activities over time across the state for purposes of the evaluation. For each intervention being implemented in the county, regardless of whether the intervention is funded by the IV-E Waiver, please address the questions in that intervention's module.

Answers to last years' questions can be viewed as reference, but please report on current practice rather than what was indicated in the previous year.

For a full explanation of the Implementation Index, [please click here](#). The evaluation team appreciates your involvement in this evaluation effort.

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COMMUNITY CAPACITY TO PROVIDE TRAUMA-INFORMED CARE

The following questions will help the evaluation team understand if the county is currently preparing to provide trauma-informed care to the child welfare population. This set of questions is designed to explore training for child welfare agency staff and/or community members about the impact trauma may have on children and families in the community.

1. Please rate the community's current capacity to provide trauma informed care to families:

- ☐ Never
☐ Rarely (~25%)
☐ Sometimes (~50%)
☐ Usually (~75%)
☐ Always (~100%)

Describe:

2. Has the county made any efforts in the past year to educate *child welfare agency staff* about the impact trauma may have on children and families in the community?

- ☐ Extensive efforts to educate child welfare staff about impact of trauma
☐ Moderate efforts to educate child welfare staff about impact of trauma
☐ Minimal efforts to educate child welfare staff about impact of trauma
☐ No efforts to educate child welfare staff about impact of trauma

Describe:

3. Has the county made any efforts in the past year to educate the *community* about the impact trauma may have on children and families in the community?

- ☐ Extensive efforts to educate community about impact of trauma
☐ Moderate efforts to educate community about impact of trauma
☐ Minimal efforts to educate community about impact of trauma
☐ No efforts to educate community about impact of trauma

Describe:

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4. DEBRIEF

- a. **Persons Completing:** Please note the job title/role(s) of the person(s) completing the Community Capacity for Trauma-Informed Care module of the Implementation Index: (check all that apply)

☐ Manager or Administrator

☐ Supervisor

☐ Group Process, specify:

☐ Other, specify:

- b. **Please use the following textbox to enter any comments or clarifications related to any of the following questions:**

- Were there any questions where it was difficult to explain the county's implementation, given the options provided?
- Were there any questions that were unclear?
- Is there any important aspect of the county's implementation that was not addressed in this section of the Index?

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This completes the Community Capacity for Trauma-Informed Care module.

If the county is ready for the evaluation to view its answers, please click here:

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APPENDIX F: Family Engagement Participant Attendance Frequencies

Family Engagement Meeting Participant Frequencies	
Role Code	% Meetings (N = 8,512)
Facilitator	100%
Parent	87%
Caseworker	84%
Supervisor	75%
Relative/Friend/Family Support	69%
Provider of Therapeutic Services	34%
Kinship Care Provider	15%
Other	14%
Parent Attorney	10%
CASA	8%
Step-Parent	5%
School Provider	4%
GAL/Child Advocate	2%
Administrator	1%
Foster Parent/OOH Provider	1%
Interpreter	< 1%
Tribal Representative	< 1%
Probation/DYC	< 1%
Other Legal	< 1%

APPENDIX G: Additional Interrupted Time Series Analyses

Interrupted Time Series Analyses for counties that received waiver intervention funding beginning in year one and that were implementing the family engagement, kinship supports, or PRT intervention at a high level:

Figure G1: Annual Congregate, Foster, and Kinship Care Placement Days from State Fiscal Years 2005 to 2015 in Counties Implementing Family Engagement at a High Level (n=29 Counties)

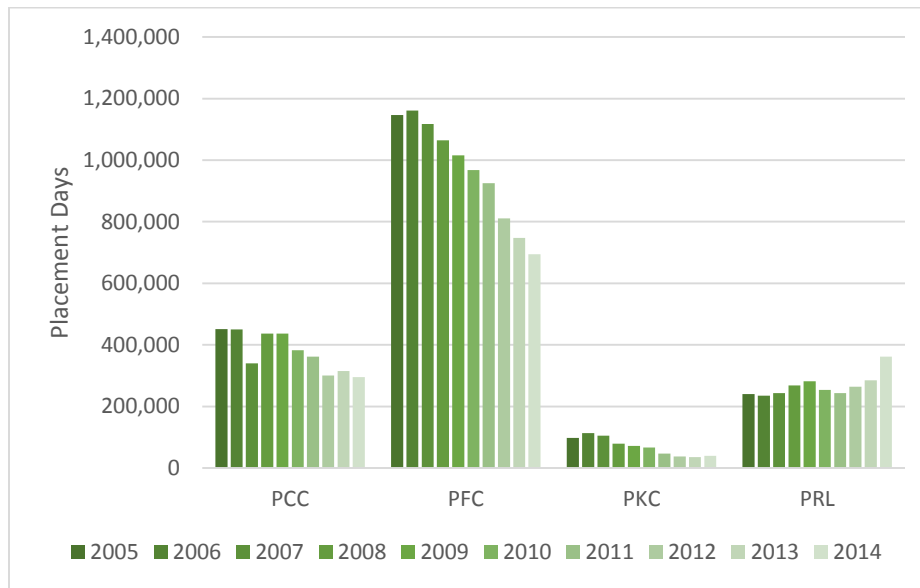


Figure G2: Annual Congregate, Foster, and Kinship Care Placement Days from State Fiscal Years 2005 to 2015 in Counties Implementing PRT at a High Level (n=12 Counties)

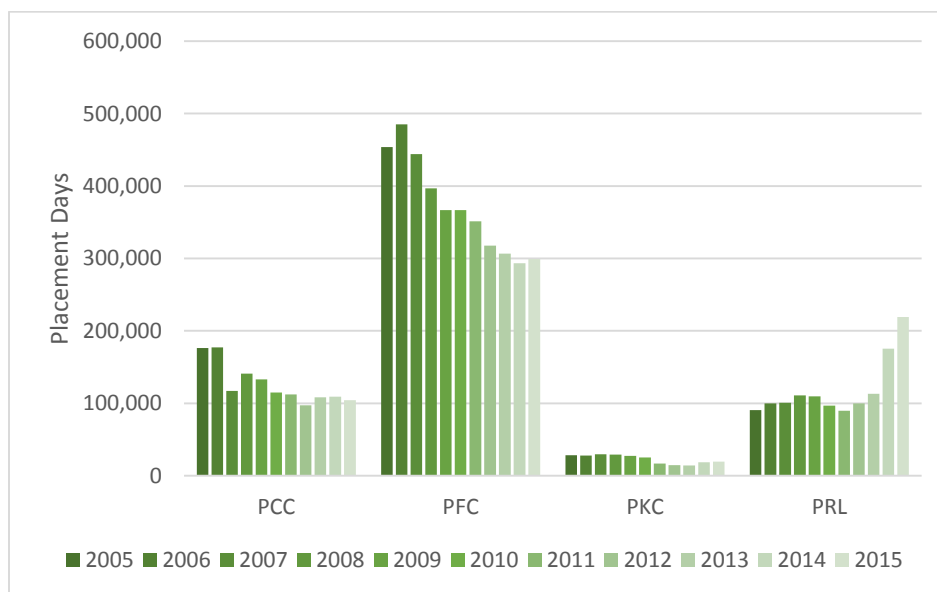


Figure G3: Annual Congregate, Foster, and Kinship Care Placement Days from State Fiscal Years 2005 to 2015 in Counties Implementing Kinship Supports at a High Level (n=8 Counties)

