Pennsylvania's Child Welfare Demonstration Project:

Family Engagement Study User's Guide

Revised September 2014

Introduction

This User's Guide is a compilation of various materials created exclusively for Pennsylvania's Child Welfare Demonstration Project for the Family Engagement Study. The materials are intended for county and agency partners along with their private providers to provide copies of all the necessary forms to adequately collect data for the Family Engagement Study and to give guidance on the usage of these forms. All documents, webpages, photographs and images are the property of the University of Pittsburgh, except where noted. Permission is required to copy, download or use any text, photographs or image files.
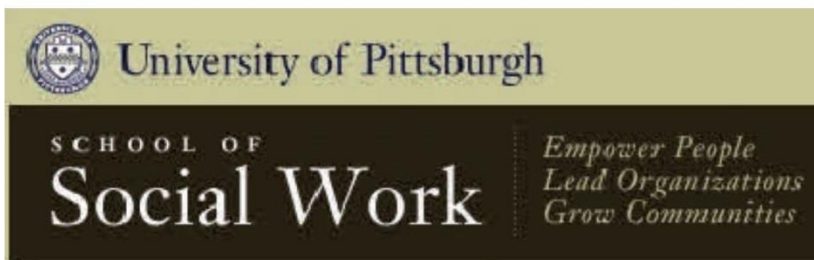
These materials were created in partnership with:

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Family Engagement Study: Overview

What is the Family Engagement Study?
The purpose of the family engagement component of the Demonstration Project is to answer questions about the fidelity and the impact of family conferences or groups on certain outcomes. Although each county is calling their engagement processes by a different name, and may have slightly different purposes, all have five core elements:

➢ Conferences are facilitated by neutral and trained staff;

➢ Effective partnerships are promoted between child welfare and other partners;

➢ Outreach to kin and others as support for parents or potential caregivers;

➢ Individuals are prepared for the conference;

➢ Families are helped to identify and access services.

The interventions in the Demonstration Project (as per each County's IDIR) that include these five core elements are:

- Allegheny- Conferencing and Teaming
- Crawford-Family Group Decision Making; Family Team Meeting
- Dauphin- Family Group Conference
- Lackawanna- Family Team Conferencing; Family Group Decision Making
- Philadelphia- Family Team Conferencing and Family Group Decision Making
- Venango- Family Group Decision Making; Family Team Meeting

Who is in the study?
The study began with the implementation of the Demonstration Project on July 1, 2013. Therefore, any children and families whose cases were opened for services from child welfare after July 1st, and participate in one of the conferences identified are included in the study. Children and families already active in child welfare may also be offered one of the family conferences in order to keep children in the home or to try to move children out of foster care or institutional/residential placement. These open cases are also included in the study.

What ends participation in the study?
When the case is closed to child welfare or the child ages out.

How is data collected?
There are 4 tools: Facilitator Face Sheet; Family Conference Survey; Baseline Form and Follow-up Form, which are included in this document. These forms are now in final format.

Will there be trainings on how to administer these forms? How will my questions be answered?
You may access a training video on how to implement and complete the Family Engagement Forms on the Child Welfare Resource Center site (http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm). Additionally, we have created a Frequently Asked Questions (FAQ) document that accompanies this User's Guide and the training video. If you have further questions that are not addressed by these resources, please contact Alexis Pigott (alp159@pitt.edu; 717-605-0235).

Family Engagement Study: Definitions

What is the protocol when a family is the subject of the conference, rather than a child/youth?

When a family is the subject of the conference, rather than an identified child, *a child must be randomly selected as the focus for these forms.* Please select the child whose birth month and day is the closest to the current date. For example, if today's date is March 21st, and you have a referral for an entire family, then look at the birth days and month for each of the children. There are three children with birth dates of March 3rd, July 6th and September 9th. You would choose as the focus the child with the March 3rd birth date to be the identified child and focus for the forms.

What is considered an "initial" conference?

An "initial" *conference is defined as the first conference that occurs in the course of the child's involvement with CYF OR a conference that occurs more than 12 months after the last conference.* For example, the Smith family is referred to CYF for child neglect. This is their first referral to CYF. There is an investigation, the case is opened for services and a conference is held. This is an initial conference. The Park family has been open for family services for the past 6 months, during which time no conference has been held. The family initially refused to have a conference, but now feel that it would be helpful for the family to come together; therefore, a conference is held. This would be an initial conference. The Miller family was involved in CYF from 2010-2011 and then the case was closed. They were re-referred in June of 2013 and a conference was held. This would be considered an initial conference. June has been in a group home for the past 14 months. She had a conference 13 months ago and the agency is committed to finding her a permanent home. They schedule a conference. Since her last conference was 13 months ago, this is considered an initial conference.

What is considered a "follow-up" conference?

According to the IDIRs, all of the Demonstration counties are doing ongoing family conferences after the initial conferences and these are convened around the time of plan revision. *We refer to these as "followup conferences" — a conference or meeting which brings all or some of the family group and professionals back together again.* Not all of the follow-up conferences held will include family, but the expectation held by all of the Demonstration counties is that most conferences will. Conferences are typically being scheduled around family service plan revision but in some counties, conferences may also be held when there is a change in placement being considered, a decision needs to be made, or if new needs arise. Families may also call a conference. The time frame for these subsequent conferences (follow-up conferences) varies by county.

Note: Some counties with well-established family engagement practices may see families for "follow-up" conferences in the months immediately after joining the Demonstration Project. In these cases, although the conferences are technically "follow-up" conferences, we're asking that the baseline form be completed at this first follow-up conference so that there is baseline data for that child/family. For example, if a family had an initial conference in May with a routinely scheduled follow-up conference in November, we are asking for the completion of the baseline form at that November conference.
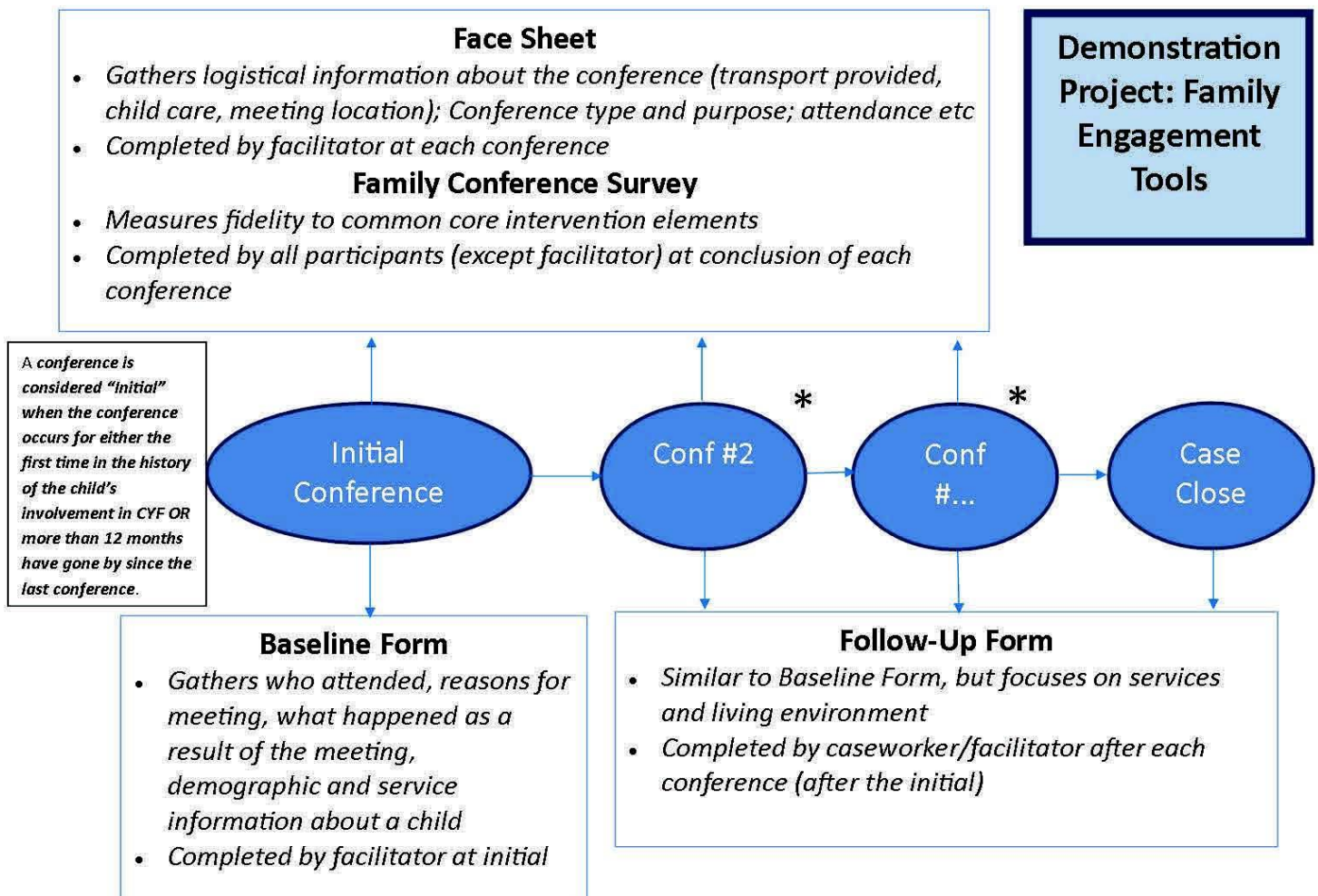
Family Engagement Study: Procedures

At or immediately after the initial conference, a Face Sheet is completed and a Baseline Form is also completed by the conference facilitator and/or a caseworker—whoever has the information. Several people may contribute information but we prefer that only one person actually complete it.

Immediately after the conference, the family and professionals are asked to complete a Family Conference Survey. The facilitator of the meeting does NOT complete this survey.

At or prior to each follow-up conference, the facilitator is to complete a Face Sheet and a Follow-Up Form and, if present, family members and others are to complete Family Conference Surveys (see the model below). **In addition, the Follow-Up Form must be completed at case closure.**

In this document, you will find procedures for each of the forms. Please contact Alexis Pigott (alp159@pitt.edu) with any questions.

Face Sheet
- Gathers logistical information about the conference (transport provided, child care, meeting location); Conference type and purpose; attendance etc
- Completed by facilitator at each conference

Family Conference Survey
- Measures fidelity to common core intervention elements
- Completed by all participants (except facilitator) at conclusion of each conference

Demonstration Project: Family Engagement Tools

A conference is considered "Initial" when the conference occurs for either the first time in the history of the child's involvement in CYF OR more than 12 months have gone by since the last conference.

Initial Conference → Conf #2 → * Conf #... → * Case Close

Baseline Form
- Gathers who attended, reasons for meeting, what happened as a result of the meeting, demographic and service information about a child
- Completed by facilitator at initial

Follow-Up Form
- Similar to Baseline Form, but focuses on services and living environment
- Completed by caseworker/facilitator after each conference (after the initial)

*Conferences held after the initial conference are held at the time of a Family Service Plan revision OR when there is an ad-hoc meeting due to emergent situation (e.g. placement in jeopardy)

Family Engagement Study: Teleforms

These forms are designed so that the information can be scanned instead of entered manually. PDFs of the Face Sheet; Family Conference Survey; Baseline Form and Follow-Up Form are posted on the CWRC website and can be downloaded from this URL: http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm. These forms can be printed out using any printer. **When using these forms please follow the instructions below:**

➢ Print out the surveys front and back; do NOT staple them.
➢ Use black or blue ink or pencil to fill out the form. Do NOT use Sharpies, magic markers, or felt tip markers.
➢ Please do NOT fold surveys as this can impact scanning accuracy.
➢ On each form, there is a printed bar code that provides the information for the computer to read the document. Do NOT color or write in this box.
➢ Please review the forms for incorrect information, stray marks, or missing information and correct when possible before sending them to us.

Please mail all Family Engagement forms to the Child Welfare Resource Center **MONTHLY** so that we can scan the forms and keep data collection up to date. If we have any questions, we will contact you.

Mailing address:
Pennsylvania Child Welfare Resource Center
Attn: Alexis Pigott
403 East Winding Hill Road
Mechanicsburg, PA 17055

Family Engagement Study: Submitting a file from your information system

If counties wish to submit their family engagement data electronically, instead of mailing in the Teleforms to be scanned, they should follow the process below:

- Data files should be uploaded to the file repository Sharefile. (https://pacwrc.sharefile.com/)

- Please submit a comma delimited text file. We have a flat file example with variable names and look up tables. If you would like a copy of this, please contact Alexis Pigott (alp159@pitt.edu).

- The naming convention of the file is: **county_dataname_month_date_year.extension.** For example, a Baseline Form data file for May 17th, 2013 from Venango would be named Venango_**baseline**_5_17_13.txt; a Face Sheet data file would be Venango_**face**_5_17_13.txt; a Family Conference Survey data files would be Venango_**famconf**_5_17_13.txt; and a Follow-Up data file would be Venango_**followup**_5_17_13.txt.

- Each county has a Sharefile folder and two people designated with usernames and passwords. If you need to change designated individuals, or have problems with Sharefile contact Matt Kerr (mak38@pitt.edu).

- Please submit data files **MONTHLY** (this will become quarterly once we have worked out problems).

    - For ease of data uploads, we suggest that all data elements be entered into your data system by the last day of each month. This should give your staff time to check the data and prepare the data file for upload. Data uploads are due by the 5th business day of every month. For example, May 2013 baseline data files would be uploaded by June 7th.

    - If we have any questions, we will contact you within 30 days.

Facilitator Face Sheet: Instructions

*Form should be completed before or shortly after the conference

*ALL FORMS SHOULD BE PRINTED FROM THE PDF ON THE WEBSITE AT:
http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm

<u>Identifying Information</u>

County Code: Please indicate the county code that is associated with the conference.

Family Conference Date: This is the date that the conference was held. It is MM/DD/YYYY (e.g., 05/15/2013)

Type of meeting: FTC is Family Team Conferencing; FTM is Family Team Meeting; FGDM is Family Group Decision Making; FGC is Family Group Conferencing (specific to Dauphin County); Conferencing and Teaming (specific to Allegheny County).

Scheduled conference: Some conferences are routine and scheduled. For example, an initial conference is scheduled in advance or a conference is scheduled in order to update a plan. A "not scheduled" conference is one that was held within 1 to 2 days after an identified need. For example, the foster parent was threatening to leave the child at the agency, or an emergency occurred (parent hospitalized or arrested). This may not always be clear but probably the best way to determine this is by asking "was this conference scheduled more than 48 hours ahead of time?"

Name of person facilitating the conference: Some counties have multiple facilitators and some have one or two. If numbers are assigned to facilitators, put down the number. If not, then please write the first and last name of the facilitator.

Facilitator type: A facilitator may have multiple roles (e.g. she/he may also be the assigned caseworker or supervisor). Since the counties are all using different models, we are attempting to determine which model your county is using. In the event where you have an internal unit staffed by specialists rather than caseworkers, check the option "Facilitator is a CYF caseworker NOT assigned to the family".
If you check "other", please be specific (e.g. "facilitator is the pastor for the family").

Meeting location: Agency means the CYF or CYS agency; placement setting would be an out of home placement such as a professional placement setting (e.g. residential treatment facility group home; provider agency headquarters; domestic violence shelter conference room). A parent/caregiver home would be a conference held at the family home or a foster parent or kinship parent home. A neutral/offsite placement would be a place in the community that is not associated with a helping service (e.g. a library, a fire-hall, a restaurant, a church). Use "other" if you cannot put the location in any of these categories but please use it sparingly.

MCI (Master Client Index): The MCI is the number assigned to the child <u>by the state</u> that uniquely identifies the child. Every child involved in Children and Youth services is assigned a state MCI number. If you are working as a contractor for the agency, please contact the agency to obtain this number.

Family ID number: Some counties also assign a number to families. If there is a number, include it here. You may find it on a record. However, it is the MCI number that is critical, so if you cannot find a Family ID, or none is assigned, leave it blank.

1. **Was at least one birth parent in attendance?** This refers to a birth parent and does NOT include a foster parent, resource parent, treatment parent or kinship foster care parent (e.g. those acting as a parent but are not birth parent).

2. **Number of family and friends invited:** This refers to the number of people identified and invited to the conference. This number does NOT include the facilitator, and does not include professionals. Write in the actual number (e.g. 20 were invited).

3. **Number who attended**: This refers to the number of people who attended. This number does NOT include the facilitator, and does not include professionals (e.g. 18 attended the conference). This can include participation by phone or internet (e.g. WebEx, Skype).

4a.-4b. **Was transportation OFFERED (4a) or PROVIDED (4b)?** This includes an actual ride or could include bus fare, tickets or jitney fare.

5a.-5b. **Was child care OFFERED (5a) or PROVIDED (4b)?** This would be on site or parents are reimbursed for child care provided by someone else.

DEMONSTRATION PROJECT

Facilitator Face Sheet for Family Engagement Conferences

County Code: ☐☐

Date of Meeting: ☐☐ / ☐☐ / 2 0 ☐☐

Type of Meeting: ☐ FTC
☐ FGDM
☐ FGC
☐ FTM
☐ Conferencing & Teaming

Meeting location:
☐ CYS/CYF Agency Setting
☐ Placement Setting
☐ Parent/Caregiver/Foster home
☐ Neutral/Offsite
☐ Other

Scheduled Conference:
☐ Routinely scheduled conference
☐ Not scheduled - held due to a need or decision point

Name of Person Facilitating Family Conference or Code number:
☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Facilitator type:

☐ Facilitator is a caseworker for the family

☐ Facilitator is a contracted provider

☐ Facilitator is a CYF caseworker but NOT assigned to the family

☐ Facilitator is a supervisor for the family

☐ Other: Please Specify ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Instructions for selecting a child's MCI# when the "family" is the subject of the conference rather than a particular child.
In these cases, a child from the family must be selected as the focus for these forms. Please select the child whose birth month and day is the closest to the current date.

For example, today's date is 3/21/13 and you have a referral for an entire family. There are 3 children in the family. Their birthdates are 3/4/96; 7/6/99 and 12/25/05. In this case, choose as the child for which the baseline and follow-up form will be completed on as the one who has the birth date of 3/4/96.

Child's MCI # ☐☐☐☐☐☐☐☐☐☐

Family Identification Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

1. Was at least one birth parent in attendance?   ☐ Yes   ☐ No

2. Number of family and friends invited to the conference? ☐☐
   Write Number

3. Number of family and friends attended the conference? ☐☐
   Write Number

4a. Was transportation to the conference OFFERED?   ☐ Yes   ☐ No   ☐ Unknown

4b. Was transportation to the conference PROVIDED?   ☐ Yes   ☐ No   ☐ Unknown

5a. Was childcare during the conference OFFERED?   ☐ Yes   ☐ No   ☐ Unknown

5b. Was childcare during the conference PROVIDED?   ☐ Yes   ☐ No   ☐ Unknown

Family Conference Survey: Items and Definitions

Fill out the top part of the survey before distributing to the family and professionals at the conference.

*ALL FORMS SHOULD BE PRINTED FROM THE PDF ON THE WEBSITE AT:
http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm

There are English and Spanish versions of the survey included.
This survey is completed by everyone attending the conference except the facilitator. The facilitator should use his/her own judgment to decide whether or not the youth is capable of completing the survey.

Identifying Information

First conference: A conference that is being held for the first time for this child/children/family.

Follow-Up Conference: A conference that occurs after there has been a first or initial conference. Please see page 5 of this document if you have questions about what is an "initial" or a "follow-up" conference.

Family Conference Date: Date that the conference was held. It is MM/DD/YYYY (e.g., 05/15/2013).

Form ID:
Conference ID: Represent the number given to the conference or family engagement meeting. The terms, Conference ID and Conference Number are used interchangeably.

County Code: Each county's code is listed below. Please insert the appropriate code in this box.

Allegheny = 2
Crawford = 20
Dauphin = 22
Lackawanna = 35
Philadelphia = 51
Venango = 61
Year is 4 digits (e.g., 2013)

Child's MCI # (Master Client Index): The MCI is the number assigned to the child <u>by the state </u>that uniquely identifies the child. Every child involved in Children and Youth services is assigned a state MCI number. If you are working as a contractor for the agency, please contact the agency to obtain this number.

Family ID number: Some counties also assign a number to families. If there is a number, include it here. You may find it on a record. However, it is the MCI number that is critical, so if you cannot find a Family ID, or none is assigned, leave it blank.

Additional Definitions:

Paid professional: Someone who being paid to work with this family. Examples of a paid professional are a counselor, caseworker, doctor, therapist, or a nurse. Unpaid professionals would include someone like a pastor (since they are paid to work with all of the families not just this family); these are individuals who are not working for a salary when they attend the meeting.

Facilitator: The person who is facilitating the conference or meeting.

Private time: Time when the family meets without the professionals present.

Relationship: Often people are in dual relationships (they are both a family member and a foster parent).

When this happens, they should pick the one that feels most comfortable to them. They can also write in the "other" section if they feel that there is not a descriptor. However, **ONLY ONE SHOULD BE CHECKED. IF MORE THAN ONE RELATIONSHIP CODE IS CHECKED, THE SURVEY WILL NOT BE USED.**

Family Conference Survey: Instructions and Script

Before the conference:
Fill out the top section of the Family Conference Surveys using blue or black pen or pencil, including all of the Identifying Information.

Things to bring to the conference:
- Black or blue pens, pencils
- Copies of the Family Conference Survey with the top section completed
- A LARGE mailing envelope

At the end of the Conference:
- Everyone attending the meeting should be asked to fill out a survey; however, it is okay if they refuse to do so. If someone does refuse to complete the survey, please still include the blank survey (which would already have the top portion completed) in the packet of surveys to be scanned. The facilitator does NOT complete the survey.
- Introduce and distribute the survey immediately after the conference. Use the following script:

  "Thanks again for coming today—your participation has been very valuable. We have one more thing that we would like you to do before you leave, and ask for a few more minutes of your time. At the end of every family conference, we ask everyone to complete a survey. The survey asks for your opinion about how you were prepared for the meeting, how the meeting was organized, if the right people were here and how you feel about the meeting. There are no right or wrong answers. If you don't have the information to answer the question, it is ok to put "don't know" as your answer or leave it blank. You can start filling it out and change your mind and leave the answers blank. However, we really appreciate your thoughts about the conference."

  "It is your choice to participate. You can choose not to fill out a survey and this will not change the help that you receive or your relationships with anyone in the group or your job."

  "All of the information is confidential. We do not share an individual's answers. The surveys are scanned into a computer and the information is looked at to see what groups say about the conferences (e.g., What fathers feel, what mothers feel, what professionals feel, what friends feel). We also use this information to make sure that we are doing a good job in our conferences. All information will be reported in a group format so that no one person's answers will be identified. We hope that you will help us because the feedback from the people who participate helps us to do a better job at helping families. "

  "The information from the surveys is kept securely on a computer server at the University of Pittsburgh. The paper forms are kept in a locked file drawer at the Child Welfare Resource Center in Mechanicsburg. They are then destroyed after a certain period of time when it is legal to do that."

Remind them….
1. **The survey has TWO sides; make sure to flip it over and fill out <u>BOTH </u>sides.**
2. **Please only check one relationship.**
3. **If you have any questions when you are filling it out, please ask me.**
4. **Use one of the black or blue pens or pencils (no markers, Sharpies, or crayons).**

- When everyone has completed their survey, pass around a LARGE envelope and ask each person to put their survey in the envelope. The last person should seal the envelope and give it to the facilitator or coordinator.

- If a participant states that they cannot read the survey then ask if they would like to have the survey read to them over the phone. If yes, then obtain their phone number and the best time to reach them and send this information to Alexis Pigott (alp159@pitt.edu) who will contact them and read the survey over the phone to them. It's a little trickier when participants don't self-identify. They may use the excuse, "I forgot my glasses" or ask if they can take it home to read it. Participants may take the form home, but ask if they are okay with Alexis calling them to ask about their experience. If they say "No" to the phone call, then drop the subject.

- If someone does not understand a question try the following:
    - First ask them what they think that it means. Sometimes people want to have their perception verified.
    - If there is a word that is unclear (e.g. they need a definition), you can define the word. Try to avoid interpreting the question for them (e.g. this question means…).
    - If they cannot answer it, then instruct them to leave it blank.

Please mail the Family Conference Surveys to the Child Welfare Resource Center MONTHLY so that we can scan the forms and keep data collection up to date. If we have any questions, we will contact you.

Mailing address:

Pennsylvania Child Welfare Resource Center
Attn: Alexis Pigott
403 East Winding Hill Road
Mechanicsburg, PA 17055

DEMONSTRATION PROJECT
Family Conference Survey

☐ First Conference
☐ Follow-up

Family Conference Date
☐☐ / ☐☐ / ☐☐☐☐
M M / D D / Y Y Y Y

Form ID
☐☐ ☐☐☐☐ ☐☐☐☐☐
County Code   Year   Conference ID #

Child's MCI #
☐☐☐☐☐☐☐☐☐☐☐☐

Family Identification Number
☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

We would like to know what you observed about the family group conference and how you feel about the conference. Please put an "X" in the box that best represents your response for each question. If you don't know, choose "Don't Know". If it doesn't apply, choose N/A (not applicable).

	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	N/A
1. Each paid professional was clear about their role in the conference.	☐	☐	☐	☐	☐	☐
2. The facilitator was fair.	☐	☐	☐	☐	☐	☐
3. The facilitator discussed the purpose for the conference.	☐	☐	☐	☐	☐	☐
4. More family than paid professionals participated in the conference.	☐	☐	☐	☐	☐	☐
5. Different sides of the family participated in the conference (ex: Father & Mother sides of the family).	☐	☐	☐	☐	☐	☐
6. Some of the people at the conference were relatives and/or people who feel "like family" (ex: old friends, good neighbors).	☐	☐	☐	☐	☐	☐
7. The family was prepared for the conference (ex: received enough information on what happens at a conference).	☐	☐	☐	☐	☐	☐
8. The paid professionals were prepared for the conference (ex: received enough information on what happens at a conference).	☐	☐	☐	☐	☐	☐
9. The conference was a safe place to discuss feelings and opinions.	☐	☐	☐	☐	☐	☐
10. Paid professionals shared their knowledge but they did not tell the family how to solve the concerns.	☐	☐	☐	☐	☐	☐
11 The family had private time.	☐	☐	☐	☐	☐	☐
12. The plan included ways that the family will help out.	☐	☐	☐	☐	☐	☐
13. The plan included what to do if the plan is not working.	☐	☐	☐	☐	☐	☐
14. The plan included how to get the group back together if needed.	☐	☐	☐	☐	☐	☐

Do you have any other thoughts or comments about the conference? Please share them with us by writing them here.

─── Please do NOT write below this line ───

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DEMONSTRATION PROJECT
Family Conference Survey

What is your relationship to the child/children in the family? You can put yourself down as **whatever feels most comfortable** to you but we ask that you only CHECK ONE.

☐ I am a Child/Youth/Individual & focus of the meeting	☐ CYS Supervisor
☐ Mother of the family	☐ Foster family of the children
☐ Father of the family	☐ Clergy (pastor, rabbi, priest, minister)
☐ Stepfather of the family	☐ CYS worker
☐ Stepmother of the family	☐ Legal (GAL, judge, lawyer advocate)
☐ Sibling	☐ Juvenile probation or adult probation
☐ Mother's family: aunt/uncle or cousins	☐ Provider of therapeutic services (residential, wraparound, foster care, etc)
☐ Mother's family: grandparent of children	☐ Mental health or drug & alcohol professional
☐ Mother's significant other	☐ School professional (teacher, guidance counselor, school librarian)
☐ Father's family: aunt/uncle or cousins	☐ Community support resource (housing, food bank, TANF, energy assistance)
☐ Father's family: grandparent of children	☐ Domestic violence professional / specialist
☐ Father's significant other	☐ Housing shelter professional
☐ Family friends, neighbors	☐ Early Intervention / Early Head Start / Head Start professional
☐ Godmother / Godfather	☐ Legal Guardian of child / youth who is focus of the meeting

☐ Other

if you chose "Other", please write in your relationship

We would like to be able to learn about who attends the family conference and that is why we ask you to describe yourself. However, you can choose to skip these questions.

Age Range: Please choose one

☐ 6-12   ☐ 22-30   ☐ 51-60
☐ 13-17   ☐ 31-40   ☐ 61-70
☐ 18-21   ☐ 41-50   ☐ Over 70

Race
☐ Black/African American
☐ White/Caucasian
☐ Asian/Pacific Islander
☐ Native American/Alaskan/Hawaiian
☐ Multiracial
☐ Other

Gender
☐ Male
☐ Female
☐ Transgender

Ethnicity
Are you of Hispanic, Latino or Spanish origin?
☐ Yes
☐ No

— Please do NOT write below this line —

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PROYECTO DEMOSTRATIVO
Encuesta sobre la Conferencia Familiar

☐ Primer conferencia
☐ Seguimiento

Fecha de la Conferencia

☐☐ / ☐☐ / ☐☐☐☐
M M   D D   Y Y Y Y

Formulario

☐☐ ☐☐☐☐ ☐☐☐☐☐
Código del   Año   de identificación de
condado   la Conferencia

 # MCI del niño/a

☐☐☐☐☐☐☐☐☐☐☐☐

 # de identificación de la familia

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Queremos saber sus sentimientos y observaciones en cuanto a la Conferencia. Favor de marcar con 'X' la respuesta más apropiada para cada pregunta. Si usted no lo sabe, favor de marcar 'No lo sé'. Si no se aplica, favor de marcar 'N/A'.

	Totalmente en desacuerdo	En desacuerdo	De acuerdo	Totalmente de acuerdo	No lo se	N/A
1. Todos los profesionales que participaron en la Conferencia entendieron sus responsabilidades.	☐	☐	☐	☐	☐	☐
2. El facilitador de la Conferencia era justo.	☐	☐	☐	☐	☐	☐
3. El facilitador explicó el propósito de la Conferencia.	☐	☐	☐	☐	☐	☐
4. La mayoría de los participantes en la Conferencia eran los parientes y no los profesionales.	☐	☐	☐	☐	☐	☐
5. Parientes del padre así como parientes de la madre participaron en la Conferencia.	☐	☐	☐	☐	☐	☐
6. Algunas personas que participaron en la Conferencia eran parientes o personas que se consideran formar parte de la familia.	☐	☐	☐	☐	☐	☐
7. La familia estaba preparada para la Conferencia (recibió informaciónes sobre lo que sucede en una Conferencia).	☐	☐	☐	☐	☐	☐
8. Los profesionales pagados estaban preparados para la Conferencia (tenían las informaciónes sobre lo que sucede en una Conferencia).	☐	☐	☐	☐	☐	☐
9. La Conferencia era un lugar seguro para compartir opiniones y sentimientos.	☐	☐	☐	☐	☐	☐
10. Los profesionales pagados compartieron sus conocimientos, pero no le dijeron a la familia cómo resolver los problemas.	☐	☐	☐	☐	☐	☐
11 La familia tuvo tiempo privado.	☐	☐	☐	☐	☐	☐
12. El plan contenía maneras en que participe el grupo familiar para ayudar.	☐	☐	☐	☐	☐	☐
13. El plan contenía medidas para tomar si no estaba funcionando.	☐	☐	☐	☐	☐	☐
14. El plan contenía medidas para tomar si fuera necesario reunir al grupo familiar.	☐	☐	☐	☐	☐	☐

¿Tiene otras ideas o comentarios acerca de la Conferencia? Por favor compártalos.

————— Favor de no escribir debajo de esta línea —————

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¿Cuál es su relación principal con los niños de la familia?
Favor de seleccionar una sola relación.

- ☐ Soy un niño (a) / joven / persona y el foco de la reunion
- ☐ Madre de la familia
- ☐ Padre de la familia
- ☐ Padrastro de la familia
- ☐ Madrastra de la familia
- ☐ Hermano (a)
- ☐ Familia maternal: tia / tio o primos
- ☐ Familia maternal: abuelos de los niños
- ☐ Novio (a) Amigo (a) cercano(a) de la madre
- ☐ Familia paternal: tia / tio o primos
- ☐ Familia paternal: abuelos de los niños
- ☐ Novia(o) Amiga(o) cercana(o) del padre
- ☐ Amigos de la familia, vecinos
- ☐ Madrina / Padrino
- ☐ Otro _____

- ☐ Supervisor del Trabajado del Caso
- ☐ Padre/Madre de crianza temporal de los niños
- ☐ Clero (pastor, rabino, sacerdote, ministro)
- ☐ Trabajador del Caso
- ☐ Legal (guardian, juez, abogado, consejero legal)
- ☐ Oficial de Probatoria (juvenile o de adulto)
- ☐ Proveedor de servicios terapéuticos (cuidado residencial, panorámico, acogida, etc.)
- ☐ Profesional de salud mental, drogas o alcohol
- ☐ Profesional escolar (maestro, consejero, coordinador de asuntos escolares)
- ☐ Recursos de apoyo de comunidad (vivenda, banco de alimentos, assistencia de energia)
- ☐ Especialista en violencia domestica
- ☐ Profesional en asuntos de vivienda
- ☐ Profesional en desarrollo infantile (Early Intervención Head Start)
- ☐ Guardian legal del niño / joven que es el foco de la reunion

Nos gustaría saber quién asiste a la Conferencia. Por eso le pedimos que describe a usted mismo. Sin embargo, puede elegir no responder a estas preguntas.

Rango de edad
Por favor, elija una
- ☐ 6-12
- ☐ 13-17
- ☐ 18-21
- ☐ 22-30
- ☐ 31-40
- ☐ 41-50
- ☐ 51-60
- ☐ 61-70
- ☐ Over 70

Raza
- ☐ Negro/Afro Americano
- ☐ Blanco Americano
- ☐ Asiático / Isla Pacifica
- ☐ Nativo Americano/Alaska/Hawaiana
- ☐ Multiracial
- ☐ Otra

Genero / Sexo
- ☐ Hombre
- ☐ Mujer
- ☐ Transgénero/a

Etnicidad
¿Es usted de origen Hispano, Latino o Español?
- ☐ Si
- ☐ No

Favor de no escribir debajo de esta línea

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Baseline Conference Form: Instructions

This form is filled out shortly after the initial conference by the facilitator, caseworker or another professional. That may mean that a caseworker fills out the top section and the facilitator the lower section. Ideally, the person or persons who have the information should fill it out. You may need to go to the case file or speak with the caseworker or supervisor in order to complete this form.

Please refer to page 5 of the User's Guide for how to proceed if more than one child is referred within the family as well as for other procedures.

*ALL FORMS SHOULD BE PRINTED FROM THE PDF ON THE WEBSITE AT:
http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm

Identifying Information
County Name: Enter the county name here.

County Code: Each county's code is listed below. Please insert the appropriate code in this box.
Allegheny=2
Crawford= 20
Dauphin=22
Lackawanna=35
Philadelphia=51
Venango=61

Year is 4 digits (e.g., 2013)

Conference ID: Some counties assign a unique number to the conference. If your county does this, then put the number here. If not, leave blank.

Family Conference Date: Date that the conference was held. It is MM/DD/YYYY (e.g., 05/15/2013).

Referral Date: Date that the child/children/family were referred for a family conference. It is MM/DD/YYYY (e.g. 04/20/2013).

MCI (Master Client Index): The MCI is the number assigned to the child <u>by the state</u> that uniquely identifies the child. Every child involved in Children and Youth services is assigned a state MCI number. If you are working as a contractor for the agency, please contact the agency to obtain this number.

Number of people <u>invited to</u> and <u>attending</u> the conference: These numbers INCLUDE the parent, children, family, friends and professionals. It does NOT include the facilitator.

Primary Referring Agency: The agency that referred the child or family. There may be more than one agency, <u>pick the primary one</u>. JPO is juvenile probation, private provider is any nonprofit agency that provides services, MH, ID, EI refers to mental health, intellectual disabilities and early intervention which are typically divisions within a human service system in a county. Court refers to judges or the juvenile or family court division. Family centers are centers in the community which serve families. Self-referrals occur when the referral is made by the family. Community partner is a broad category including churches, self-help groups, and shelters for example. School professionals include school counselors, teachers, principals.

Open with which agencies: Please indicate with which agency or agencies the case is open at the time of the conference. If the case is still under investigation and has not been opened for services, then please select "No open case with CYS or JPO".

1. **Participants in the conference**: <u>Check all that apply.</u> If someone attends who does not fit one of the categories, please check "other" and describe this person's position or relationship to the child/family. If someone is both a foster parent and a relative, check relative.

2. **Primary purpose**: <u>Check only one.</u> There may be multiple reasons, but pick the reason that best describes the intended purpose of the conference. For example, the referral to CYS may have been made due to housing and environmental issues, or due to the parent's mental illness, or because the child is having behavioral problems in the foster home, but the <u>reason</u> for holding a conference is to prevent a placement out of home. <u>When thinking of this, think of what the conference is trying to avoid or divert from rather than the reason that the child came into care.</u> If there are other reasons that you would like to note, you can use the text box to provide that information. However, please use the text box as the exception.

3. **Services and Supports: <u>Check all that apply.</u>** Throughout the Family Plan process, which services and supports were identified for the child and family as resources that can be utilized. If services were recommended, but not included in the plan, they should NOT be checked.

4. **During the time while preparing for the conference, select the response that best describes where the child was living MOST of the time:** <u>Please check only one.</u> Remember that only one child is the focus of the baseline form (see page 5 on how to select identified child). For example, Jane lived with her grandmother immediately after removal from the home for 3 days, and then she was moved to an aunt's home and has remained there for 3 weeks prior to the conference. In this case, you would check "relative's home". Another example is that Joe went immediately to emergency shelter for 36 hours, and then was moved to a group home where he has remained for 2 weeks. In this case, you would select "group home".

4a. **The same rules apply to living arrangement after the conference**. **<u>Please check only one</u>**. While you can't predict what will happen in the future, describe the living arrangements that are planned as a result of the conference. So in the case of Jane, as a result of the meeting, it was determined that she would remain at her aunt's home, so you would select "relative's home". In the case of Joe, as a result of the conference, Joe went into Supervised Independent Living, and so you would select that option. It is possible that the living arrangements may change, but the living arrangement you should select is the living arrangement that was planned as a result of the conference.

5. **Did the conference prevent the child moving to a formal, non-kin, paid out of home placement?** A formal, non-kin, paid out of home placement is any placement in which the care, nurturance and the provision of services (behavioral health, treatment) are provided by PAID individuals who are either supervising the youth or the adults caring for a younger child. This <u>excludes</u> the following placements: parent's home, relative's home; adoptive home; living independently, homeless, military.

Note: If the purpose of the conference was NOT around placement issues (e.g., the goal was resolving family conflict or addressing truancy issues and there was no plan for out-of-home placement), then the response should be N/A.

6. **Did the conference allow the child to return/remain home with their parents OR a relative?** There may be cases where the child goes to a relative for a very short time and then home, and in this case, the answer would be "yes." There are also some other arrangements that result from a conference. For example, as a result of a conference, an arrangement could be made in which the children stay with their parents until nightfall and then go to the home of a relative to sleep. In this case, the answer would be "yes."

Note: If the purpose of the conference was NOT around placement issues (e.g., the goal was resolving family conflict or addressing truancy issues and there was no plan for out-of-home placement), then the response should be N/A.

7. Service pathway point: <u>Only check one</u>. The intent of this question is to identify the point in the CYS pathway. For the most part, the family will be at the assessment or intake phase, open for services with the children in the home or opened for services with the children out of the home. In Dauphin, where there are JPO and shared cases, it may be JPO supervision. Also, it is possible that a meeting is held to get youth out of foster care who are stuck in care but family is no longer active. In that case "aftercare" would be checked, although that is not quite accurate. We may need to revise this item when permanency conferences are being implemented.

8. Child demographic information

Race: Do NOT assume that biracial children identify as either black or white. Ask the parents (or the youth) what they consider their child's or youth's race to be. If they say "mixed," check multiracial. If they say "biracial" check multiracial.

Ethnicity: <u>Check only one.</u> The same rule applies. Ask the parents, or child or youth whether they consider themselves to be Hispanic or Latino.

Gender: <u>Check only one</u>. In the case of transgendered youth, check with the youth and select the gender with which the youth identifies.

Child's Age (in years): Please write age of child (round up at the six month mark; e.g. if a child is 6 months, round up to 1 year, if less than 5 months, round to 0 and if 11 years, 6 months, please write 12).

9. Current court/legal involvement for the child or youth: This question is categorizing the legal status of the child as allegedly dependent or delinquent, determined to be dependent or delinquent, or both dependent and delinquent. In cases where the conference is being held as a diversion or when there is no agency involvement, there will be no court status or none at this time. In these cases, select "None."

10. Reports of abuse/neglect: These questions are about the child's history of abuse and neglect. The first question is if there has been a substantiated/founded/indicated (counties use different terms) report of child abuse or neglect. The report could be at any time in their life for cases where there has been more than one substantiated incident. If there has ever been a substantiated/founded/indicated report, select the type of abuse that occurred in the most recent report. For example, there was a substantiated report of neglect in 2010 and then another substantiated report of physical abuse in 2012. You would check "yes" and then for abuse type, you would identify "physical." For some counties a report may be more than one abuse type (e.g., physical abuse and imminent sexual risk). In this case you would select both types.

DEMONSTRATION PROJECT

Baseline Family Engagement Conference Form
This is to be completed at or immediately after the FIRST conference.

Family Conference Date
☐☐ / ☐☐ / 2 0 ☐☐

Referral Date
☐☐ / ☐☐ / 2 0 ☐☐

Number of people invited ☐☐

Number of people attended ☐☐

County Code ☐☐   Year ☐☐☐☐   Conference Number ☐☐☐☐☐

Child's MCI# ☐☐☐☐☐☐☐☐

Length of Conference ☐☐ ☐☐
Hours   Minutes

Is there shared case responsibility? ☐ Yes   ☐ No

PRIMARY referring agency: Select only ONE

☐ CYS   ☐ Private Provider   ☐ Family Center   ☐ MH/MR/EI   ☐ School Professional (teacher, counselor, etc...)
☐ JPO   ☐ Self Referral   ☐ Court   ☐ Community Partner

At the time of the conference, the case was open with which agencies?

☐ CYS   ☐ JPO   ☐ Both CYS & JPO   ☐ No open case with CYS or JPO

1. Participants in Conference - check all that apply

☐ Child/Youth/Individual & focus of meeting
☐ Mother of the family
☐ Father of the family
☐ Stepfather of the family
☐ Stepmother of the family
☐ Siblings
☐ Mother's family: aunt/uncle or cousins
☐ Mother's family: grandparent
☐ Mother's significant other
☐ Father's family: aunt/uncle or cousins
☐ Father's family: grandparents
☐ Father's significant other

☐ Family friends, neighbors
☐ Godmother/Godfather
☐ CYS Supervisor
☐ Foster family of child/youth/children
☐ Clergy
☐ CYS Caseworker
☐ Provider of therapeutic services (residential, foster care, wraparound)
☐ Early intervention/Early Head Start/Head Start professional
☐ School professional (teacher, guidance counselor, etc)
☐ Legal (GAL, judge, advocate, lawyer)
☐ Legal guardian
☐ Other: Please Specify

☐ Community support resource
☐ Juvenile probation or adult probation
☐ Housing shelter professional
☐ Mental health or drug & alcohol professional
☐ Domestic violence professional/specialist

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2. Primary purpose why family was referred for a Family conference at this time (please check only ONE)

☐ Develop/Revise FSP/Family conference plan
☐ Develop/Revise treatment plan
☐ Change in placement setting
☐ Placement prevention
☐ Truancy
☐ Lack of supervision
☐ Transportation issues

☐ Prevent futher delinquent behavior
☐ Address child/family parent conflict
☐ Identify supports for caregivers
☐ Develop/revise Child Permanency plan
☐ Transitional conference (aging out/IL)
☐ Housing & environmental issues
☐ Address concerns regarding child's medical/ mental health/ drug & alcohol issues

☐ Develop plan to keep child in a safe & stable home
☐ Address child/youth's behavioral issues
☐ Communication issues
☐ Plan and assist in reunification
☐ Prevent disruption of current placement outside of home
☐ Address concerns regarding parent's medical/mental/ drug & alcohol issues

3. What Services & Supports were Included in the Family Plan? (check all that apply)

☐ Parent substance abuse services
☐ Parent mental health services
☐ Child substance abuse services
☐ Child mental health services
☐ Family support
☐ Family housing support
☐ Family food support
☐ Family energy assistance
☐ Family debt assistance
☐ Cash assistance
☐ Kinship support
☐ Child Intellectual Disability services

☐ Juvenile Probation
☐ Adult Probation
☐ Early Intervention
☐ Literacy services
☐ Family Finding
☐ Family therapy
☐ Foster Care
☐ Kinship Care
☐ Respite
☐ Parent Intellectual Disability services

☐ Residential treatment facility
☐ Recreational services
☐ After-school services
☐ Transporation services
☐ Employment/pre-employment
☐ Family income support assistance
☐ Education assistance (ie GED prep)
☐ Therapeutic group home services
☐ Independent living services or aftercare
☐ Domestic violence treatment/prevention
☐ Faith based support

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4. During the period of time while preparing for the conference, the child was living MOST of the time:

- ☐ Independently (older youth-16 & older)
- ☐ Parent's home (older youth - 16 & older)
- ☐ Parent's home (youth 15 & younger)
- ☐ School dorm
- ☐ Supervised independent living setting
- ☐ Relative's home
- ☐ Adoptive home
- ☐ Job Corp
- ☐ Specialized foster care
- ☐ Foster care
- ☐ Therapeutic foster care

- ☐ Group home
- ☐ Shelter
- ☐ State psychiatric hospital
- ☐ Residential treatment facility
- ☐ Youth correctional facility (YDC)
- ☐ Juvenile detention facility
- ☐ Intensive treatment or an inpatient psychiatric unit
- ☐ Homeless
- ☐ Jail
- ☐ Wilderness camp

4a. After the conference, select the response that best describes where will the child be living MOST of the time?

- ☐ Independently (older youth-16 & older)
- ☐ Parent's home (older youth - 16 & older)
- ☐ Parent's home (youth 15 & younger)
- ☐ School dorm
- ☐ Supervised independent living setting
- ☐ Relative's home
- ☐ Adoptive home
- ☐ Job Corp
- ☐ Specialized foster care
- ☐ Foster care
- ☐ Therapeutic foster care
- ☐ Placement Pending

- ☐ Group home
- ☐ Shelter
- ☐ State psychiatric hospital
- ☐ Residential treatment facility
- ☐ Youth correctional facility (YDC)
- ☐ Juvenile detention facility
- ☐ Intensive treatment or an inpatient psychiatric unit
- ☐ Homeless
- ☐ Jail
- ☐ Wilderness camp

5. Did the family conference prevent moving the child to a formal, non-kin, paid out-of-home placement? ☐ Yes   ☐ No   ☐ N/A

6. Did the family conference allow the child to RETURN or REMAIN home with their parents or relative? ☐ Yes   ☐ No   ☐ N/A

7. At what point in the service pathway is the family and/or youth? Select ONE.

☐ No agency involvement   ☐ JPO Supervision   ☐ Assessment / Investigation / Intake/ Aftercare   ☐ Family opened for services and child/youth is IN out-of-home placement   ☐ Family opened for services and family IS receiving in-home services

8. Child's Demographic Information

Race
- ☐ White/Caucasian
- ☐ Multiracial
- ☐ Black/African American
- ☐ Other
- ☐ Asian/Pacific Islander
- ☐ Native American/Alaskan/Hawaiian

Ethnicity
- ☐ Hispanic
- ☐ Not Hispanic or Latino

Gender
- ☐ Male   ☐ Female   ☐ Transgender   Child's Age (in years) ☐☐

9. Court / Legal Involvement (for child/youth)
- ☐ Alleged Dependent
- ☐ Alleged Delinquent
- ☐ Dependent
- ☐ None
- ☐ Delinquent
- ☐ Both (Dependent & Delinquent)

10. Have there been substantiated/founded/indicated reports of child abuse/neglect for this child/youth? ☐ Yes   ☐ No

If YES, select the most recent abuse type:
- ☐ Physical Abuse
- ☐ Neglect
- ☐ Student Abuse
- ☐ Serious Physical Neglect
- ☐ Mental/Emotional
- ☐ Sexual Abuse
- ☐ Imminent Risk: Physical
- ☐ Imminent Risk: Sexual

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Follow-up Conference Form: Instructions
Complete this form at all follow-up conferences and at case closure.

*ALL FORMS SHOULD BE PRINTED FROM THE PDF ON THE WEBSITE AT:
http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm

County Code: Each county's code is listed below. Please insert the appropriate code in this box.
Allegheny=2
Crawford= 20
Dauphin=22
Lackawanna=35
Philadelphia=51
Venango=61

Year is 4 digits (e.g., 2013)

Conference ID: Some counties assign a unique number to the conference. If your county does this, then put the number here. If not, leave blank.

MCI (Master Client Index): The MCI is the number assigned to the child <u>by the state</u> that uniquely identifies the child. Every child involved in Children and Youth services is assigned a state MCI number. If you are working as a contractor for the agency, please contact the agency to obtain this number.

County Name: Enter the name of county here.

Follow-Up Conference Date: Date that the conference was held. It is MM/DD/YYYY (e.g. 05/15/2013).

Family ID: Some counties also assign a number to families. If there is a number, include it here. You may find it on a record. However, it is the MCI number that is critical, so if you cannot find a Family ID, or none is assigned, leave it blank.

Initial family conference date: Date that the <u>first conference was held</u> (the conference that was referenced when completing the Baseline Form). This is considered the initial conference and although other conferences may have been held in the interim, this is considered to be the first conference (see page 5).
The two questions "At the time of the initial conference, the case was open with which agencies" and "At the time of follow-up the case was open with which agencies?" are to be filled out by **DAUPHIN COUNTY ONLY.**

1. Is the CYS case closed? If the case has been closed, choose the reasons in item 1a for closing the case. If you do not find the reason, check '"other," and describe the reason in the space provided.

IF THE CASE IS CLOSED BY CYF/CYS, YOU ARE DONE WITH THIS FORM. (<u>DAUPHIN COUNTY</u>— the case could still be open with JPO; but if CYF closes the case, it is considered closed and you are done with this form as well.)

IF THE CASE IS OPEN, PLEASE ANSWER THE REST OF THE QUESTIONS.

Service History:

2-2a. Reports of abuse/neglect: These questions are about the child's history of abuse and neglect <u>since the most recent conference</u>. The first question is if there has been a substantiated/founded/indicated (counties use different terms) report of child abuse or neglect since the most recent conference. This is a YES/NO. For the purposes of the next question (if yes, type of report), pick the most recent substantiated incident of child abuse and neglect. For some counties a report may be more than one abuse type (e.g., physical abuse and imminent sexual risk). In this case you would select both types.

2b. Delinquent offenses: Have there been adjudicated reports of delinquent offenses <u>since the most recent conference</u>? If yes, describe the crime type in 2c.

3. Of the services identified in the most recent conference, which services were involved with the family? This question is trying to get at which services and supports that the family conference identified were involved with the family. <u>You can check more than one</u>. If the family accessed additional services that weren't on the most recent plan, please also include those here. Please use the "other" selection as a last resort. A common mistake is to put the name of the provider in "other." Please think of this as "type" of service NOT "name of provider."

4-4a. If a placement option was identified at the time of the most recent conference, is the child/youth still living in the planned placement? This question is trying to identify whether the youth has moved out of the placement type identified in the Baseline Form as the planned living arrangement, after the family conference. If they have moved, check "No" for number 4, and in 4a, check the box for the type of environment that they are currently living most of the time.

DEMONSTRATION PROJECT
Family Engagement Conference Follow-Up Form

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | / | | | / | 2 | 0 | | |

County Code | Year | Conference ID | Child's MCI# | Initial Family Conference Date

Follow-Up Date | | / | | / | 2 | 0 | | | **Family Identification Number** | | | | | | | | | | | | | | | | | |

DAUPHIN COUNTY ONLY

At the time of the initial conference, the case was open with which agencies? ☐ CYS ☐ JPO ☐ Both CYS & JPO ☐ No open case

At the time of the follow-up, the case was open with which agencies? ☐ CYS ☐ JPO ☐ Both CYS & JPO ☐ No open case

---

1. Is the CYS case closed? (if yes, please choose from the options below) ☐ Yes ☐ No

   1a. Select PRIMARY reason for case closure (choose only ONE response)

☐ Family Moved   ☐ Aging Out of System   ☐ Goal Achievement   ☐ Court Closed for Other Reason   ☐ Other _____

If case is closed==> DO NOT complete the following section.

---

2. Since the most recent conference, have there been substantiated/founded or indicated reports of child abuse/neglect for this child/youth? Yes ☐ No ☐

   2a. If YES, select one: ☐ Physical Abuse   ☐ Mental/Emotional ☐ Serious Physical Neglect ☐ Imminent risk: Physical

                            ☐ Student Abuse   ☐ Neglect   ☐ Sexual Abuse   ☐ Imminent risk: Sexual

2b. Have there been adjudicated reports of delinquent offenses for this child/youth? Yes ☐ No ☐

   2c. If YES, crime type: ☐ Misdemeanor   ☐ Felony ☐ Other

3. Of the services identified in the most recent conference, which services were involved with the family? (check ALL that apply)

☐ Parent substance abuse services	☐ Juvenile Probation	☐ Residential treatment facility
☐ Parent mental health services	☐ Adult Probation	☐ Recreational services
☐ Child substance abuse services	☐ Early Intervention	☐ After-school services
☐ Child mental health services	☐ Literacy services	☐ Transporation services
☐ Family support	☐ Family Finding	☐ Employment/pre-employment
☐ Family housing support	☐ Family therapy	☐ Family income support assistance
☐ Family food support	☐ Foster Care	☐ Education assistance (ie GED prep)
☐ Family energy assistance	☐ Kinship Care	☐ Therapeutic group home services
☐ Family debt assistance	☐ Respite	☐ Independent living services or aftercare
☐ Cash assistance	☐ Faith based support	☐ Domestic violence treatment/prevention
☐ Kinship support		☐ Other
☐ Child Intellectual Disability services		
☐ Parent Intellectual Disability services		

4. If a placement option was identified at the time of the most recent conference, is the child/youth still living in the planned placement? ☐ Yes ☐ No ☐ N/A

      4a. If NO, then check the environment that best describes where the child is now living most of the time.

☐ Independently (Older Youth 16 & older)	☐ Job Corp	☐ Residential treatment facility
☐ Parent's home (Older Youth 16 & older)	☐ Specialized foster care	☐ Youth correction facility (YDC)
☐ Parent's home (youth 15 & younger)	☐ Foster care	☐ Juvenile detention facility
☐ School dorm	☐ Therapeutic foster care	☐ Intensive treatment or inpatient psychaitric unit
☐ Supervised independent living setting	☐ Group home	☐ Homeless
☐ Relative's home	☐ Shelter	☐ Jail
☐ Adoptive home	☐ State psychiatric hospital	☐ Wilderness camp

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Contact Information

Please direct any questions or concerns to Alexis Pigott at the Child Welfare Resource Center: Alexis Pigott, Evaluation Specialist: alp159@pitt.edu; 717-605-0235

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Child Welfare Demonstration Project web site:

http://www.pacwrc.pitt.edu/ChildWelfareDemoProject.htm