Pennsylvania's
Family Group Decision Making
Statewide Evaluation
User's Guide

Introduction

This User's Guide is a compilation of materials and guidance to support Pennsylvania's Family Group Decision Making (FGDM) Statewide Evaluation. Specifically, the User's Guide provides guidance to county and agency partners along with their private provider partners on their use of three evaluation forms (the Family Group Conference Survey, the Baseline Form and the Outcome Form).

The User's Guide is organized in several sections: an Overview of information common to all three forms, form-specific sections, and a glossary. It is our hope that the User's Guide can serve as a helpful and easy-to-use resource that will allow us to learn more about the FGDM experience and provide insight on furthering the practice.

If you have any questions or comments about the User's Guide, please contact: engagePA@pitt.edu

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Evaluation Forms Overview

This User's Guide provides guidance for each of the Family Group Decision Making Statewide Evaluation Forms including the Family Group Conference Survey, Family Group Conference Baseline and the Family Group Conference Outcome forms. The Overview section provides guidelines regarding processes and items that are common to all forms. The forms are available online as downloadable PDFs at http://www.pacwrc.pitt.edu/FGDM_EvaluationPage.htm.

The evaluation examines how Family Group Decision Making conferences impact children. When completing the Forms, focus on just one child/youth referred to as the **identified or focus child/youth**, even if there are multiple children/youth participating in the conference. While some conferences may focus their strategies on supporting the parents, because the overall conference goal is to improve the child's life, the evaluation collects child-specific information.

Selecting the Identified or Focus Child/Youth:
- When there is only one child/youth in the family, that child/youth is the identified or focus child/youth and their information should be on the forms.
- If there is more than one child/youth in the family, and a specific child/youth is clearly the focus of the meeting, then that is the identified or focus child/youth.
- When a conference occurs for all of the children within a family, please select the child with closest birthdate (month, day) to the conference date (month/day). **EXAMPLE:** If today's date is March 21st and you receive a referral for an entire family, check the birthdates for each child. If the children's birthdates are March 3rd (3/3) and September 9th (9/9), you would select the child with the March 3 (3/3) DOB to be the identified or focus child/youth for the purposes of completing the evaluation forms.

The figure below outlines which Forms are completed, at what points and by whom.
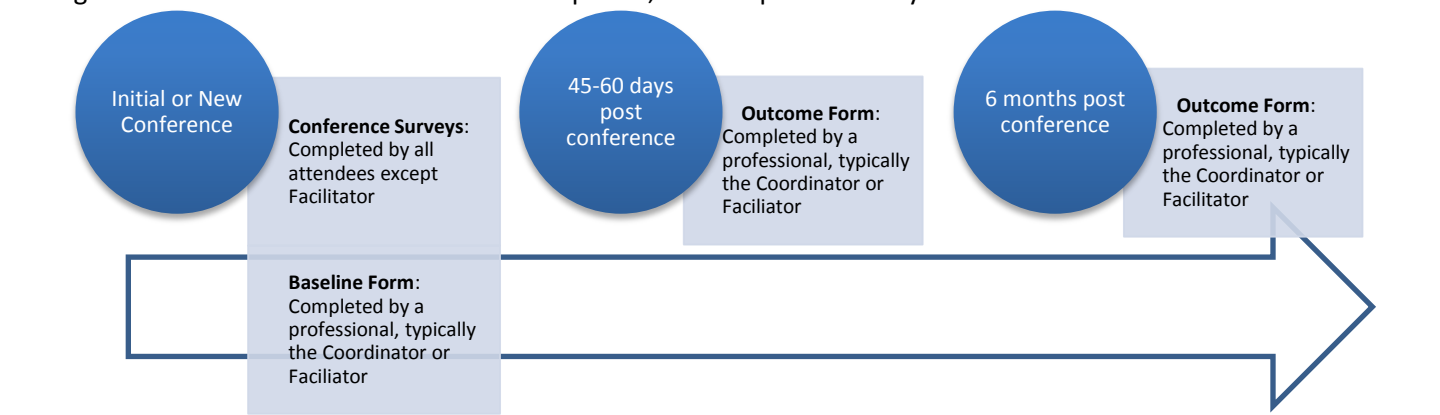
The forms first come into play when a family comes together for an initial or new conference.
- If this is the first time a family is having a conference, then this is a new conference.
- If a family is returning to hold a conference concerning a new issue (unrelated to the earlier conference) or a different child is the focus, then this is considered a new conference and you would begin a new set of forms while continuing to complete Outcome Forms for the *original* conference.

Forms completed at the initial or new conference include the Baseline Form and the Family Group Conference Survey.
- Baseline Form – Complete at or immediately after a new or initial conference. The Facilitator or Caseworker typically completes this Form. Several people may contribute information to this Form, but we prefer that only one person fill in the Form. However, each county's process varies so verify your county's procedures before beginning.
- Family Group Conference Survey – Immediately after the conference, ask the family and professionals to complete the Survey. The Facilitator does NOT complete a Survey.

Please note that for the purposes of the evaluation, Follow-up Conferences are meetings where a family comes together to monitor their plan. **Evaluation Forms are NOT completed for Follow-Up Conferences**.

When completing the top portion of the forms, fill-in the date, the county code, year and conference ID. This information allows us to link all of the Surveys together and without it, we may be unable to include the forms in the evaluation.

- County Code is the numeric identifier for the county determined by listing the counties alphabetically and numbering them 1-67. If you need to check a county code, please review the listing found in the glossary.
- The Year is the four-digit calendar year not the fiscal year or other year format.
- The same Conference ID number should be used on all of the Forms related to the same initial or new conference. Counties use a variety of processes to establish the Conference IDs. Please check with your county if you are unsure how to complete this information. Take care to avoid using the same Conference ID number twice in a State Fiscal Year (July 1-June 30), or it will result in the undercounting of the conferences.

When determining the date of the conference, if it is a reconvened conference (conference occurred on more than one day), than please use the date of the conference in which the family plan was fully developed and finalized. This typically would be the second day and when private family time is occurring.

If at any time you are unsure about a requested piece of information on any of the forms, ask the referring or case-carrying worker.

Printing and Returning the Forms

- You can print the forms using any printer, but please print the forms "duplexed" and on white paper.
- Please avoid mass photocopying of the forms, as the copies can become distorted and will be unusable and unable to be included in the evaluation.
- All forms should be completed using pencil or blue/black ballpoint pen.
- On the bottom right-hand corner of each form there is a printed bar code (see the bottom of p.3 for an example). Do not color or write in this box or the form will be unusable.
- Please send forms from multiple conferences in the same envelope using a paper clip to attach the forms from a given conference together. Please DO NOT staple forms.

Please email engagePA@pitt.edu with any questions.

Please mail all the forms to the CWRC monthly so that we can process the forms and report the most up-to-date information from your county.

Mailing Address:
PA Child Welfare Resource Center
Attn: Statewide FGDM Evaluation
403 East Winding Hill Road
Mechanicsburg, PA 17055

Family Group Conference Survey

Family Group Conference Date	County Code	Year	Conference ID
☐☐ / ☐☐ / 2 0 ☐☐	☐☐	☐☐☐☐	☐☐☐☐
M M D D Y Y Y Y			

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 to each item. If you don't know, choose "Don't Know." If an item doesn't apply to the conference, choose N/A (not applicable).

|	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know	N/A
1. Each paid professional was clear about their role (e.g., child protection, counseling).	☐	☐	☐	☐	☐	☐
2. The FGDM facilitator was respectful of the family group.	☐	☐	☐	☐	☐	☐
3. The FGDM facilitator/coordinator did not have other jobs to do with the family besides organizing and/or facilitating the group.	☐	☐	☐	☐	☐	☐
4. The family group understood the reasons for holding the conference.	☐	☐	☐	☐	☐	☐
5. The conference was held **in a place** that felt right to the family group.	☐	☐	☐	☐	☐	☐
6. The conference was held **in a way** that felt right to the family group (e.g., the right food, right time of day).	☐	☐	☐	☐	☐	☐
7. More family group than paid professionals participated in the conference.	☐	☐	☐	☐	☐	☐
8. Different sides of the family participated in the conference (e.g., Father & Mother sides of the family).	☐	☐	☐	☐	☐	☐
9. People at the conference were relatives and/or people who feel "like family" (e.g., old friends, good neighbors).	☐	☐	☐	☐	☐	☐
10. The **family group** was prepared for the conference (e.g., got enough information on what happens at a conference).	☐	☐	☐	☐	☐	☐
11. The **paid professionals** were prepared for the conference (e.g., got enough information on what happens at a conference).	☐	☐	☐	☐	☐	☐
12. The conference had enough supports and protections (e.g., support persons).	☐	☐	☐	☐	☐	☐
13. Paid professionals shared their knowledge but they did not tell the family group how to solve the concerns.	☐	☐	☐	☐	☐	☐
14. The family group had private time to make their plan.	☐	☐	☐	☐	☐	☐
15. The plan included ways that the family group will help out.	☐	☐	☐	☐	☐	☐
16. The plan included ways to evaluate if the plan is working and to get the family group back together again if needed.	☐	☐	☐	☐	☐	☐
17. The plan was approved quickly.	☐	☐	☐	☐	☐	☐
18. The children will be safer as a result of this plan.	☐	☐	☐	☐	☐	☐
19. I would recommend family group to other families.	☐	☐	☐	☐	☐	☐

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

Please turn over & do NOT write below this line   pg 1

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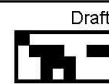
Family Group Conference Survey

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 fill in **ONE** relationship.

☐ Child/Youth (focus of meeting)	☐ CYS Supervisor
☐ Mother of the child	☐ CYS Caseworker
☐ Father of the child	☐ Clergy
☐ Stepfather of the child	☐ Legal professional
☐ Stepmother of the child	☐ Medical/Healthcare professional
☐ Sibling of the child	☐ Juvenile Probation or Adult Probation/Parole
☐ Mother's family: aunt/uncle or cousins	☐ Provider of therapeutic services
☐ Mother's family: grandparent of the child	☐ Housing professional
☐ Mother's significant other	☐ Mental Health or Intellectual & Developmental Disabilities professional
☐ Father's family: aunt/uncle or cousins	☐ Early Childhood Developmental services professional
☐ Father's family: grandparent of the child	☐ School professional
☐ Father's significant other	☐ Drug & Alcohol professional
☐ Friends, neighbors	☐ Domestic Violence professional
☐ Foster family of the child	☐ Family Preservation & Placement services provider
☐ Godparent of the child	☐ Community support resource
☐ Other *Please specify*	☐ Legal Guardian of the child

We ask you to describe yourself in order to learn about who attends Family Group Conferences. However, you can choose to skip these questions.

Age Range *Select one*
☐ 6-12 ☐ 22-30 ☐ 51-60
☐ 13-17 ☐ 31-40 ☐ 61-70
☐ 18-21 ☐ 41-50 ☐ Over 70

Gender
☐ Male
☐ Female
☐ Transgender

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

Race *please select only one*
☐ Black/African American
☐ White/Caucasian
☐ Asian/Pacific Islander
☐ Native American/Alaskan/Hawaiian
☐ Multiracial
☐ Other *please specify below*

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Family Group Conference Survey

The Family Group Conference Survey is an opportunity for participants to provide insight concerning their conference experience. For many child welfare involved families, this may be the first opportunity that they have had to provide feedback on their services. Therefore, it is important to prepare and support families throughout the Survey. All participants, except the Facilitator, should complete the Survey.

Preparing the Surveys for completion

Complete the top portion of the Family Group Conference Surveys before distributing them. The items below are required in order to process the Surveys; it helps to link the Surveys to the other forms so that we can get a better sense of families' overall experience.

- County Code is the numeric identifier for the county determined by listing the counties alphabetically and numbering them 1-67. If you need to check a county code, please review the listing found in the glossary.
- The Year is the four-digit calendar year not the fiscal year or other year format.
- The same Conference ID number should be used on all of the Forms related to the same initial or new conference. Counties use a variety of processes to establish the Conference IDs. Please check with your county if you are unsure how to complete this information. Take care to avoid using the same Conference ID number twice in a State Fiscal Year (July 1-June 30), or it will result in the undercounting of the conferences.

Facilitators should provide participants with Surveys in either English or Spanish based on the participant's needs and preferences. Youth are invited to complete the Survey as well; however, Facilitators will need to judge whether a youth is able to complete the Survey.

Guiding participants through Survey completion

Facilitators should introduce and instruct participants in how to complete the Survey. Facilitators should use their own words when discussing the Survey with participants, but should incorporate the points below into the discussion.

- Ask all participants to complete their Survey with black or blue ballpoint pens or pencils, remind them that it is two pages and NOT to fold the Surveys.
- Inform families that participation is voluntary and that the Surveys are ANONYMOUS.
- STRESS THAT PARTICPANTS ARE TO SELECT ONLY ONE RELATIONSHIP based on their connection to the identified or focus child/youth (and where applicable, the mother or father's side of the family). If a participant is unsure of their relationship, remind the participant that for the Survey's purpose it is simply how they directly relate to the child/youth. This is how they would have identified themselves during introductions.
- A Survey cannot be included in the evaluation if more than one relationship code is checked.
- If at any time a participant is unsure how to answer any Survey item, instruct them to select the option with which they are most comfortable.

If participants have difficulty selecting a relationship, please refer to the examples and solutions below.

- A participant that once provided professional services to the family, but no longer does should indicate that they are a friend. In this situation, their relationship is no longer a paid professional relationship but is now a friendship.
- A family member may also be a member of a profession on the list. Unless they are providing professional services to the child/family, they should select the familial relationship that best reflects their relationship to the identified or focus child/youth, (e.g., Uncle, Aunt, sibling).
- A friend of the identified or focus child/youth, (e.g., boyfriend, girlfriend, peer) who attends the conference should select the "friends and neighbors" relationship. This would also apply for the parents of boyfriends, girlfriends or peers.

If participants do not understand an item, try the following:
- Ask them what they think it means. Sometimes people want to have their perception validated.
- Ask them if a question or word is unclear and define the word as needed. Try to avoid interpreting the question for them, (e.g., "This question means…").
- If they cannot answer a question, instruct them to leave it blank. It is permissible to skip questions.

If participants have difficulty reading the Survey, try the following:
- Ask the participant if he or she would like you or another conference participant to read the questions aloud, but do so in a way that protects the privacy of their survey responses.
- If a participant is uncomfortable completing the Survey or having the Survey read aloud, please let them know the Survey is voluntary and they can to choose not to participate.

If participants leave the conference early
Surveys should be distributed to all participants. If a participant should need to leave a conference early, please ask that she or he fill out the Survey prior to departing. If a participant leaves the conference prior to the finalization of the FGDM plan, she or he should select "Don't Know" in response to questions in the Survey that reference the plan.

When participants have completed the Survey, instruct them to place their Surveys in a LARGE envelope to help maintain the confidentiality of their responses.

Family Group Conference Baseline

County _____

Family Group Conference Date

☐☐ / ☐☐ / 2 0 ☐☐

Referral Date

☐☐ / ☐☐ / 2 0 ☐☐

Number of people invited ☐☐ Number of people attended ☐☐

PRIMARY referring agency: Select only ONE

☐ CYS   ☐ Private Provider   ☐ Family Center   ☐ MH/IDD/EI   ☐ School Professional

☐ 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

CountyCode ☐☐☐ Year ☐☐ Conference ID ☐☐☐☐

Child's MCI # ☐☐☐☐☐☐☐☐☐

Length of Conference ☐☐ hours ☐☐ minute

Is there Shared Case Responsibility, as defined by the bulletin?   ☐ Yes   ☐ No

1. Participants in conference - check all that apply

☐ Child/Youth (focus of meeting)
☐ Mother of the child
☐ Father of the child
☐ Stepfather of the child
☐ Stepmother of the child
☐ Legal Guardian of the child
☐ Sibling of the child
☐ Mother's family: aunt/uncle or cousins
☐ Mother's family: grandparent of the child
☐ Mother's significant other
☐ Father's family: aunt/uncle or cousins
☐ Father's family: grandparent of the child
☐ Father's significant other
☐ Friends, neighbors
☐ Godparent
☐ Foster family of the child(ren)

☐ Clergy
☐ CYS Caseworker
☐ CYS Supervisor
☐ Legal Professional
☐ Juvenile Probation or Adult Probation & Parole
☐ Provider of therapeutic services
☐ Mental Health, Intellectual & Developmental Disabilities provider
☐ School professional
☐ Drug & Alcohol professional
☐ Housing professional
☐ Early Childhood Developmental services professional
☐ Community support resource
☐ Family Preservation & Placement services provider
☐ Domestic Violence professional
☐ Medical/Health care professional
☐ Other *Please Specify*

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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

☐ Develop/Revise Family Service Plan
☐ Develop/Revise Child Permanency Plan
☐ Develop/Revise treatment plan
☐ IL/Aftercare/Transitional Conference
☐ Develop plan to keep child in a safe & stable home
☐ Placement prevention
☐ Change in placement setting

☐ Prevent out-of-home placement disruption
☐ Plan and assist in reunification
☐ Identify support for caregivers
☐ Lack of supervision
☐ Communication issues
☐ Child/family/parent conflict
☐ Child's medical/mental health/drug & alcohol issues

☐ Child/youth's behavioral issues
☐ Prevent futher delinquent behavior
☐ Truancy
☐ Transportation issues
☐ Housing & environmental issues
☐ Parent's medical/mental health/drug & alcohol issues

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

Natural Supports

☐ Informal kinship care
☐ Family support
☐ Family housing support
☐ Family financial support
☐ Natural respite
☐ Faith based support
☐ Recreational services
☐ After-school services

Professional Supports

☐ Family Finding
☐ Independent Living/Aftercare
☐ Family Therapy

☐ Domestic Violence services
☐ Formal kinship care
☐ Literacy services
☐ Transportation services
☐ Foster care
☐ Group home services
☐ Residential Treatment Facility
☐ Respite
☐ Placement services
☐ Financial assistance
☐ Housing assistance
☐ Education support

☐ Employment/Pre-employment services
☐ Parent substance abuse services
☐ Parent Intellectual & Developmental Disabilities
☐ Parent mental health services
☐ Child substance abuse services
☐ Child mental health services
☐ Child Intellectual & Developmental Disabilities
☐ Early Childhood Developmental services
☐ Juvenile Probation
☐ Adult Probation & Parole

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Family Group Conference Baseline

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

- ☐ Independently (16 & older)
- ☐ School dormitory
- ☐ Job Corps
- ☐ Parent's home
- ☐ Informal kinship care
- ☐ Formal kinship care
- ☐ Foster care
- ☐ Group home
- ☐ Shelter
- ☐ 30-day residential progam
- ☐ Residential Treatment Facility
- ☐ Drug & Alcohol inpatient facility
- ☐ Inpatient psychiatric facility
- ☐ Youth Correctional Facility
- ☐ Adult Correctional Facility
- ☐ Supervised Independent Living Program
- ☐ Homeless

4a. What is the child's planned living environment in the next 45-60 days after the conference?

- ☐ Independently (16 & older)
- ☐ School dormitory
- ☐ Job Corps
- ☐ Parent's home
- ☐ Informal kinship care
- ☐ Formal kinship care
- ☐ Foster care
- ☐ Group home
- ☐ Shelter
- ☐ Placement Pending
- ☐ 30-day residential progam
- ☐ Residential Treatment Facility
- ☐ Drug & Alcohol inpatient facility
- ☐ Inpatient psychiatric facility
- ☐ Youth Correctional Facility
- ☐ Adult Correctional Facility
- ☐ Supervised Independent Living Program
- ☐ Homeless

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

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

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

- ☐ Family open for services & child in OUT-OF-HOME placement
- ☐ Family open for services & receiving IN-HOME services
- ☐ Assessment/Investigation/Intake
- ☐ Juvenile Supervision
- ☐ Aftercare
- ☐ No agency involvement

8. At the time of the conference, were potential kinship resources identified? ☐ Yes ☐ No

　　8a. If yes, please indicate how many resources were identified: ☐☐☐

9. Child's Demographic Information

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

Ethnicity (check one) ☐ Hispanic ☐ Not Hispanic or Latino

Gender ☐ Male ☐ Female ☐ Transgender

Child's Age (in years) ☐☐

Is this child part of the county's Permanency Practice Initiative (PPI) population? ☐ Yes ☐ No

10. At the time of the conference, please select the child/youth's Court/Legal Involvement (select one response).

- ☐ Alleged Dependent
- ☐ Alleged Delinquent
- ☐ Dependent
- ☐ Delinquent
- ☐ Both (Dependent & Delinquent)
- ☐ None

11. In the past 6 Months, have there been substantiated/founded/indicated reports of child abuse/neglect for this child/youth? ☐ Yes ☐ No

　　11a. If yes, what is the most recent type of abuse report:

- ☐ Physical Abuse
- ☐ Serious Physical Neglect
- ☐ Serious Mental Injury
- ☐ Sexual Abuse

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May 2015

Family Group Conference Baseline Form

The Baseline Form gathers information regarding the identified or focus child/youth's living environment, demographics, abuse history, as well as dependency and delinquency status. Below are some explanations that can help guide you when completing the Form. If you are unsure of any information requested on the Form, please check with the referring worker. After completing the Baseline Form, please return it with the completed conference surveys to the PA Child Welfare Resource Center. Baselines should be completed and submitted even if conference participants did not complete surveys.

Selecting the Identified or Focus Child/Youth

- When there is only one child/youth in the family, that child/youth is the identified or focus child/youth and their information should be on the forms.
- If there is more than one child/youth in the family, and a specific child/youth is clearly the focus of the meeting, then that is the identified or focus child/youth.
- When a conference occurs for all of the children within a family, please select the child with closest birthdate (month, day) to the conference date (month/day). **EXAMPLE:** If today's date is March 21st and you receive a referral for an entire family, check the birthdates for each child. If the children's birthdates are March 3rd (3/3) and September 9th (9/9), you would select the child with the March 3 (3/3) DOB to be the identified or focus child/youth for the purposes of completing the evaluation forms.

Completing the Baseline Form

The Baseline Form requests similar identifying information to the Family Group Conference Survey in order to link the Baseline Form with the Surveys and gain a complete picture of families' overall experiences.

- County Code is the numeric identifier for the county determined by listing the counties alphabetically and numbering them 1-67. If you need to check a county code, please review the listing found in the glossary.
- The Year is the four-digit calendar year not the fiscal year or other year format.
- The same Conference ID number should be used on all of the forms related to the same initial or new conference. Counties use a variety of processes to establish the Conference IDs. Please check with your county if you are unsure how to complete this information. Take care to avoid using the same Conference ID number twice in a State Fiscal Year (July 1-June 30), or it will result in the undercounting of the conferences.

Master Client Index, Shared Case Responsibility and Referring Agency items request system information unique to the identified or focus child/youth. The bullets below provide additional guidance to complete these items.

- Master Client Index (MCI) number refers to the numeric identifier assigned by the county through the Department of Human Services. MCI numbers provide each child a unique identifier allowing agencies to track children across systems.
- Shared Case Responsibility (SCR) is determined if the case meets the criteria defined in the SCR bulletin. Shared Case Responsibility is more than a case open with two or more agencies, but refers to a case where the court orders CYS & JPO jointly manage the case.
- Primary Referring Agency refers to the agency that made the referral, or in the cases of joint referrals, the lead agency.

Items 1-11 ask for information that provides additional context regarding the conference, family and identified or focus child/youth. The bullets below provide additional guidance when completing the items.

- Item 1 asks you to identify the conference participants in terms of their relationship to the identified or focus child/youth.

- Item 2 examines why the family came for a conference. That is, what is the primary challenge the conference is intended to address? **EXAMPLE:** If a family came to a conference to develop a plan to address a child's behavior issues, you would select child/youth's behavior issues. Even if the conference plan is the foundation for the Family Service Plan, the purpose of the conference is to address the child's behavior issues.

- Item 3 examines the services and supports the family included in their Family Plan. The listing categorizes the services into natural and professional services and supports. Please refer to the glossary to review the definitions of the services and supports, as these definitions are specific to the evaluation.

- Item 4 asks about the identified or focus child/youth's primary living environment while preparing for the conference. Please refer to the glossary to review the definitions of living environments, as these definitions are specific to the evaluation.

- Item 4a asks for the identified or focus child/youth's PLANNED, **primary** living environment, for the 45-60 days following the conference. Please refer to the glossary to review the definitions of the services and supports, as these definitions are specific to the evaluation.
  - If at the time of Form completion, a decision about where the identified or focus child/youth will live needs approval from a judge, please select placement pending.
  - If the identified or focus child/youth is in the care and custody of a parent but will be living in a family member's home (e.g., grandparent), please indicate that they are living with their parent.
  - If the identified or focus child/youth will be residing in a school dormitory or Job Corps setting, whether in in the care and custody of their parents or the county agency, please select school dormitory or Job Corps.

- Item 5 examines if the conference was able to avoid a paid, formal foster care placement for the identified or focus child/youth. Select…
  - **Yes**, if placement was considered and avoided.
  - **No**, if placement was considered and the conference was unable to prevent the placement.
  - **NA**, if out-of-home placement was not a consideration in this conference.

- Item 6 examines if the conference allowed the identified or focus child/youth to return or remain home. Select…
  - **Yes**, if the conference was able to allow the identified or focus child/youth to return or remain in their home.
  - **No**, if the conference was unable to permit the identified or focus child/youth to return/remain home.
  - **NA**, if returning or remaining home was not a consideration in this conference.

- Item 7 examines when in the life of a case the conference occurred. **EXAMPLE**: Is it occurring during the initial phase of a case (referred to in a variety of terms - Investigation, Intake or Assessment) before the agency accepts the family for services or at another point in the case? Select the statement that reflects when in the life of the case, the conference occurred.

- Item 8 asks if potential kinship resources were identified at the time of the conference. Select…
  - Yes, if resources were identified at the time of the conference.
  - No, if resources were not identified at the time of the conference.

- Item 8a asks if yes to item 8, how many resources were identified. Please indicate a number.

- Item 9 asks about the identified or focus child/youth's demographic information
  - **Race:** <u>Check only one</u>. Do not assume that biracial children identify as 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" or "biracial," select multiracial.
  - **Age:** The age of the identified child/youth is to be rounded up at the six-month mark. **EXAMPLE**: If a child is less than 6 months old, record the age as 0 years. If a child is at least 6 months old, but less than 1 year, round the age up to 1. Record the age of a child who is 11 years and 6 months old as 12.
  - **Ethnicity:** <u>Check only one</u>. Ask the identified or focus child/youth or their parents whether they consider themselves Hispanic or Latino.
  - **Gender:** <u>Check only one</u>. Check with the youth and select the gender with which the youth identifies.
  - **Permanency Practice Initiative (PPI)** is a project of the Administrative Office of Pennsylvania Courts (AOPC) that focuses on identified children within a county. Select…
    - **Yes**, if the focus or identified child/youth is part of the initiative.
    - **No**, if the focus or identified child/youth is NOT part of the initiative.

- Item 10: examines the child's/youth's legal involvement <u>at the time of the conference</u>. This question classifies the legal status of the child as allegedly dependent or delinquent, determined to be dependent or delinquent or both dependent and delinquent.
  - Select none in cases
    - where the conference occurs as a diversion,
    - where there is no agency involvement,
    - where there is no court involvement.

- Item 11: examines the child/youth's history of abuse and neglect within <u>the previous 6 MONTHS</u>. The item asks if the identified/focus child was the subject of a substantiated/founded/indicated (counties use different terms) CPS report of child abuse or neglect.
  - Select **No,** if in the past 6 months there were no substantiated/founded/indicated reports of child abuse or neglect .
  - Select **Yes**, if in the past 6 months there was a substantiated/founded/indicated incident of child abuse or neglect.

- Item 11a: if the answer to item 11 was yes, <u>please check only one</u> abuse type category. Since only one item can be selected, but children can be the subject of more than one type of abuse; indicate the abuse type that most relates to the conference or is the current concern or challenge.

Family Group Conference Outcome Form

County _____

County Code	Year	Conference ID	Child's MCI#
☐☐☐	☐☐☐☐	☐☐☐☐☐	☐☐☐☐☐☐☐☐☐

Outcome Date ☐☐ / ☐☐ / 2 0 ☐☐   Family Group Conference Date ☐☐ / ☐☐ / 2 0 ☐☐

Outcome Type
☐ 45-60 days   ☐ 6 months   ☐ Other

Case Status

At this time, the case was open with which agencies   ☐ CYS   ☐ JPO   ☐ Both CYS & JPO   ☐ No open case with CYS or JPO

Is the Children & Youth case closed?   ☐ Yes   ☐ No   ☐ N/A   Is the Juvenile Probation case closed?   ☐ Yes   ☐ No   ☐ N/A

If closed with Children & Youth, date case closed?   **If closed with Juvenile Probation, date case closed?**

☐☐ / ☐☐ / 2 0 ☐☐   ☐☐ / ☐☐ / 2 0 ☐☐

If this case is closed with C&Y, please select the PRIMARY reason for closure. Select ONE response.   If this case is closed with JPO, please select the PRIMARY reason for closure. Select ONE response.

☐ Family moved   ☐ Aging out (turning 21)

☐ Aging out   ☐ Goal achievement

☐ Goal achievement   ☐ Successful completion of probation supervision

☐ Achieved permanency   ☐ Court closed for reason NOT Listed

☐ Court closed for reason NOT Listed   ☐ Other *Please specify below*

☐ Other *Please specify below*

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐   ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

1a. Since the initial conference, how effective has the family's plan been in meeting the conference purpose?

☐ Ineffective   ☐ Mostly ineffective   ☐ Neither effective nor ineffective   ☐ Effective   ☐ Strongly effective

1b. Was the family offered a follow-up conference?   ☐ Yes   ☐ No

1c. Did a follow-up conference occur?   ☐ Yes   ☐ No

1d. Since the initial conference, were SIGNIFICANT changes made to the Family Group Conference plan?   ☐ Yes   ☐ No

1e Since the initial conference, have there been any NEW conferences?   ☐ Yes   ☐ No

   1f. If YES to 1e, select PRIMARY reason for holding the most recent conference. (Select only ONE)

☐ Develop/Revise Family Service Plan   ☐ Prevent out-of-home placement disruption   ☐ Prevent futher delinquent behavior
☐ Develop/Revise Child Permanency Plan   ☐ And assist in reunification   ☐ Truancy
☐ Develop/Revise treatment plan   ☐ Identify supports for caregivers   ☐ Transportation issues
☐ IL/Aftercare/Transition Conference   ☐ Lack of supervision   ☐ Housing & environmental issues
☐ Develop plan to keep child in safe & stable home   ☐ Communication issues   ☐ Child's medical/mental health/drug & alcohol issues
☐ Placement prevention   ☐ Child/family/parent conflict   ☐ Parent's medical/mental health/drug & alcohol issues
☐ Change in placement status   ☐ Child/youth's behavioral issues

1g. Since the initial conference, have there been substantiated/founded or indicated reports of child abuse/neglect for this child/youth?   ☐ Yes   ☐ No

   1h. If YES to 1g, what is the most recent report? ☐ Physical Abuse   ☐ Serious Physical Neglect   ☐ Sexual Abuse   ☐ Serious Mental Injury

1i. Since the initial conference, has the youth been charged with an additional criminal offense?   ☐ Yes   ☐ No   ☐ NA

   1j. If YES to 1i, select the most serious adjudication or offense: ☐ Misdemeanor   ☐ Felony   ☐ Other

1k Since the initial conference, has the youth been ajudicated delinquent or convicted of a criminal offense?   ☐ Yes   ☐ No   ☐ NA

   1l. If YES to 1k, select the most serious adjudication or conviction: ☐ Misdemeanor   ☐ Felony   ☐ Other

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Family Group Conference Outcome Form

2. Since the initial conference, has the family's plan, directly or indirectly, improved...	No Improvement	Minimal Improvement	Moderate Improvement	Significant Improvement	N/A
2a. the child/youth's overall well-being?	☐	☐	☐	☐	
2b. the child/youth's education needs?	☐	☐	☐	☐	☐ child is not school age
2c. the child/youth's physical needs?	☐	☐	☐	☐	
2d. the child/youth's emotional or mental health needs?	☐	☐	☐	☐	
2e. the child/youth's living environment?	☐	☐	☐	☐	

3. Since the initial conference, what services & supports were involved with the family? (check all that apply)

Natural Supports
- ☐ Informal kinship care
- ☐ Family support
- ☐ Family housing support
- ☐ Family financial support
- ☐ Natural respite
- ☐ Faith based support
- ☐ Recreational services
- ☐ After-school services

Professional Supports
- ☐ Family Finding
- ☐ Independent Living/Aftercare
- ☐ Family Therapy

- ☐ Domestic Violence services
- ☐ Formal kinship care
- ☐ Literacy services
- ☐ Transportation services
- ☐ Foster care
- ☐ Group home services
- ☐ Residential Treatment Facility
- ☐ Respite
- ☐ Placement services
- ☐ Financial assistance
- ☐ Housing assistance
- ☐ Education support

- ☐ Employment/Pre-employment services
- ☐ Parent substance abuse services
- ☐ Parent Intellectual & Developmental Disabilities
- ☐ Parent mental health services
- ☐ Child substance abuse services
- ☐ Child mental health services
- ☐ Child Intellectual & Developmental Disabilities
- ☐ Early Childhood Developmental services
- ☐ Juvenile Probation
- ☐ Adult Probation & Parole

4. If placement options were discussed at the conference, is the child/youth still living in one of the discussed placements? ☐ Yes ☐ No ☐ NA

5. Since the initial conference, has at least one kinship support remained involved? ☐ Yes ☐ No

6. Since the initial conference, select the option that best describes where the child/youth has been living most of the time.

- ☐ Independently (youth 18 & older)
- ☐ School dormitory
- ☐ Job Corps
- ☐ Parent's home
- ☐ Informal kinship care
- ☐ Formal kinship care
- ☐ Foster care
- ☐ Group home
- ☐ Shelter

- ☐ 30-day residential program
- ☐ Residential Treatment Facility
- ☐ Drug & Alcohol inpatient facility
- ☐ Inpatient psychiatric facility
- ☐ Youth Correctional Facility
- ☐ Adult Correctional Facility
- ☐ Supervised Independent Living Program
- ☐ Homeless

7. Since the initial conference, has the child/youth run away from their living environment?
☐ Yes, once ☐ Yes, multiple times ☐ No

8. Since the initial conference, how many times has the child/youth moved (excluding respite stays)?
☐ 0 (no moves) ☐ 1 move ☐ 2 or 3 moves ☐ 4 or more moves

9. Since the initial conference, how stable have the child/youth's daily living arrangements been?
☐ Stable ☐ Somewhat stable ☐ Relatively unstable ☐ Unstable

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Pennsylvania Child Welfare Resource Center

May 2015

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Family Group Conference Outcome Form

The Outcome Form gathers information regarding the impact that the conference and/or family plan had on the identified or focus child/youth. The Outcome Form is completed at two intervals after the conference: once at 45-60 days and again at 6 months. A professional who is most familiar with the family should complete the Form. When responding to the items, focus on the changes that have occurred during the established timeframes, unless the question directs otherwise. It may be necessary to contact the referring worker or current, case-carrying worker for additional information.

When to complete the Form

Counties are to complete Outcome Forms for ALL conferences at 45-60 days and again 6-months post-conference. The Outcome Form does not need to be completed on a specific date as long as it is completed during the established timeframes. After the 6-month Outcome Form is completed, no additional Forms are required but counties are encouraged to submit Forms at additional timeframes, (e.g., 1 year) as their resources allow.

In some counties, it may not be possible to complete 6-month Outcome Forms for all conferences. In these cases, the county can complete the 6-month Outcome Forms for a sample of conferences. The guidelines below outline how to select a 6-month sample.

Six-Month Sample Guidelines: The date of the conference and the county region determines the conferences that would fall into the sample for completing a 6-month Outcome Form. **EXAMPLE**: a county in the Central Region determines that they do not have enough resources to complete 6-month Outcome Forms for all of their conferences. They opt to implement the sampling strategy option, and following the criteria below, determine that all conferences held by the agency during the month of July will require a 6-month Outcome Form. They would complete these forms in the month of January.

Region	Conference Month	6-Month Outcome
Central	July	January
Western	April	October
Southeast	January	July
Northeast	October	April

Completing the Outcome Form

The Outcome Form requests similar identifying information to the Family Group Conference Surveys and Baseline Form in order to link the forms and gain a complete picture of families' overall experiences.

- County Code is the numeric identifier for the county determined by listing the counties alphabetically and numbering them 1-67. If you need to check a county code, please review the listing found in the glossary.
- The Year is the four-digit calendar year not the fiscal year or other year format.
- The same Conference ID number should be used on all of the Forms related to the same initial or new conference. Counties use a variety of processes to establish the Conference IDs. Please check with your county if you are unsure how to complete this information. Take care to avoid using the same Conference ID number twice in a State Fiscal Year (July 1-June 30), or it will result in the undercounting of the conferences.
- Outcome Date is the date the information was gathered.
- Family Group Conference Outcome date is the date on which the meeting occurs.
- Outcome Type is the timeframe in which the Outcome check-in occurs in relation to the date of the Family Group Conference Outcome date (i.e., 45-60 days after the conference, 6 months after the conference or some other timeframe).

Case Status section: The items in this section gather information about the status of the case and the reason(s) that a case may have closed. If you are unsure of the case status, please contact the C&Y and/or JPO agency.

- At this time, the case was open with which agencies. Select…
    - o **No open case with CYS or JPO**, if a family never had a case open with C&Y and/or JPO.
    - o **Both CYS & JPO**, if a family has a case open with both <u>CYS & JPO at the same time</u>.
    - o **CYS**, if a family has an open case with <u>CYS ONLY</u>.
    - o **JPO**, if a family has an open case with <u>JPO ONLY</u>.

- Is the Children & Youth (C&Y) case closed? Select…
    - o **NA**, when there was NO case open with C&Y.
    - o **Yes**, if C&Y has closed the case.
    - o **No**, if the case is still open with C&Y.

- Is the Juvenile Probation (JPO) case closed? Select…
    - o **NA**, when there was NO case open with JPO.
    - o **Yes**, if JPO has closed the case.
    - o **No**, if the case is still open with JPO.

If the case is closed with C&Y and/or JPO, respond to the rest of the questions in the section as they apply. If a case is open with C&Y and/or JPO, or no case was open with C&Y and/or JPO, you may skip the rest of the section and go to question 1a.

- If this case is closed with **C&Y,** please select the PRIMARY reason for closure.
    - o When selecting a response, <u>select only one choice</u>.
    - o "Court closed for reason not listed" and "Other" are for the infrequent exceptions and should be used rarely.
        - ▪ If you select "Court closed for reason not listed," no additional information is needed. Do not include information in the text boxes below "Other".
        - ▪ Select "Other" when the closure reason is not listed and specify the reason below in the text box.

- If this case is closed with **JPO,** please select the PRIMARY reason for closure.
    - o When selecting a response, <u>select only one choice</u>.
    - o "Court closed for reason not listed" and "Other" are for the infrequent exceptions and should be used rarely.
        - ▪ If you select "Court closed for reason not listed", no additional information is needed. Do not include information in the text boxes below "Other".
        - ▪ Select "Other" when the closure reason is not listed and specify the reason below in the text box.

Items 1a-9 ask for information about the identified or focus child/youth's status during the outcome timeframe.

- Item 1a asks the professional to judge how effective the family's plan has been in meeting the conference purpose. Review the definitions for each response option and select the option that best reflects the situation.
  - o **Ineffective**- The strategies, supports and services provided to the identified or focus child/youth and family have been poor, limited or undependable and have not been responsive or appropriate to their needs.
  - o **Mostly ineffective**- The strategies, supports and services provided to the identified or focus child/youth and family are inconsistent with their needs.
  - o **Neither effective nor ineffective**- The strategies, supports and services provided have had no impact (either positively or negatively).
  - o **Effective**- The strategies, supports and services provided to the identified or focus child/youth and family are responsive and appropriate to their needs.
  - o **Strongly effective**- The strategies, supports and services provided to the identified or focus child/youth and family are highly responsive and fully appropriate to their needs.

- Item 1b asks if a follow-up conference was offered to the family. Select…
  - o **Yes**, if a follow-up conference was offered to the family.
  - o **No**, if a follow-up meeting was NOT offered to the family.

- Item 1c asks if a follow-up conference occurred. Select…
  - o **Yes**, if a follow-up conferences was held.
  - o **No**, if a follow-up conference was NOT held.

- Item 1d focuses on modifications made to the plan due to changes in the identified or focus child/youth's safety, placement, permanency and/or stability. Select…
  - o **Yes**, if changes to the child's safety, placement, permanency and/or stability necessitated plan changes.
  - o **No**, if the plan did not require modifications

- Item 1e asks if the family came back together for a **NEW** conference during the outcome timeframe. For evaluation purposes, a follow-up meeting is NOT considered a new conference, even if it is the case in practice. Select…
  - o **No**, if the family did not gather for a new conference.
  - o **Yes**, if the family gathered for a new conference.
    - **Item 1f. If yes to item 1e, indicate the primary purpose for the new conference**. The primary purpose is why the family came for a conference. That is, what is the primary challenge the conference is intended to address? **EXAMPLE:** If a family came to a conference to develop a plan to address a child's behavior issues, you would select child/youth's behavior issues. Even if the conference plan is the foundation for the Family Service Plan, the purpose of the conference is to address the child's behavior issues.

- Item 1g examines substantiated, founded and indicated reports since the initial conference. Select…
  - o **No**, if the identified or focus child/youth has not been the subject of a substantiated, founded and/or indicated child abuse report.
  - o **Yes**, if the identified or focus child/youth has been the subject of a substantiated, founded and/or indicated report.
    - **Item 1h. If yes to Item 1g, select the most recent report type**. Select only one type, but if the report contained more than one type of abuse, select the abuse type that most relates to the conference or is the current challenge or concern.

- Item 1i examines, since the initial conference, if the identified or focus child/youth, **who was adjudicated delinquent at time of the initial conference**, has been charged with an additional criminal offense. Select…
    - **NA,** if the identified or focus child/youth was not adjudicated delinquent at the time of the initial conference.
    - **NO,** if the identified or focus child/youth was adjudicated delinquent at the time of the conference, and HAS NOT received additional criminal charges.
    - **YES,** if the identified or focus child/youth was adjudicated delinquent at the time of the conference, and HAS received additional criminal charges.
        - **Item 1j. If Yes to item 1i**, select the select the most serious adjudication or offense.

- Item 1k examines, since the initial conference, if the identified or focus child/youth, **who was adjudicated delinquent at the time of the initial conference**, been adjudicated delinquent or convicted of a criminal offense. Select…
    - **NA,** if the identified or focus child/youth was not adjudicated delinquent at the time of the initial conference.
    - **NO,** if the identified or focus child/youth was adjudicated delinquent at the time of the conference, and HAS NOT been adjudicated delinquent or convicted of a criminal offense.
    - **YES,** if the identified or focus child/youth was adjudicated delinquent at the time of the conference, and HAS been adjudicated delinquent or convicted of a criminal offense.
        - **Item 1l. If Yes to item 1k**, select the most serious adjudication or conviction.

- Items 2a-2e ask the professional to rate how the family's plan has DIRECTLY OR INDIRECTLY improved the identified or focus child/youth's overall well-being, education, physical needs, emotional needs and living environment. Select NA for educational needs ONLY if the identified or focus child/youth is not of school age.

- Item 3 examines the Services and Supports, since the initial conference, the family and/or the identified or focus child/youth, involved in their case. The listing categorizes the services into natural and professional services and supports. Please refer to the glossary to review the definitions of the services and supports, as these definitions are specific to the evaluation.

- Item 4 asks if the identified or focus child/youth is living in an environment that was discussed at the conference . Select…
    - **NA**, if placement was not a consideration at the initial conference.
    - **Yes,** if at the time of the conference, a placement(s) was decided upon and the identified or focus child/youth is living in that placement.
    - **No**, if at the time of the conference, a placement(s) was decided upon and the identified or focus child/youth is NOT living in that placement.

- Item 5 asks if kinship supports have remained involved since the initial conference. Select…
    - **No,** if the kinship supports have NOT remained involved.
    - **Yes**, if ONE or more kinship supports have continued to be involved since the conference.

- Item 6 asks, during the specified timeframe, what is the identified or focus child/youth's primary living environment. Please refer to the glossary to review the definitions of living environments, as these definitions are specific to the evaluation.

- Item 7 requests the number of times that the identified or focus child/youth has run away from his or her living environment.

- Item 8 focuses on the number of times, since the conference, that the identified or focus child/youth has moved or changed living environments. This excludes hospitalizations, respite stays or moves with the family from one home to another. However if the identified or focus child/youth move between caregivers, (e.g., from mom to dad; excluding visitation) this would be counted as a move. In addition, if a youth moved from their home to a residential treatment facility, this is also counted as a move.

- Item 9 examines the identified or focus child/youth's living environment stability **SINCE THE INITIAL CONFERENCE**. Review the response options listed below and select the option that best describes the stability of the living environment.
    - **Stable**- The identified or focus child/youth has **enduring** stability in their living arrangement and enjoys positive relationships between parents/ caregivers, key adult supporters, and peers.
    - **Somewhat stable**- The identified or focus child/youth has had **adequate** stability in their living arrangement and is establishing positive relationships between parents/caregivers, key adult supporters, and peers. The child/youth has had **no more than one** disruptive change in living environment since the initial conference.
    - **Relatively unstable**- The identified or focus child/youth has had **limited periods** of stability in their living arrangement. Relationships between parents/primary caregivers, key adult supporters, and peers may be strained, the child/youth may not feel secure in the living arrangement and disruptions may have resulted in changes of parents/primary caregivers, key adult supporters, and peers in the living environment.
    - **Unstable**- The identified or focus child/youth has experienced **substantial and continuing problems** of instability due to **multiple** changes in their living arrangement. The child/youth feels insecure and concerned about his/her situation.

Glossary

Adult Correctional Facility: All adult facilities, privately or publicly owned and operated, designated by the court (federal, state, and/or local) to detain, supervise, and/or secure an adult, charged with a criminal offense.
- Department of Correction. (n.d.). Retrieved May 11, 2015, from http://www.cor.pa.gov/Pages/default.aspx#.VVEHjf50zIV.

Adult Probation & Parole
Adult Probation: Serves adult criminal offenders whom the courts place on supervision in the community through a probation agency, generally in lieu of incarceration or in a split sentence (time period of incarceration and time period of probation at time of sentencing). **Adult Parole:** Serves adult criminal offenders conditionally released from prison to serve the remaining portion of their sentence in the community.
-What is the difference between probation and parole? (n.d.). Retrieved April 28, 2015, from http://www.bjs.gov/index.cfm?ty=qa&iid=324.

Aftercare: 1) Independent Living (IL) services that are mandated to be offered to youth who exited care on or after their 16th birthday. Services may include the full range of services available to IL participants, including any service areas addressed in the assessment, counseling and/or stipends. However, if the youth entered an adoptive or Permanent Legal Custodianship situation before turning age 16, he or she would not be eligible for any stipends.
-Frequently Asked Questions and Recommendations for Implementation. (2014, December 1). Retrieved April 28, 2015, from http://www.dhs.state.pa.us/cs/groups/webcontent/documents/bulletin_admin/d_005742.pdf.
2) A comprehensive cross-systems service plan, beginning at disposition and continuing through placement and discharge back to the community of a delinquent or dependent youth, that insures better outcomes through the continuity of supports and connections that will assist youth as they transition to independent adulthood.
-Shared Case Responsibility Policy and Procedures. (2010, May 3). Retrieved April 28, 2015, from http://www.pccyfs.org/dpw_ocyfs/Shared_Case/OCYF_Bulletin3130-10-01_SC_Policy-Procedures.pdf.

After-school services: Care and educational enhancement to children following school hours; also referred to as afterschool programs.
-After school. (2014, January 1). Retrieved April 28, 2015, from https://www.ahdictionary.com/word/search.html?q=afterschool.

County Code

Code	County	Code	County	Code	County	Code	County	Code	County
1	Adams	15	Chester	29	Fulton	43	Mercer	57	Sullivan
2	Allegheny	16	Clarion	30	Greene	44	Mifflin	58	Susquehanna
3	Armstrong	17	Clearfield	31	Huntingdon	45	Monroe	59	Tioga
4	Beaver	18	Clinton	32	Indiana	46	Montgomery	60	Union
5	Bedford	19	Columbia	33	Jefferson	47	Montour	61	Venango
6	Berks	20	Crawford	34	Juniata	48	Northampton	62	Wayne
7	Blair	21	Cumberland	35	Lackawanna	49	Northumberland	63	Warren
8	Bradford	22	Dauphin	36	Lancaster	50	Perry	64	Washington
9	Bucks	23	Delaware	37	Lawrence	51	Philadelphia	65	Westmoreland
10	Butler	24	Elk	38	Lebanon	52	Pike	66	Wyoming
11	Cambria	25	Erie	39	Lehigh	53	Potter	67	York
12	Cameron	26	Fayette	40	Luzerne	54	Schuylkill		
13	Carbon	27	Forest	41	Lycoming	55	Snyder		
14	Centre	28	Franklin	42	McKean	56	Somerset		

Delinquency: In response to a petition filed alleging a juvenile to be delinquent, a determination made by the court, that 1) the allegations that the juvenile committed the delinquent acts are true, and 2) that the juvenile is in need of treatment, supervision or rehabilitation.
-Shared Case Responsibility Policy and Procedures. (2010, May 3). Retrieved April 28, 2015, from http://www.pccyfs.org/dpw_ocyfs/Shared_Case/OCYF_Bulletin3130-10-01_SC_Policy-Procedures.pdf.

Dependency: In response to a petition filed alleging a child to be dependent, a determination made by a court, upon clear and convincing evidence, that a child is a 'dependent child' as defined in the Juvenile Act.
-Shared Case Responsibility Policy and Procedures. (2010, May 3). Retrieved April 28, 2015, from http://www.pccyfs.org/dpw_ocyfs/Shared_Case/OCYF_Bulletin3130-10-01_SC_Policy-Procedures.pdf.

Domestic Violence services: Programs designed to support and empower those impacted by domestic violence.
-What is Domestic Violence. (2014, July 23). Retrieved April 28, 2015, from http://www.justice.gov/ovw/domestic-violence.

Early Childhood Development Services: Professional services provided to aid and support the development of children from birth to age five and their families. Supports provided may include, but are not limited to: physical development, including vision and hearing; cognitive development; communication development; social or emotional development; and adaptive development. For the purposes of this evaluation, this includes HeadStart, Intermediate Unit Services, Early Intervention, and Home Visiting services.
-Early Intervention. (2015, January 1). Retrieved April 28, 2015, from http://www.portal.state.pa.us/portal/server.pt/community/early_intervention/8710.
-Hubley, N. (2007, January 1). The Right to Early Intervention for Infants and Toddlers and Their Families in Pennsylvania A Handbook for Parents. Retrieved April 28, 2015, from http://drnpa.org/File/publications/the-right-to-early-intervention-for-infants-and-toddlers-and-their-families-in-pennsylvania-.pdf.
-Home Visiting Models. (n.d.). Retrieved April 28, 2015, from http://mchb.hrsa.gov/programs/homevisiting/models.html.

Education Support: Educational enhancement to children in any manner, which may include but is not limited to, tutoring, GED prep, SAT prep, apprenticeships, and financial assistance.

Employment/ Pre-employment services: An individual participates with a professional with the intent of seeking employment and/or maintaining employment. There are many employment providers including municipalities, nonprofit and for-profit agencies.

Faith based support: Any assistance provided to the family that is affiliated with a religion or religious group.
-What are FBOs? CBOs? (2002, January 1). Retrieved April 28, 2015, from http://www.cpjustice.org/content/what-are-fbos-cbos.

Family financial support: A family member and/or significant friend providing financial assistance, including budgeting support, in any manner to another family member and/or significant friend.

Family Finding: Ongoing diligent efforts of the county agency, or contracted providers, to search for and identify adult relatives and kin, and engage them in the county agency's social service planning and delivery of services, including gaining commitment from relatives and kin to support a child or guardian receiving county agency services.
-Definitions. (n.d.). Retrieved April 28, 2015, from http://www.pacourts.us/assets/uploads/Resources/Documents/Family Finding Rules Oct 13 For Publication - 003259.pdf?cb=56d2a.

Family housing support: A family member and/or significant friend providing housing assistance in any manner to another family member and/or significant friend.

The glossary contains definitions from various sources as well as uncited terms developed and/or modified solely for the purposes of this evaluation.

Family Preservation services: A professional providing support to keep the family intact and prevent placement. Many providers assist with preservation of families including; municipalities, nonprofit and for-profit agencies.

Family support: A family member and/or significant friend assisting another family member and/or significant friend.

Family Therapy: Sessions, at least a ½ hour in duration, provided by a clinical staff person to two or more members of a family and at least one person shall have a diagnosed mental disorder.
-Hooks, M. (Director) (2014, February 25). Outpatient Psychiatric Services. *Provider Training Series*. Lecture conducted from Value Behavioral Health of Pennsylvania.

Financial Assistance: A professional providing support regarding monetary matters; may include, but are not limited to, direct assistance with finances or budgeting. Many providers assist with financial needs including municipalities, nonprofit and for-profit agencies.

Follow-up Conference: Conferences scheduled at the time of the initial FGDM or later, held for the purpose of reviewing the plan for the participants to monitor what has worked and areas that may need more planning to achieve their initial FGDM purpose.
-Guidelines for Family Group Decision Making in Child Welfare. (2010, January 1). Retrieved April 28, 2015, from http://www.americanhumane.org/assets/pdfs/children/fgdm/guidelines.pdf.

Foster care: The residential care and supervision provided by a non-relative individual(s) (foster parents) to a child placed with a foster family. ***Although group home and kinship care exist under the federal definition of children in foster care, <u>for the purposes of this evaluation</u>, there is a deliberate intent to discern between a traditional foster care setting, group home setting, and kinship care.***
-CHAPTER 3700. FOSTER FAMILY CARE AGENCY. (2015, February 7). Retrieved April 28, 2015, from http://www.pacode.com/secure/data/055/chapter3700/chap3700toc.html.
-Foster Care Statistics 2012. (2013, November 1). Retrieved April 28, 2015, from https://www.childwelfare.gov/pubPDFs/foster.pdf.

Group home: A residential facility (typically resembling a home) for approximately 4-8 children that cannot live with their families; at least one trained caregiver on site twenty-four hours a day and individuals are provided a level of case management services, as well as therapy dependent upon the facility. ***Although group homes exist under the federal definition of children in foster care, <u>for the purposes of this evaluation</u>, there is a deliberate intent to discern between a traditional foster care setting and group home setting.***

Homeless: There is more than one "official" definition of homelessness. 1) An individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility, (e.g., shelters) that provides temporary living accommodations, and an individual who is a resident in transitional housing. 2) An individual without permanent housing who may live on the streets; stay in a shelter, mission, single room occupancy facilities, abandoned building or vehicle; or in any other unstable or non-permanent situation. [Section 330 of the Public Health Service Act (42 U.S.C., 254b)] 3) An individual may be considered to be homeless if that person is "doubled up," a term that refers to a situation where individuals are unable to maintain their housing situation and are forced to stay with a series of friends and/or extended family members. 4) Previously homeless individuals who are to be released from a prison or a hospital may be considered homeless if they do not have a stable housing situation to which they can return. Recognition of the instability of an individual's living arrangements is critical to the definition of homelessness.
-What is the official definition of homelessness? (2015, January 1). Retrieved April 28, 2015, from https://www.nhchc.org/faq/official-definition-homelessness.

Housing Assistance: A professional providing support regarding housing needs, in any manner. There are many providers assisting with housing needs and homelessness from municipalities, nonprofit and for-profit agencies.

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Independent Living Program: A transitional living residence that is a home for five or fewer than five children, who are 16 years of age or older, who are all able to live in a semi-independent living setting.
-Chapter 3800. Child Residential and Day Treatment Facilities. (2015, February 7). Retrieved April 28, 2015, from http://www.pacode.com/secure/data/055/chapter3800/s3800.5.html.

Independent Living/ Aftercare Services
For the evaluation's purpose, Independent Living services and Aftercare services are grouped together.
Independent Living: Services provided to all youth in care, age 16 year or older, no matter what placement they are in and regardless of their permanency plan. Independent Living services can include, but are not limited to career counseling and placement, educational counseling and support, instruction in budgeting and home management, family-planning and sexual health counseling, and instruction in self-advocacy.
Aftercare Services: The combination of services, planning, support and supervision provided with the intent of ensuring that the youth successfully reintegrate into their home community.
-Independent Living. (2014, January 1). Retrieved April 28, 2015, from
http://www.ocfcpacourts.us/assets/upload/Glossary and Acronyms.pdf
- Aftercare. (n.d.). Retrieved May 11, 2015, from http://www.pa.gov/Pages/default.aspx#.VVEIdP50zIV.

Independently (youth 16 & older): Youth, NOT in the care and custody of a caregiver or agency, living in their own home.

Inpatient Drug & Alcohol Facility: Inpatient care facility (including detox, short-term residential, & long-term residential) for the purpose of recovery.
-Principles of drug addiction treatment A research-based guide. (2012, December 1). Retrieved April 28, 2015, from https://www.drugabuse.gov/sites/default/files/podat_1.pdf.

Inpatient Psychiatric Facility: Private psychiatric hospitals and distinct psychiatric units of general hospitals. *Although defined separately due to funding and long-term care option, <u>for the purpose of this evaluation</u>, public psychiatric hospital is included in this section.*
-Chapter 1151. Inpatient Psychiatric Services. (2015, February 1). Retrieved April 28, 2015, from http://www.pacode.com/secure/data/055/chapter1151/s1151.2.html.

Intellectual and Developmental Disabilities (IDD) services for a parent(s) OR child(ren): Services are provided to individuals age three and older who have been determined to have an Intellectual and Developmental Disability. [Children prior to age 3 are serviced through Early Intervention services].This may be determined if an individual has a full scale IQ of 70 or below and significant limitations in two or more areas of adaptive functioning, and the onset of this level of functioning must occur before the individual's 22nd birthday.
-Office of Developmental Programs Home and Community-Based Services. (2012, June 6). Retrieved April 28, 2015, from http://www.pabulletin.com/secure/data/vol42/42-23/1043.html.
About MH/IDD. (n.d.). Retrieved April 28, 2015, from http://www.chesco.org/index.aspx?NID=616.
-MH.IDD in your community. (n.d.). Retrieved April 28, 2015, from http://www.ccpa.net/118/Mental-HealthIntellectual-Develop-Dis.

Job Corps: A no-cost education (to the youth or their family) and vocational training on-site program administered by the U.S. Department of Labor that helps eligible young people, ages 16 through 24, improve the quality of their lives through vocational and academic training.
-Welcome to Job Corps. (2015, March 20). Retrieved April 28, 2015, from http://www.jobcorps.gov/home.aspx.

Juvenile Probation: Supervision of youth who commit a delinquent act, which is an act designated as a crime under the law of this Commonwealth or of another state if the act occurred in that state, or under Federal Law or under local ordinances or an act which constitutes indirect criminal contempt under 23 PA CS 61 (relating to protection from abuse) at age 10 or before reaching age 18 although supervision can last until age 21. Referral Sources consist of: Police, District Magistrate, Other Juvenile Probation Departments within PA, and Interstate Compact for Juvenile Probation Departments outside of PA.
-Bureau of Juvenile Justice Services. (2014, October 2). Retrieved April 28, 2015, from http://www.dhs.state.pa.us/DHSorganization/officeofchildrenyouthandfamilies/bureauofjuvenilejusticeservices/index.htm.

Kinship Care: When children live with a kinship caregiver (other than a birth or adoptive parent). Kin begin caring for children in a number of ways, and only some of those ways involve the child welfare system. Kinship care arrangements fall roughly into three categories: (1) informal kinship care, (2) voluntary kinship care, and (3) formal kinship care. **For the purposes of this evaluation**, the easiest distinction between **Formal and Informal Kinship Care** is monitoring and payment. If a kinship caregiver receives monitoring and a "per diem" or subsidy directly from the Child Welfare system and/or a contracted service provider, choose **Formal Kinship Care**. Formal Kinship Care often resembles Foster Care with the difference being the caregiver is kin to the child. If a kinship caregiver has a private arrangement made with a parent and/or court order to care for the child and does not receive funding or supervision through the Child Welfare system, choose **Informal Kinship Care**. (Note: Informal Kinship Caregivers can receive payment from the local assistance office or by applying directly for child support through the Domestic Relations Office). *Although kinship care exists under the federal definition of children in foster care, for the purposes of this evaluation, there is a deliberate intent to discern between a traditional foster care setting, formal kinship care setting, and informal kinship care.*
-Overview of Kinship Care. (2013, October 31). Retrieved April 28, 2015, from http://www.nrcpfc.org/is/kinship-relative-care.html.
-Foster Care Statistics 2012. (2013, November 1). Retrieved April 28, 2015, from https://www.childwelfare.gov/pubPDFs/foster.pdf.

Kinship Resource/Kinship Support: A relative of the child through blood or marriage, godparent of the child as recognized through an organized church, a member of the child's tribe or clan, or someone who has a significant positive relationship with the child or the child's family who offers and/or provides support and resources to the child.
-Permanent Legal Custodian Policy. (2010, July 30). Retrieved April 28, 2015, from http://www.pccyfs.org/dpw_ocyfs/Perm_Legal_Custodian/PLC_Policy(OCYFBulletin3130-10-02).pdf.

Literacy Services: Services that address literacy needs of all family members. Programs and services are provided through a variety of contexts, which may include adult basic education, English literacy and civics education.
- Programs and Services. (n.d.). Retrieved April 28, 2015, from http://www.portal.state.pa.us/portal/server.pt/community/able_programs___services/9082.

Master Client Index (MCI): A common centralized database used to identify clients of the Department of Human Services (DHS) various programs and services. This web-based system houses client data and enables information sharing about clients to provide a seamless network of support for DHS clients. It is a number assigned by the state that uniquely identifies the child. Every child involved in DHS services has a MCI number. If you are a contractor for the referring agency, please contact them to obtain this number.
-Understanding MCI and Application Processing. (2003, July 25). Retrieved April 28, 2014, from http://services.dpw.state.pa.us/oimpolicymanuals/manuals/daps/Ucis/CHAP-02-01.htm.
-Pennsylvania's Child Welfare Demonstration Project: Family Engagement User's Guide. (2013, August 1). Retrieved April 28, 2015, from http://www.pacwrc.pitt.edu/CWDP/CWDP Family Engagement Forms User's Guide_FINAL_081513.pdf.

Natural respite: A family member and/or significant friend providing the caregiver with brief periods of time in which they care and supervise the child(ren).

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Mental Health services for a parent(s) OR child(ren)
Mental Health services: Therapeutic services provided by a trained, clinical worker and can include, but are not limited to, involuntary treatment, outpatient, inpatient, acute care, emergency and crisis treatment, day treatment, consultation, and education. Community support services include screening of voluntary referrals to state hospitals, discharge planning with hospitals, crisis response, case management for clients in the community with chronic conditions, and residential programs that supervise, support, and treat the individual.
-Mental Health and Addiction Services. (n.d.). Retrieved May 11, 2015, from https://www.dshs.wa.gov/mental-health-and-addiction-services.

Parent's home: Refers to youth/minors in the custody and care of their parents or youth age 18 and older who are living with their parent(s). If the youth, parent, and kinship caregiver live in the same home and the youth is in the custody of the kinship caregiver, select a kinship care option.

Permanency Practice Initiative (PPI): An initiative developed by the State Roundtable and implemented in phases throughout Pennsylvania which combines a set of casework and court practice changes aimed at enhancing safe, timely permanence for children.
-Permanency Practice Initiative. (2014, January 1). Retrieved April 28, 2015, from http://www.ocfcpacourts.us/assets/upload/Glossary and Acronyms.pdf.

Placement Pending: Refers to the courts' pending decision on the placement of a child.

Placement services: A professional providing support regarding a child's out of home placement, permanency, and reunification. There are many providers assisting with placement needs of the child and family from municipalities, non-profit agencies, and for-profit agencies.

Recreational services: Activities provided to individuals that have socially redeeming values, completed during his/her free time for the purpose of enjoyment. This could include, but is not limited to sports, music, dance, games, travel, arts and crafts. There are many recreation providers from municipalities to nonprofit and for-profit agencies.
-Hurd, A., & Anderson, D. (n.d.). Definitions of leisure, play, and recreation. Retrieved April 28, 2015, from http://www.humankinetics.com/excerpts/excerpts/definitions-of-leisure-play-and-recreation.

Residential Treatment Facility: A facility that provides a supervised living arrangements *and* mental health treatment for children/adolescents whose needs are such that they can only be served in a 24-hour residential setting.
-Performance Standards Residential Treatment Facility. (2012, January 1). Retrieved April 28, 2015, from http://www.ccbh.com/pdfs/Providers/performanceStandards/RTF.pdf.

Respite: A short-term placement designed to provide relief to the primary family caring for the child.

School Dormitory: A building on a school campus that has rooms where students can live.
-Dormitory. (n.d.). Retrieved April 28, 2015, from http://www.merriam-webster.com/dictionary/dormitory.

Shared Case Responsibility (SCR): The sharing of the responsibility for care of and services to youth who are under the direct supervision of both County Child and Youth Agencies (CCYA) and Juvenile Probation Offices (JPO), and the families of these youth. Shared *legal* responsibility may be Court-ordered via a dual adjudication order (court determination that a youth is both dependent and delinquent, with care and responsibility assigned to CCYA), *or* via an order that incorporates language creating Shared Case Responsibility between CCYA and JPO for a youth's care, possible placement, case management and services to the family. However, there may be less formalized scenarios in which each agency wishes to consider how services from the other agency could benefit the youth and family as a whole, even on a time-limited basis. For such cross jurisdictional or "crossover" cases, those that can benefit from a service aspect of both CCYA and JPO, "shared case responsibility" is now also established as a *practice* option that may exist outside a court order that established legal responsibility.
-Shared Case Responsibility Policy and Procedures. (2010, May 3). Retrieved April 28, 2015, from http://www.pccyfs.org/dpw_ocyfs/Shared_Case/OCYF_Bulletin3130-10-01_SC_Policy-Procedures.pdf.

Shelter: A temporary, approved, unrestricted, residential facility (typically a more institutionalized setting) for a greater number of children than in typical group home settings, who cannot live with their families. Trained staff is on site twenty-four hours a day and individuals receive case management services, as well as therapy, dependent upon the facility.
-Pennsylvania Consolidated Statutes: Title 42 Judiciary and Judicial Procedure. Chapter 63A. 6302 Definitions. (n.d.). Retrieved April 28, 2015, from http://www.law.yale.edu/rcw/rcw/jurisdictions/am_n/usa/pennsylvania/PA_Code_42_6302.pdf.

Substance Abuse services for a parent(s) OR child (ren): Specialty medical and psychosocial interventions to reduce or discontinue the harmful use of alcohol, tobacco, and other drugs. Treatment addresses the physical, psychological, and social aspects of the "harmful or unhealthy use" and the chronic progressive disease of addiction with the goal of helping individuals achieve and maintain a healthy life.
-Definitions of the Treatment of Substance Use Disorders. (2011, November 9). Retrieved April 28, 2015, from http://www.saasnet.org/PDF/SAAS_Definition_of_Treatment11-10-11.pdf.

Supervised Independent Living: Living situations in which an older youth has a greater degree of independence than in congregate care; for example, a youth may live in an apartment alone or with roommates.
-Supervised Independent Living (SIL) Placements. (2014, January 1). Retrieved April 28, 2015, from http://www.ocfcpacourts.us/assets/upload/Glossary and Acronyms.pdf.

30-day Residential Program: Residential programs that are 30 days or fewer; court-ordered, outside of the home with the intent of specifically working with children individually and can have a family component. Discharge is known at the time of placement and often is the same caregiver prior to the placement. Municipalities, non-profit and for-profit agencies, may provide this type of program.
-The Pennsylvania Code: Chapter 3800. Child Residential and Day Treatment Facilities. (2015, February 7). Retrieved April 28, 2015, from http://www.pacode.com/secure/data/055/chapter3800/s3800.5.html.

Transportation services: Services that address transportation issues and can be provided in any manner. There are many providers assisting with transportation including municipalities, nonprofit and for-profit agencies.

Truancy: A widely defined legal term, *however for the purpose of this evaluation*, it is a child(ren) being absent from school habitually and/or regularly without permission.
-Truancy. (2015, January 1). Retrieved April 28, 2015, from ttp://dictionary.cambridge.org/us/dictionary/british/truancy.
-Cumpulsory School Attendance. (2013, September 18). Retrieved May 11, 2015.

Youth Correctional Facility: Refers to all juvenile facilities, privately or publicly owned and operated, that are designated by the court and approved by the Department of Human Services to detain, supervise, and/or secure a juvenile, charged with a criminal offense.

- Bureau of Juvenile Justice Services. (n.d.). Retrieved April 28, 2015, from http://www.dhs.state.pa.us/DHSorganization/officeofchildrenyouthandfamilies/bureauofjuvenilejusticeservices/index.htm.

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