

Care provider survey- baseline first time use and once a year.

Should it include education and DOC. It was designed with social service providers in mind.

National evaluator will come yearly or every other year should our survey be similar are we going to duplicate.

Year two is three day site visit. Jay has questions they use for their system evaluation from TA. He does not have one from MACRO they may not share this information.

Helene voiced concern waiting for info from national evaluations because of timeliness and the info won't address the system of care piece.

When do we need to decide on this- 6 months.

Response rate is fresher after the kickoff. Do this in mid February. Give Helen directions on what needs to be added/changed to the survey.

How to conduct the survey- Can it be on the Web, phone survey, handed out at the kickoff.

Who are we focusing the survey on? - the administrators or clinical directors, if Chris received this survey how would he answer it?

Chris feels it should be an administrative response- that information should reside with that individual because direct staff might answer differently.

Send out the survey and follow up with a phone call to gather more detail.

Mail individuals a password to access the web- using multiple methods

How can we tailor this to school providers, DOC, medical, social service.

Focus more on the trauma informed and less on the system of care questions. Core questions can get at the main system of care areas.

Points:

Focus on administrators

4 providers

keep system of care section but condensed

trauma informed section can be applicable to all

room for comments? "I don't know" category

not at the kickoff

Give back feedback last day of the month

Tina will categorize the list according to the four provider categories.

Roger Fallot- "self assessment and planning protocol

Chris made some suggestions about the Trauma Screening suggested incorporating lead in questions about trauma and we discussed the definition of "trauma informed". The invitation has a broader definition that can be incorporated.

Screening and Assessment Tools- Time frame should be when first child is enrolled in treatment.

Are the tools being selected for Tri County or the project. Jay-both.

Use the screening tools across the provider agencies.

Broad screening tool that anyone can use. Train the providers on how to use the tool. Can we decide on a few screening tools.

Categorize children so it can be scored.

Costs associated with some of the evaluations.

What are the tools we are looking for:

1. basic screening
2. more in depth of symptoms/specificity on the events-Finklehorn Juvenile Victimization

Clinical/EBP workgroup should review these assessments. Jay will pass this information onto Andy Cook for review.

Bring together the clinical and evaluation group for review. Pare down the number for Andy's group to review.

Sean

Cathy

Jay

Arabella

Youth and Family Coordinator

Enrollment needs to be defined. Chris can imagine the child already being enrolled in the system and the need to do the basic screening earlier than the start date.

Sean will show up with the screening tools and make them available prior to the Feb. meetings. Sean will apply agreed upon criteria to the current list to pare it down.

- cost

- validity/reliability
- child/family component

TISOC evaluation group will meet 2/27 1-2:30

IT/Data- waiting for MACRO, will probably wait til the last minute before providing us with this information.