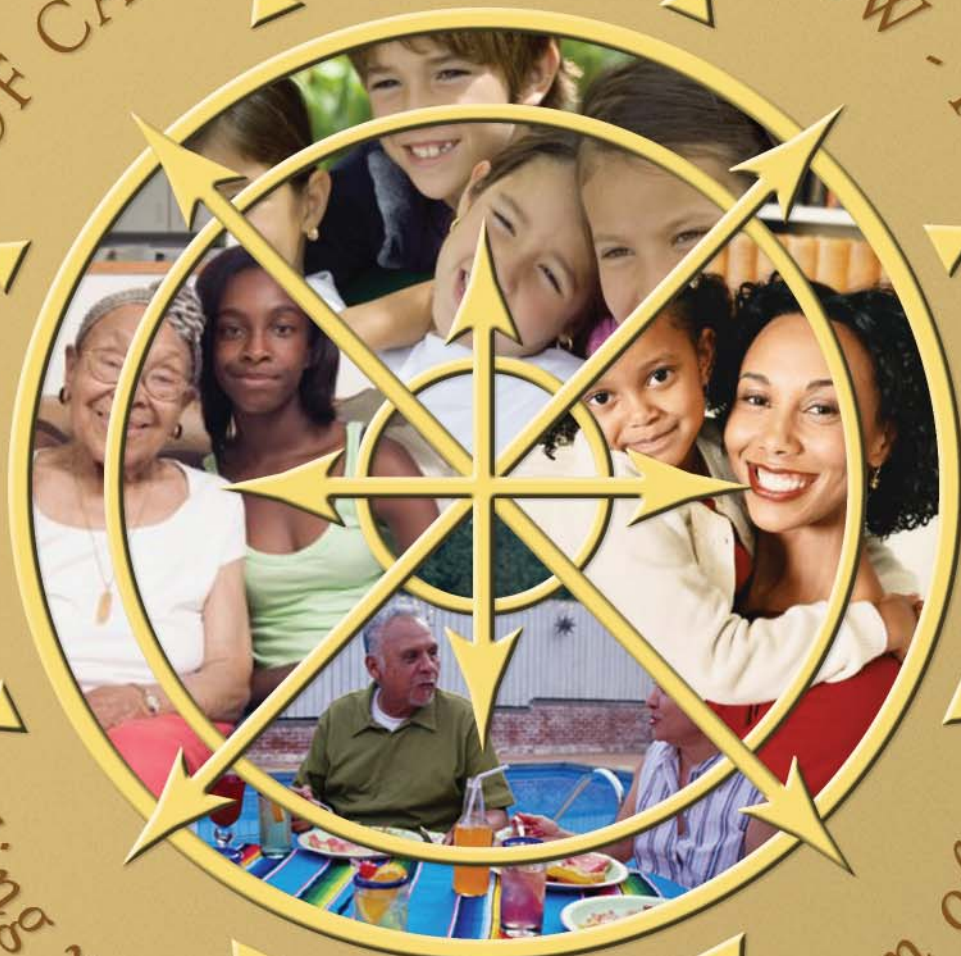


SYSTEM OF CARE PRACTICE REVIEW - REVISED

I.D. #

Reviewer Name



Finding your way in a local system of care

Site

Date



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services
www.samhsa.gov

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System of Care Practice Review

DEMOGRAPHIC INFORMATION

<p>1. Name of Child: _____</p> <p>2. Date of Review: _____ _____ _____ year month day</p> <p>3. Date of Birth: _____ _____ _____ year month day</p> <p>4. Child's age: _____</p> <p>5. Gender: Male ____ Female ____</p> <p>6. School Grade: _____</p> <p>7. Race:</p> <p>1. White Specify: _____</p> <p>2. African-American/Black Specify: _____</p> <p>3. Asian/Asian-American Specify: _____</p> <p>4. Pacific Islander Specify: _____</p> <p>5. Latino/Hispanic Specify: _____</p> <p> _____ Black</p> <p> _____ White</p> <p> _____ Other</p> <p>6. Native American Specify: _____</p> <p>7. Multi-Racial Specify: _____</p> <p>8. Child's language(s) child speaks, reads, and writes:</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>Primary Language: _____</p>	<p>9. Who makes up the child's immediate family? (circle ALL that apply)</p> <table style="width: 100%; border: none;"> <tr> <td>1. Mother</td> <td>5. Foster Mother</td> <td>9. Grandmother</td> </tr> <tr> <td>2. Father</td> <td>6. Foster Father</td> <td>10. Grandfather</td> </tr> <tr> <td>3. Stepmother</td> <td>7. Sister</td> <td>11. Other relative(s)</td> </tr> <tr> <td>4. Stepfather</td> <td>6. Brother</td> <td>12. Non-relative(s)</td> </tr> </table> <p>10. Language(s) spoken within the family: _____ _____</p> <p>11. Child's Primary Caregiver(s)</p> <p>1. Name: _____</p> <p>2. Relation to Child:</p> <table style="width: 100%; border: none;"> <tr> <td>1. Mother</td> <td>5. Foster Mother</td> <td>9. Grandmother</td> </tr> <tr> <td>2. Father</td> <td>6. Foster Father</td> <td>10. Grandfather</td> </tr> <tr> <td>3. Stepmother</td> <td>7. Sister</td> <td>11. Other relative(s)</td> </tr> <tr> <td>4. Stepfather</td> <td>6. Brother</td> <td>12. Non-relative(s)</td> </tr> </table> <p>3. Gender: Male ____ Female ____</p> <p>4. Race:</p> <p>1. White Specify: _____</p> <p>2. African-American/Black Specify: _____</p> <p>3. Asian/Asian-American Specify: _____</p> <p>4. Pacific Islander Specify: _____</p> <p>5. Latino/Hispanic Specify: _____</p> <p> _____ Black</p> <p> _____ White</p> <p> _____ Other</p> <p>6. Native American Specify: _____</p> <p>7. Multi-Racial Specify: _____</p> <p>5. Primary Language: _____</p> <p>Other language(s) PC speaks, reads, and writes:</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p>	1. Mother	5. Foster Mother	9. Grandmother	2. Father	6. Foster Father	10. Grandfather	3. Stepmother	7. Sister	11. Other relative(s)	4. Stepfather	6. Brother	12. Non-relative(s)	1. Mother	5. Foster Mother	9. Grandmother	2. Father	6. Foster Father	10. Grandfather	3. Stepmother	7. Sister	11. Other relative(s)	4. Stepfather	6. Brother	12. Non-relative(s)
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<p>12. Service Systems Utilized: (circle all that apply)</p> <ul style="list-style-type: none"> • Mental Health • Other _____ • Child Welfare • Juvenile Justice • Educational 	<p>OPTIONAL</p> <p>16. Method of payment for services: (circle all that apply)</p> <ol style="list-style-type: none"> 1. Private Pay 2. Private Insurance 3. Medicaid 4. State financial support 5. Sliding scale 6. County/Local financial support 7. Other: _____
<p>13. Treatment/Intervention: (circle all that apply)</p> <ol style="list-style-type: none"> 1. Special education classes 2. Psychological assessment 3. Individual counseling 4. Family counseling 5. Group counseling 6. Alcohol or drug counseling 7. Psychiatric medication 8. Medical treatment: _____ 9. Psychiatric Hospitalization 10. Recreational activities 11. Correctional or juvenile delinquency services 12. Case management 13. Other: _____ 	<p>17. Clinical Diagnosis:</p> <p>Axis I:</p> <p>Axis II:</p> <p>Axis III:</p> <p>Axis IV:</p> <p>Axis V: GAF =</p>
<p>14. Length of treatment/intervention with agency participating in the study:</p> <ol style="list-style-type: none"> 1. 1-4 months 2. 5-12 months 3. 13-19 months 4. 20+ months 	
<p>15. Case is currently: Open___ Closed___</p>	



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<p>18. Formal Provider Interviewed</p> <p>1. Name: _____</p> <p>2. Relation to Child:</p> <ol style="list-style-type: none"> 1. Case manager 2. Individual therapist 3. Family therapist 4. Group therapist 5. Psychiatrist 6. Regular ed. teacher 7. Special ed. teacher 8. Other: _____ <p>3. Gender: Male__ Female__</p> <p>4. Race: (circle all that apply)</p> <ol style="list-style-type: none"> 1. White Specify:_____ 2. African-American/Black Specify:_____ 3. Asian/Asian-American Specify:_____ 4. Pacific Islander Specify:_____ 5. Latino/Hispanic Specify:_____ <li style="padding-left: 20px;">___ Black <li style="padding-left: 20px;">___ White <li style="padding-left: 20px;">___ Other 6. Native American Specify:_____ 7. Multi-Racial Specify:_____ <p>Primary Language: _____</p> <p>5. Other language(s) this person speaks, reads, and/or writes:</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p>	<p>19. Informal Helper Interviewed</p> <p>1. Name: _____</p> <p>2. Relation to Child:</p> <ol style="list-style-type: none"> 1. Relative 2. Family Friend 3. Neighbor 4. Clergy 5. Coach 6. Other: _____ <p>3. Gender: Male__ Female__</p> <p>4. Race: (circle all that apply)</p> <ol style="list-style-type: none"> 1. White Specify:_____ 2. African-American/Black Specify:_____ 3. Asian/Asian-American Specify:_____ 4. Pacific Islander Specify:_____ 5. Latino/Hispanic Specify:_____ <li style="padding-left: 20px;">___ Black <li style="padding-left: 20px;">___ White <li style="padding-left: 20px;">___ Other 6. Native American Specify:_____ 7. Multi-Racial Specify:_____ <p>Primary Language: _____</p> <p>5. Language(s) this person speaks, reads, and/or writes:</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p> <p>_____ <input type="checkbox"/> Speaks <input type="checkbox"/> Reads <input type="checkbox"/> Writes</p>
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System of Care Practice Review

Case History Summary - OPTIONAL: This section provides a general guide for gathering information to complete a case history. The template is available for use if you choose. In addition to documenting relevant case information on the following pages, consider writing a brief narrative based on your review of the child's file. This history would summarize major events, people involved, outcome of intervention, child's present status, etc. Someone unfamiliar with this case should be able to read your summary and get a picture of what has happened with this child since he/she entered a particular system.

EDUCATION

1. Educational Labels/Conditions: <ul style="list-style-type: none"> Do these qualify the child for school-based services? 	2. Type of school child is currently attending: (e.g. public, non-public, private, parochial, alternative, residential)	3. Current educational resources/supports provided and related outcomes:
4. IEP? Yes__ No__ Date: Goals:		
5. Other relevant info: Consider: <ul style="list-style-type: none"> Past school placements / services and outcomes History of truancy, suspensions, expulsions and drop-out Current educational functioning 		

System of Care Practice Review

MENTAL HEALTH

6. Current Diagnoses:

7. Past Diagnoses:

8. Interventions and Outcomes:

9. Other relevant info:

Consider:

- Crises and resolutions
- Treatment settings & child/family response
- Current mental health functioning



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JUVENILE JUSTICE

<p>10. Current Juvenile Justice Involvement:</p>	<p>11. Other relevant info: Consider arrest history:</p> <ul style="list-style-type: none">• Dates• Reason(s) for arrest(s)• Found guilty or innocent• Sentencing (e.g. detention, fines, community service, probation)• Compliance with sentencing
--	---

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CHILD WELFARE

12. Current placement:

Start Date:

Type:

Other Residents:

13. Current child welfare involvement:

14. Other relevant info:

Consider:

- Previous placements / related adjustment
- Reasons for placements
- Current functioning related to CW involvement



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OTHER SERVICE SYSTEMS

15. Condition(s) being addressed:

16. Current services provided:

17. Other relevant info:

Consider:

- Past services provided and related outcomes
- Current functioning



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TIMELINE

18. Consider documenting:
- Needs (when emerged/increased and when decreased/resolved)
 - Symptoms or diagnoses
 - Services and supports provided
 - Schools attended
 - Major life events (births/deaths of family or friends, moves)

Child's Age
when
Problems
Emerged

Child's
Current
Age



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System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

General Instructions: For the document review, read through the child's records (including service plans, case notes, and other forms contained in the chart) to find evidence to answer the following questions.

Basic Information:
Is there Documentation of an Assessment ? YES ___ NO ___ Date of Assessment: _____

ASSESSMENT: CONCERNS/NEEDS

<p>1. Primary Concerns / Needs of Child and Family identified in assessments and service plan.</p>	<p>1a. Evidence of Concerns / Needs of Child and Family: (Check all domains with evidence).</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Cultural/Spiritual</td> <td><input type="checkbox"/> Mental Health</td> </tr> <tr> <td><input type="checkbox"/> Education</td> <td><input type="checkbox"/> Residential</td> </tr> <tr> <td><input type="checkbox"/> Family</td> <td><input type="checkbox"/> Safety</td> </tr> <tr> <td><input type="checkbox"/> Financial</td> <td><input type="checkbox"/> Social/Recreational</td> </tr> <tr> <td><input type="checkbox"/> Legal</td> <td><input type="checkbox"/> Substance Abuse</td> </tr> <tr> <td><input type="checkbox"/> Medical/Self-care</td> <td><input type="checkbox"/> Vocational</td> </tr> </table>	<input type="checkbox"/> Cultural/Spiritual	<input type="checkbox"/> Mental Health	<input type="checkbox"/> Education	<input type="checkbox"/> Residential	<input type="checkbox"/> Family	<input type="checkbox"/> Safety	<input type="checkbox"/> Financial	<input type="checkbox"/> Social/Recreational	<input type="checkbox"/> Legal	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Medical/Self-care	<input type="checkbox"/> Vocational
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<input type="checkbox"/> Medical/Self-care	<input type="checkbox"/> Vocational												

ASSESSMENT: STRENGTHS	ASSESSMENT: METHOD
------------------------------	---------------------------

<p>2. Evidence of Strengths of the Child and Family:</p>	<p>3. What is the method of Assessment?</p> <ul style="list-style-type: none"> • Intake Report based on semi-structured interview • Inventory Checklist • Questionnaire completed by Child / Family • Other: (please specify)
--	---



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SUMMARY OF GOALS, SERVICES AND SUPPORTS*

- Goals: 1. _____
 2. _____
 3. _____
 4. _____
 5. _____

Formal Services/Supports:

Type of Service/Support (e.g. individual, family or group therapy, case management, psychiatric med. management, self-help / nutritional counseling)	Name of Service Provider (circle primary service coordinator)	Frequency	Service Organization	Service Setting (e.g. home school, outpatient clinic, day treatment, inpatient hospital, RTC, juvenile detention center)	Participant Involvement (List people, then circle family members)	Start Date	X= Service is dis-continued	Is this Service Identified on Service Plan? (X = yes)
1.								
2.								
3.								
4.								
5.								
6.								
7.								

Informal Services/Supports:

Type of Service/Support (e.g. sports, hobbies, clubs, extracurricular activities, religious activities or other community based activities)	Name of Informal Helper	Frequency	Service Organization	Service Setting (e.g. home school, outpatient clinic, day treatment, inpatient hospital, RTC, juvenile detention center)	Participant Involvement (List people, then circle family members)	Start Date	X= Service is dis-continued	Is this Service Identified on Service Plan? (X = yes)
1.								
2.								
3.								

*Tear out this sheet to refer to during interviews



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Basic Information:
 Is there a Written Service Plan? YES ___ NO ___
 Date of Current Service Plan _____

CHILD & FAMILY GOALS	CHILD & FAMILY NEEDS
4. Are any additional goals for the child and family documented in the records?	5. Are there any additional needs of the child and family?

GOALS APPROPRIATE FOR CHILD	GOALS APPROPRIATE FOR FAMILY
6. Do the goals reflect the child's needs? Yes___ No___ Do the goals incorporate the child's strengths? Yes___ No___ Notes:	7. Do the goals reflect the family's needs? Yes___ No___ Do the goals incorporate the family's strengths? Yes___ No___



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1B. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

Basic Information:
 Evidence of a planning meeting(s) to develop plan? YES ___ NO ___ Date(s) of meeting(s) _____
 Parent/legal guardian signature on plan? YES ___ NO ___
 Indication that parent/legal guardian received copy of plan? YES ___ NO ___

FAMILY PARTICIPATION

<p>8. List family members present at planning meeting (s):</p>	<p>9. Evidence of child/family needs in planning:</p>
<p>10. Evidence of child/family strengths in planning and service delivery:</p>	<p>11. Evidence of child & family participation, input, and influence in plan:</p>



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1C. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

Basic Information:
 Individual responsible for providing case management services _____
 Start date of case manager's work with child/family _____
 Date of most recent meeting between case manager & child/family _____

WORKING RELATIONSHIP BETWEEN CM & FAMILY	CM COORDINATES SERVICES AND SUPPORTS
12. Evidence of communication between case manager and: <ul style="list-style-type: none"> • family • formal providers • informal providers 	13. Individuals/agencies included in service planning meetings/team: <ul style="list-style-type: none"> • Other evidence of efforts to coordinate services:

CM ENSURES PLANS/SUPPORTS RESPOND TO EMERGING AND CHANGING NEEDS	
14. Has the plan been updated since originally written? Yes__ No__ Date of next scheduled Review/ Update: _____	15. List Plan Review(s) / Update(s) within past year. <i>(If no Review/Update within past year, describe most recent Review/Update)</i> <ul style="list-style-type: none"> • Date(s) _____ • Nature of Review(s)/Update • Participants in plan review & update

System of Care Practice Review

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers. needs of the child and family determine the types and mix of services provided.

2A. EARLY INTERVENTION - Services are provided in a timely manner, before problems escalate, to prevent future emotional disturbances, maladaptive behaviors or serious negative outcomes. Services are provided in early childhood when risks are identified and/or as soon as problems emerge.

16. How long did it take for the current providers to assess and clarify the family's initial concerns and needs?

- Did the people working with the family figure out what they needed right away, or did it take them a while?

17. Did they identify additional concerns or needs?

Yes__ No__

How long did it take them to identify these additional concerns or needs?

- Did any of the providers suggest additional services or supports to address these concerns or needs?
- When did they make these suggestions?
- Was the family receptive?

18. Once the providers clarified the family's needs, how long did it take before the child and family started getting help?

19. Did they identify additional concerns or needs?

Yes__ No__

- What would be different if the family received help sooner?



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System of Care Practice Review

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers. needs of the child and family determine the types and mix of services provided.

2B. ACCESS TO SERVICES - The child and family have access to a comprehensive range of services that are flexible enough for the child and family to integrate the services into their daily routines.

CONVENIENT TIMES	CONVENIENT LOCATIONS
<p>20. Are the times when the child and family meet with the various service providers convenient for the child and family? Yes__ No__ Explain:</p>	<p>21. Are the locations of the meetings and services with the providers convenient for the child and family? Yes__ No__ Explain:</p>
	<p>22. Does the child and family need any support to increase access to services? Yes__ No__ Explain:</p> <p><i>If yes: Does the family get the support they need?</i> Yes__ No__ Explain:</p>



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System of Care Practice Review

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2B. ACCESS TO SERVICES - The child and family have access to a comprehensive range of services that are flexible enough for the child and family to integrate the services into their daily routines.

APPROPRIATE LANGUAGE

23. What is the primary language of the child and family?

Child:

Family:

24. What language do the people who help the family speak when they meet with the family?

- *If the language spoken is not the child or family's primary language: What are the reasons for using this language (instead of the family's language)?*

25. Is the written information provided to the child and family in their primary language?

Yes__ No__

Explain:



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System of Care Practice Review

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers. needs of the child and family determine the types and mix of services provided.

2C. MINIMAL RESTRICTIVENESS - The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.

2D. INTEGRATION AND COORDINATION - There is coordination among providers, continuity of services and integration of components of the service system the child and family can easily move within and through the system.

MINIMAL RESTRICTIVENESS

<p>26. Are the child and family comfortable spending time in the places where they receive services?</p> <p>Yes__ No__</p> <p>Explain:</p>	<p>27. To what extent are the services for the child and family provided in the least restrictive, while also most appropriate environment(s) possible?</p> <ul style="list-style-type: none"> • Are the service environments carefully matched to the family's needs and strengths, or are they limited to whatever is available?
--	---

INTEGRATION AND COORDINATION

<p>28. Does it seem like all of the people you've mentioned are working together to help the child and their family?</p> <p>Yes__ No__</p> <p>Explain:</p>	<p>29. How do the different service providers integrate and coordinate their work with each other?</p> <ul style="list-style-type: none"> • Who gets involved in service planning and how do they participate? • Do the various service providers and informal helpers directly communicate with one another between service plan updates? • How are the child and family involved in the communication that occurs among and between the different service providers/informal helpers?
<p>30. Does it see, like there is a smooth and seamless process to link the child and family with additional services as needs arise?</p> <p>Yes__ No__</p> <p>Explain:</p>	



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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

- 3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.
- 3B. RESPONSIVENESS - Services are adapted to the cultural context of the child and family.
- 3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the agencies and system operate, the rules and regulations and what is expected of them

AWARENESS OF CHILD/FAMILY'S CULTURE	AWARENESS OF PROVIDERS' CULTURE AND CULTURAL DYNAMICS
31. Evidence that child/family's culture was considered when developing plan:	32. Evidence that service providers' culture was considered when developing plan:
	33. Evidence that cultural dynamics were considered when developing plan:
RESPONSIVENESS	AGENCY CULTURE
34. What language was plan written in? • Evidence that plan was translated/interpreted for family	36. Evidence that family has been informed about the culture & expectations of each agency/organization represented on service/treatment team:
35. Evidence that services were modified to be more attuned to family's culture:	

System of Care Practice Review

Domain 4: Impact The impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.

37. Evidence of progress toward goals:

Yes__ No__

Explain:

38. Evidence that primary Caregiver is better able to manage child's problems:

Yes__ No__

Explain:

39. Evidence of improvements in the child or family's situation:

Yes__ No__

Explain:



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System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Thanks for agreeing to participate in this review. I'm going to ask you a number of questions about the services that your child and family are currently receiving. I will ask you to describe the service planning and delivery processes, and also to share your opinions about the services and supports that are being provided. In the end, we will talk about the successes that your child and family has experienced so far. Do you have any questions?
(Answer any questions asked by the informant)

Okay, then, first, I'd like to get a sense of what makes your child and family unique.

STRENGTHS: CHILD	STRENGTHS: FAMILY
1. Tell me a little bit about your child's strengths. <ul style="list-style-type: none"> • What do you like best about your child? • What are his/her interests? • What does he/she do well? 	2. Tell me a little bit about your family's strengths. <ul style="list-style-type: none"> • What do you like best about your family? • What are its strengths?
CONCERNS: CHILD AND FAMILY	NEEDS: CHILD AND FAMILY
3. Do you have any current concerns about your child or family? <i>If no concerns are reported ask:</i> <ul style="list-style-type: none"> • What were the concerns that caused you to get help for your child and family? 	4. What are your child and family's current needs? <i>If no needs are reported ask:</i> <ul style="list-style-type: none"> • What needs did your child and family need when you first started getting help?



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ASSESSMENT METHOD

<p>5. Do the people who are providing your child and family with services and supports know about the strengths, concerns and needs that you have just described?</p> <ul style="list-style-type: none"> • How did they find out about them? • Did your child and family receive a thorough assessment or inventory? <p><i>Probe for formal/informal assessment across full range of life domains, to include:</i></p>	<p>6. When we think about a thorough assessment of all the areas of a child or family's life, we think about all of these areas:</p> <p><i>(Hand primary caregiver List of Assessment Areas on page 112)</i></p> <p>Did the assessment process to identify your child and family's needs and strengths seem to cover:</p> <p><input type="checkbox"/> all of these areas <input type="checkbox"/> some, but not all areas or <input type="checkbox"/> just a few areas</p> <p>Explain:</p>
--	--



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Florida Mental Health Institute

System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

SUMMARY OF CURRENT GOALS AND SERVICES	IF NO EVIDENCE OF INFORMAL HELPERS
<p><i>For the following section, review the Summary of Goals, Services & Supports (page 11) that was created during the Document Review and revise as needed, based on feedback from primary caregiver.</i></p> <p><i>Consider the following questions to guide the review:</i></p> <p>7. Let's review this summary together to make sure it accurately reflects your understanding of the current goals, services and supports that are being provided to your child and family. Are these the goals your child and family have set?</p> <ul style="list-style-type: none"> • Are any of the listed services/supports not actually being delivered as described? • Are there any additional formal services that are not reflected in this summary? • Are there any informal or community supports that are not reflected in this summary? <p><i>Record additional services and supports on pg. 11.</i></p>	<p><i>If no informal helpers are identified on the Summary of Goals, Services and Supports, ask:</i></p> <p>9. Have you been asked if there are relatives, friends or neighbors who help or might be able to help your child and family? Yes___ No___</p> <ul style="list-style-type: none"> • Do you want to involve these people in the formal services that your child and family are receiving? Yes___ No___ • Have these people been contacted and asked to help out? Yes___ No___ • Are any of these informal helpers involved in the formal services that your child and family receive? Yes___ No___ • In which services is each informal helper involved?
IF NO EVIDENCE OF A FORMAL PLAN	<ul style="list-style-type: none"> • <i>If no informal helpers are involved:</i> What are the reasons that informal helpers are not involved in the formal services?
<p>8. <i>If there is no evidence of a formal service plan in the records, ask:</i></p> <ul style="list-style-type: none"> • Is there a plan that identifies specific services and supports to address specific goals? Yes___ No___ • Are all the providers (including mental health, school, medical and others) working from the same plan? Yes___ No___ • Are plans coordinated to reflect family and system goals?? Yes___ No___ 	

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Now let's talk about how the service plan relates to the needs and strengths you described earlier.

SERVICE GOALS

10. Do the service plan goals reflect the needs that you identified for your child and family? (Reference goals on pg. 11 and restate needs if Primary Caregiver forgets them)

Yes__ No__

If yes, how?

If no, what is missing?

11. Can you tell from these goals what your child and family's strengths are?
(*Restate strengths if primary caregiver forgets*)

Yes__ No__

Explain:

11a. If the strengths are not formally incorporated into the goals and service plan, are they acknowledged in other ways?

Yes__ No__

Explain:

For summative ratings, consider goals listed on page 11.

SERVICE TYPES

Now let's focus on the types of services that your child and family are receiving. (Refer to the Summary of Goals, Services & Supports that was created during the Document Review and emphasize "service type" column.)

12. Do you think your child and family are getting the kind of help you need right now?

Yes__ No__ • What would you change?

SERVICE INTENSITY

13. Do you think the **current combination** of services and supports is too intense, not intense enough, or just right for your child and family?

__Too intense __Not intense enough __Just right

Explain:

14. Do you think the **amount of interaction** that service providers have with your child and family is too intense, not intense enough, or just right?

__Too intense __Not intense enough __Just right

Explain:



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1B. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

Read aloud to Informant: Now let's talk about the service planning process.

FAMILY PARTICIPATION

15. First, who are the people and agencies involved in the service planning process? List:

15a. How are your **child and family involved** in the service planning process?

15b. Over the last year, have you regularly attended meetings to talk about your child's needs, and to plan with primary case coordinators and other providers? Yes__ No__ Explain:

- Have your child and family been involved in service plan reviews and updates since the initial plan?
- Are you asked what needs to be changed in the plan?
- Does the plan get updated promptly as your child and family's needs change?
- How comfortable do you feel when asking questions at these meetings?
- Do you feel like the people attending these meetings truly understand and are respectful of you and your child?

15c. In your opinion, do your child and family seem to directly influence the final, formal plan that is developed and the goals that are set? Yes__ No__ Explain:

- How do you influence the plan and goals?
- Are your wishes included in the final, formal plan?
- Is your child asked about what he/she thinks is best for him/her?
- Were you able to choose services for your child and family?
Are there any good examples of this?

15d. Do your child and family understand the plan? Yes__ No__ Explain:

- Was the plan explained to your child and family?
- Did you sign the plan?
- Was your family provided with a copy of the plan in the language you prefer?
Are there any good examples of this?

15e. Are your child and family in agreement with and enthusiastic about the plan? Are there any good examples of this? Yes__ No__ Explain:

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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1C. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

Read aloud to Informant: Now let's discuss any help you receive to coordinate all of the services. Is there a specific person responsible for helping you get and coordinate the services for your child and family?

Who is this person? _____ How long have you been working with this person? _____

16. When was the last time this person met with your child and family?

17. Is this person helpful in coordinating the various services that your child and family receive?

18. Does this person have good working relationships with the other formal service providers and informal helpers who are involved with your child and family?

Yes___ No___

Please describe:

19. Does this person help to change the plan when you need new or different kinds of help?

Yes___ No___

- If yes, in what ways?
- If no, what more could he/she do?

20. Before this person, did anyone else help your coordinate services?

If yes: How helpful were they?

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DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

2A. EARLY INTERVENTION - Services are provided in a timely manner, before problems escalate, to prevent future emotional disturbances, maladaptive behaviors or serious negative outcomes. Services are provided in early childhood when risks are identified and/or as soon as problems emerge.

Read aloud to Informant: Let's talk about how your child and family were linked up with services and supports. For this section, please think about the period of time beginning when anyone from the current group of service providers first started working with your child and family.

21. How long did it take for the current providers to assess and clarify your family's initial concerns and needs?

- Did the people working with your family figure out what you needed right away, or did it take them a while?

22. Did they identify additional concerns or needs? Yes__ No__

- How long did it take them to identify these additional concerns or needs?
- Did any of the providers suggest additional services or supports to address these concerns or needs?
- When did they make these suggestions?
- Was your family receptive?

23. Once the providers clarified your needs, how long did it take before your child and family started getting help?

24. Do you think your child and family would be better off if you had received help sooner from systems of providers in the community? Yes__ No__

- What would be different if you received help sooner?



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DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

2B. ACCESS TO SERVICES - The child and family have access to a comprehensive range of services that are flexible enough for the child and family to integrate the services into their daily routines.

Read aloud to Informant: I have a few questions about access to all of these different services (*list the service types again here, page 11*).

CONVENIENT TIMES	CONVENIENT LOCATIONS
<p>25. Are the times when your child and family meet with the various service providers convenient for your child and family? Yes__ No__ Explain:</p>	<p>26. Are the locations of the meetings and services with your providers convenient for your child and family? Yes__ No__ Explain:</p> <p>27. Does your child and family need any support to increase your access to services? Yes__ No__ Explain:</p> <p><i>If yes:</i> Do you get the support you need? Yes__ No__ Explain:</p>

APPROPRIATE LANGUAGE

<p>28. What is the primary language of your child and family? <i>Child:</i> <i>Family:</i></p>	<p>30. Is the written information provided to your child and family in your primary language? Yes__ No__ Explain:</p>
<p>29. What language do the people who help your family speak when they meet with you? • <i>If the language spoken is not the child or family's primary language:</i> What are the reasons for using this language (<i>instead of your family's language</i>)?</p>	



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2C. MINIMAL RESTRICTIVENESS - The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.

2D. INTEGRATION AND COORDINATION - There is coordination among providers, continuity of services and integration of components of the service system so that the child and family can easily move within and through the system.

MINIMAL RESTRICTIVENESS

<p>31. Are you comfortable spending time in the places where your child receives services?</p> <p>Yes__ No__</p> <p>Explain:</p>	<p>32. To what extent are the services for your child and family provided in the least restrictive, while also most appropriate environment(s) possible?</p> <ul style="list-style-type: none"> • Are the service environments carefully matched to your family's needs and strengths, or are they limited to whatever is available?
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INTEGRATION AND COORDINATION

33. Does it seem like all of the people you've mentioned are working together to help your child and your family?

Yes__ No__

Explain:

<p>34. How do the different service providers integrate and coordinate their work with each other?</p> <ul style="list-style-type: none"> • Who gets involved in service planning and how do they participate? • Do the various service providers and informal helpers directly communicate with one another between service plan updates? • How are your child and family involved in the communication that occurs among and between the different service providers/informal helpers? <p>Explain:</p>	<p>35. Does it seem like there is a smooth and seamless process to link your child and family with additional services as needs arise?</p> <p>Yes__ No__</p> <p>Explain:</p>
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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

Read aloud to Informant: The next questions relate to culture, meaning the ideas, values, routines, lifestyles, and traditions that you have that are based on where you have lived and how you have been raised.

AWARENESS OF CHILD/FAMILY'S CULTURE

<p>36. What is your culture?</p> <ul style="list-style-type: none"> • What does your family believe in? • What are your family traditions and celebrations? • Who do you think makes up a family (e.g. mother, father, siblings, grandparents, godparents)? • What does your family think makes a person healthy or sick? 	<p>37. Do the people working with your child and family seem to understand your culture, as you just described it? Yes__ No__</p> <p>Explain:</p>
<p>38. Do the people helping your family understand what things are like in your neighborhood?</p>	<p>39. Do the people working with your child and family seem to recognize and respect how your cultural background influences your preferences, decisions and participation? Yes__ No__</p> <p>Explain:</p>

AWARENESS OF PROVIDERS' CULTURE

AWARENESS OF CULTURAL DYNAMICS

<p>40. Do your providers seem to recognize how their own cultural background influences their understanding, recommendations and actions? Yes__ No__</p> <p>Explain:</p>	<p>41. Do you believe they are aware of how cultural differences and similarities can influence how people get along and work together? Yes__ No__</p> <p>Explain:</p>
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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.

3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

3D. INFORMAL SUPPORTS - The family's informal or natural sources of support are included in service planning and delivery. Service providers are knowledgeable about informal resources that may be used on behalf of the child and family and are able to access them.

SENSITIVITY AND RESPONSIVENESS

42. Do they seem to take your cultural background and identity into account when planning and providing services and supports for your child and family?
 Yes__ No__
 Explain:

AGENCY CULTURE

43. Does your family understand how the different agencies and organizations work (e.g. hours, regulations, service guidelines)?

- Have you received any help in order to better understand and navigate the various agencies and organizations?
 Yes__ No__ Explain:
- Do you think your participation or decisions would be any different if your knowledge about the agencies and how they work was different?
 Yes__ No__ Explain:

INFORMAL SUPPORTS

44. Do all of the people who help your family know about all of the different activities that kids your child's age can get involved with in your area? (This includes things like sports, clubs, churches/temples/mosques, and after-school activities.)
 Yes__ No__
 Explain:

45. Are they able to help you sign up for these activities?
 • If no, what makes it tough for them to help you get connected with these activities?
 Yes__ No__
 Explain:

For summative ratings, also see #28 - #30 (plans and services provided in preferred language).



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Domain 4: Impact The impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.

Read aloud to Informant: The final questions relate to the impact that services and supports have had on your child and your family. For the next 6 questions, please use the following 1 – 5 rating scale:

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

46. My child has made progress towards meeting his/her goals.

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Explain:

47. My family has made progress towards meeting its goals.

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Explain:

48. I am better able to deal with my child's problems.

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Explain:

49. Services have improved my child's overall situation.

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Explain:

50. Services have improved my family's overall situation.

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Explain:



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Domain 4: Impact The impact that services and supports have had on this child and family.

4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

<p>51. I am satisfied with the coordination of services in this case.</p> <p>1 2 3 4 5 <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> Not at all A Little Some Pretty Much Very Much</p> <p>Explain:</p>	<p>52. What do you think has been most helpful about the services and supports provided to your child and family?</p>
<p>53. What do you think has been least helpful about the services and supports provided to your child and family?</p>	<p>54. Is there anything else you think would be important for me to know about your child and family or the services you have been receiving?</p> <ul style="list-style-type: none"> • Is there anything you think your community should know about what kids and families who live here need? • What is working and what is not working for kids and families who live in your community?
<p><i>For summative ratings, also see questions re: Service Type and Intensity (1A), Family Involvement (1B), Access to Services (2B), and Cultural Responsiveness (3B)</i></p>	<p>Thanks for taking time to talk with me! Is there anything you would like to ask me?</p>



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1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Thanks for agreeing to talk with me today. I'm going to ask you some questions about your family, and the different activities that you and your family go to, and the different kinds of help that you get. I will ask you to describe different activities and to share your opinions. This will help us to understand how kids/teenagers think and feel about the activities in the area where they live and go to school. Then, hopefully the people who are in charge of these activities can make them as helpful as possible.

There are no right or wrong answers to these questions. We would like to know whatever you honestly think or feel. Some of these questions might be too detailed for you to answer, or they might be about topics that you don't know about or don't have opinions about. If that happens, just let me know, and we will move on to the next section. Do you have any questions before we begin? *(Answer any questions asked by the informant)*

Okay, then, first I'd like to get a sense of what makes you and your family special.

ASSESSMENT: STRENGTHS	
<p>1. Tell me a little bit about yourself.</p> <ul style="list-style-type: none"> • What you like best about yourself? • What do you like to do? What are you good at? • What do other people like about you and think you are good at? 	<p>2. Tell me a little bit about your family.</p> <ul style="list-style-type: none"> • What you like best about your family? • What is good about your family?
ASSESSMENT: CONCERNS	ASSESSMENT: NEEDS
<p>3. Do you have any worries or concerns about your family?</p> <ul style="list-style-type: none"> • Do you have any worries or concerns about yourself? • Does anyone else in your family have concerns about you or your family? 	<p>4. What kinds of help do you think that you and your family need?</p> <p><i>If no needs are reported, ask:</i> What did you and your family need when you first started getting help?</p>



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ASSESSMENT: METHOD - FORMAL	INFORMAL HELPERS
<p>5. I talked with your (<i>primary caregiver</i>), and he/she told me about the different people who help you and your family. He/she told me about (<i>list the names of the service providers and informal helpers who are listed on the Summary of Goals, Services & Supports, pg. 11</i>)</p> <p>Do these people know about all the things you just told me about you and your family? Yes__ No__</p> <p>Do they know that (<i>reference child's answers regarding child/family strengths, concerns & needs</i>)? Yes__ No__</p> <ul style="list-style-type: none"> If yes, how did they find out about all of these things? 	<p>6. Other than these people, are there other people who help your family?</p> <ul style="list-style-type: none"> Are there any relatives or friends or neighbors who help you and your family? Yes__ No__ Is there someone in your life who you feel close to and go to for help when you need it? Yes__ No__ If yes: <ul style="list-style-type: none"> Who? What is/are their name(s)? What kinds of things do/does (<i>name(s) of identified informal helper(s)</i>) help you with? Do you want to include these people in the other help you get, like your (<i>list several of the formal services & supports the child/family receive</i>)? <p>6a. Are they included in the help you get? Yes__ No__</p> <ul style="list-style-type: none"> If no informal helpers are involved: What are the reasons that they are not included?



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1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Let's talk about the different kinds of help that you and your family get. (Refer to the "goals" and "service type" column on the Summary of Goals, Services & Supports. List the services and supports the child & family receive. For a younger child (under 11 years), make a picture with a stick figure to represent each service provider. List the provider's name and the type of service below each stick figure. Keep this picture in front of the child for the remainder of the interview.)

SERVICE GOALS

<p>7. These are the goals that are written in your plan: <i>(Read goals aloud to child).</i></p> <p>Do you think these are the right goals for you and your family? Yes__ No__</p> <p>Explain:</p>	<p>8. Can you tell from these goals what your strengths are? Yes__ No__</p> <p>Explain:</p> <p>8a. Are there other ways your strengths are noticed by the people helping you? Yes__ No__</p> <p>Explain:</p>
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SERVICE TYPE

SERVICE INTENSITY

<p>9. These are the types of services written in your plan: <i>(List service types)</i> Is that right? Do you think you and your family getting the kind of help you need right now?</p> <ul style="list-style-type: none"> • <i>If yes:</i> Is there anything you would change? • <i>If no:</i> What would you change? 	<p>10. Do you think that your family gets too much help, not enough help, or just the right amount of help? __too much help __not enough help __just right</p> <p>Explain:</p>
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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family dictate the types and mix of services provided.

1B. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

Read aloud to Informant: Now let's talk about the service planning process. Do you know about a plan that _(name of case manager)_ organizes, that explains your goals and explains the different kinds of help for you and your family? *If no: Skip ahead to Question #14*

FAMILY PARTICIPATION

11. Do you and your family ever attend planning meetings with _(name of primary case/care coordinator)_ and some of these other people who help your family?

(Refer to drawing of service providers or Summary of Goals, Services and Supports.) Yes__ No__

If yes:

- Do you feel like it is okay for you to ask questions at these meetings?
- Do you feel like the people attending these meetings respect you and your family?

Explain:

12. Do you and your family have a say in the final plan and the goals that are set? Yes__ No__

- Are your wishes included in the final plan?
- Are your (primary caregiver's) wishes included in the plan?
- Are you able to choose the kinds of help you want?

Explain:

13. Does the plan make sense to you and your family?

- Was the plan explained to you and your family?
- Do you and your family agree with the plan?

Explain:



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<p>DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family dictate the types and mix of services provided.</p>	
<p>1C. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.</p>	
<p>Read aloud to Informant: I understand that (<i>name of case manager</i>) is one of the people who helps you. When was the last time (<i>name of case manager</i>)_ met with you? _____. How often do you see (<i>name of case manager</i>) ? _____.</p>	
<p>14. Do you know why you meet with (name of primary case/care coordinator) Explain:</p>	<p>15. What kinds of things do you and (<i>name of primary case/care coordinator</i>) talk about during your visits?</p> <ul style="list-style-type: none"> • Is (name of primary case/care coordinator) easy to understand? • Does (name of primary case/care coordinator) seem to understand what you are talking about?
<p>CM COORDINATES SERVICES AND SUPPORTS</p>	
<p>16. Do you think (<i>name of primary case/care coordinator</i>) is able to help your family organize all the help that you get and all of your activities? Yes__ No__ Explain:</p>	<p>17. How does (<i>name of primary case/care coordinator</i>) get along with, and work with, the other people who help your family? (Refer to drawing of service providers or Summary of Goals, Services and Supports.) Yes__ No__ Explain:</p>
<p>CM ENSURES PLANS/SUPPORTS RESPOND TO EMERGING AND CHANGING NEEDS</p>	
<p>18. Does (<i>name of primary case/care coordinator</i>) ask for your opinion about what kind of help you need? Yes__ No__ Explain:</p>	<p>19. Does (<i>name of primary case/care coordinator</i>) help to change the plan when you need new or different kinds of help? • If yes, in what ways? Yes__ No__ Explain:</p>

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20. Did the people working with you and your family figure out what you needed right away, or did it take them a while?

21. Once they knew what you needed, did it take a short or long time to get you help?

22. Do you think that you and your family would be better off if you had received help faster?
• What would be different if you received help sooner?



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<p>DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.</p>	
<p>2C. MINIMAL RESTRICTIVENESS -</p>	<p>The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.</p>
<p>2D. INTEGRATION AND COORDINATION -</p>	<p>There is coordination among providers, continuity of services and integration of components of the service system so that the child and family can easily move within and through the system.</p>
<p>28. Do you think the place(s) you go for help (or support) is (are) the best kind of place for you? Yes___ No___ Explain:</p>	<p>Let's talk about the group of people who help you and your family. 30. Do all of the people who help your family work together as a team? Yes___ No___ Explain:</p>
<p>29. Do you feel comfortable spending time in the places where you get help? Yes___ No___ Explain:</p>	
<p>31. Is it easy for you and your family to get more help if you need it? Yes___ No___ Explain:</p>	



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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

Read aloud to Informant: The next questions are about how well people understand your culture and your family's culture. Culture is about the ideas, values, lifestyles, routines, and traditions that you have that are based on where you have lived and how you have been raised.

AWARENESS OF CHILD/FAMILY'S CULTURE

<p>32. What is your culture?</p> <ul style="list-style-type: none"> • What does your family believe in? • What are your family traditions and celebrations? • Who do you think makes up a family (e.g. mother, father, siblings, grandparents, godparents)? • What does your family think makes a person healthy or sick? 	<p>33. Do the people who are helping your family understand your culture? Yes__ No__</p> <p>Explain:</p>
	<p>34. Do the people who are helping your family understand what things are like in your neighborhood? Yes__ No__</p> <p>Explain:</p>

AWARENESS OF PROVIDER'S CULTURE

AWARENESS OF CULTURAL DYNAMICS

<p>35. Do you think the people who are helping your family see how their own culture influences them? Yes__ No__</p> <p>Explain:</p>	<p>36. Do they seem to know about how people from different cultures sometimes get along really well with each other and other times have difficulties getting along with each other? Yes__ No__</p> <p>Explain:</p>
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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

- 3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.
- 3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.
- 3D. INFORMAL SUPPORTS - The family's informal or natural sources of support are included in service planning and delivery. Service providers are knowledgeable about informal resources that may be used on behalf of the child and family and are able to access them.

SENSITIVITY AND RESPONSIVENESS	AGENCY CULTURE
<p>37. Do they think about your family's culture when they are trying to be helpful to your family? Yes__ No__ Explain:</p>	<p>38. Do you and your family understand how the different programs and organizations work and what the rules are? Yes__ No__ Explain:</p> <ul style="list-style-type: none"> • Has anyone helped you to figure out how the programs and organizations work? Yes__ No__ Explain:

INFORMAL SUPPORTS	
<p>39. Do all of the people who help your family know about all of the different activities that kids your age can get involved with in your area? (This includes things like sports, clubs, churches/temples/mosques, and after-school activities.) Yes__ No__ Explain:</p>	<p>40. Are they able to help you sign up for these activities? • If no, what makes it tough for them to help you get connected with these activities? Yes__ No__ Explain:</p>

For summative ratings also see #6 (informal helper involvement).



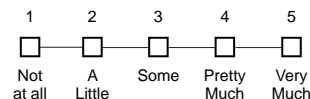
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Domain 4: Impact The impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.
4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

Read aloud to Informant: Now let's talk about changes that you have noticed since you and your family started getting help. For the next 4 questions, we're going to use the following 1 – 5 rating scale where 1 is "not at all" and 5 is "very much":



IMPROVEMENT

41. How much have services helped you?

Explain:

42. How much have services helped your family?

Explain:

APPROPRIATENESS

43. Are you getting the help you need?

Explain:

44. How much would you like to change things about the help that you are getting?

Explain:

For summative ratings, also see questions re: Service Type and Intensity (1A), Family Involvement (1B), Access to Services (2B), and Cultural Responsiveness (3B)

System of Care Practice Review

Domain 4: Impact The impact that services and supports have had on this child and family.

4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

45. What has been most helpful about the help you are getting?

46. What has been least helpful about the help you are getting?

47. Is there anything else you would like to tell me about you, your family or the people who are working with you?

**Thanks again for taking the time to talk with me today!
Is there anything you would like to ask me?**



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System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family dictate the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Thanks for agreeing to participate in this review. I'm going to ask you a number of questions about the services that ___(child's name)___ and his/her family are currently receiving. I will ask you to describe the service planning and delivery processes, and also to share your opinions about the services and supports that are being provided. In the end, I will ask you to provide some ratings regarding the effectiveness of the services and supports this child and family are receiving. Do you have any questions? *(Answer any questions asked by the informant)*
Okay, then, first, I'd like to get a sense of what makes this child and family unique.

CONCERNS/NEEDS	STRENGTHS												
1. What are the various concerns and needs of this child and family?	2. What are the strengths of this child and family?												
<p><i>Listen for information about these domains and check off if mentioned.</i></p> <table border="0"> <tr> <td><input type="checkbox"/> Cultural/Spiritual</td> <td><input type="checkbox"/> Mental Health</td> </tr> <tr> <td><input type="checkbox"/> Education</td> <td><input type="checkbox"/> Residential</td> </tr> <tr> <td><input type="checkbox"/> Family</td> <td><input type="checkbox"/> Safety</td> </tr> <tr> <td><input type="checkbox"/> Financial</td> <td><input type="checkbox"/> Social/Recreational</td> </tr> <tr> <td><input type="checkbox"/> Legal</td> <td><input type="checkbox"/> Substance Abuse</td> </tr> <tr> <td><input type="checkbox"/> Medical/Self-care</td> <td><input type="checkbox"/> Vocational</td> </tr> </table>	<input type="checkbox"/> Cultural/Spiritual	<input type="checkbox"/> Mental Health	<input type="checkbox"/> Education	<input type="checkbox"/> Residential	<input type="checkbox"/> Family	<input type="checkbox"/> Safety	<input type="checkbox"/> Financial	<input type="checkbox"/> Social/Recreational	<input type="checkbox"/> Legal	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Medical/Self-care	<input type="checkbox"/> Vocational	<p style="text-align: center;">MOST SIGNIFICANT ISSUES</p> 3. What are the most significant issues that this child and family are currently dealing with?
<input type="checkbox"/> Cultural/Spiritual	<input type="checkbox"/> Mental Health												
<input type="checkbox"/> Education	<input type="checkbox"/> Residential												
<input type="checkbox"/> Family	<input type="checkbox"/> Safety												
<input type="checkbox"/> Financial	<input type="checkbox"/> Social/Recreational												
<input type="checkbox"/> Legal	<input type="checkbox"/> Substance Abuse												
<input type="checkbox"/> Medical/Self-care	<input type="checkbox"/> Vocational												

ASSESSMENT METHOD

4. **How did you learn about** these needs, strengths, and issues?
 • *Probe about formal and informal assessments/inventories across full range of life domains*



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

ASSESSMENT METHOD	SUMMARY OF CURRENT SERVICES
<p>5. When we think about a thorough assessment of all the areas of a child or family's life, we think about all of these areas: (Hand formal provider List of Assessment Areas on page 112)</p> <p>Did the assessment process to identify this child and family's needs and strengths seem to cover</p> <p><input type="checkbox"/> all of these areas <input type="checkbox"/> some, but not all areas or <input type="checkbox"/> just a few areas</p> <p>Explain:</p>	<p>6. For the following section, review the Summary of Goals, Services & Supports (pg. 11) that was created during the Document Review and revise as needed, based on feedback from the formal provider.</p> <p>Let's review this summary together to make sure it accurately reflects your understanding of the current goals, services and supports that are being provided to this child and family.</p> <ul style="list-style-type: none"> • Are these the goals this child and family are working toward? • Are any of the listed services/supports not actually being delivered as described? • Are there any additional formal services that are not reflected in this summary? • Are there any informal or community supports that are not reflected in this summary? • Record additional services and supports on page 11.
IF NO EVIDENCE OF A FORMAL PLAN	IF NO EVIDENCE OF INFORMAL HELPERS
<p>7. If there is no evidence of a formal service plan in the records, ask:</p> <ul style="list-style-type: none"> • Is there a plan that identifies specific services and supports to address specific goals? Yes___ No___ • Are the providers (including mental health, school, medical and others) working from the same plan? Yes___ No___ <p>Explain:</p>	<p>8. If no informal helpers are identified on the Summary of Goals, Services and Supports, ask:</p> <p>Were the child and family asked if there are relatives, friends or neighbors who help or might be able to help them? Yes___ No___</p> <p>8a. Are any of these informal helpers involved in the formal services they receive? Yes___ No___</p> <ul style="list-style-type: none"> • If yes: In which services is each informal helper involved? • If no: What are the reasons that informal helpers are not involved in the formal services?



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Now let's talk about how the service plan relates to the needs and strengths you described earlier.

SERVICE GOALS

<p>9. How do the service plan goals reflect the <u>needs</u> that you identified for this child and family? <i>(reference goals on pg. 11 and restate needs if formal provider has forgotten them)</i></p>	<p>10. How do the goals incorporate the <u>strengths</u> that you identified for this child and family? <i>(restate strengths if formal provider has forgotten them)</i></p> <ul style="list-style-type: none"> • If the strengths are not formally incorporated into the goals and service plan, are they acknowledged in other ways?
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SERVICE TYPES

SERVICE INTENSITY

<p>Now let's focus on the <u>types</u> of services and supports that are identified in the plan. <i>(emphasize "service type" column in Summary of Goals, Services and Supports on page 11)</i></p> <p>11. How well do these types of services and supports fit with the combination of needs and strengths you described for this child and family?</p> <ul style="list-style-type: none"> • What would you add, remove or change to make it a better fit? 	<p>12. Do you believe the current <u>combination of services</u> and supports is too intense, not intense enough, or just right for this child/family? <input type="checkbox"/> too intense <input type="checkbox"/> not intense enough <input type="checkbox"/> just right</p> <p>Explain:</p> <p>12a. Do you believe the current <u>amount of interaction</u> that service providers have with this child and family is too intense, not intense enough, or just right for this child/family? <input type="checkbox"/> too intense <input type="checkbox"/> not intense enough <input type="checkbox"/> just right</p> <p>Explain:</p>
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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1B. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

FAMILY PARTICIPATION

Now let's talk about the service planning process.

13. Who are the people and agencies involved in service planning? List: _____

13a. How are the **child and family involved** in service planning? Notes:

13b. Do the child and family **actively participate** in the planning? Yes___ No___ Explain:
 • Have the child and family been involved in service plan reviews and updates since the initial plan?

13c. Do the child and family **directly influence** the final plan that is developed and the goals that are set? Yes___ No___ Explain:
 • Was the plan explained to the child and family?
 • Was the family provided with a copy of the plan?

13d. Do the child and family seem to **understand** the plan? Yes___ No___ Explain:

13e. Do the child and family seem to be **invested** in and committed to the plan? Yes___ No___ Explain:

For Summative Ratings also see Summary of Goals, Services and Supports page 11.



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1C. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

Read aloud to Informant: Now let's discuss case management services.

Who is the individual designated to provide case management? _____

When was the last time this person met with the child and family? _____

CM COORDINATES SERVICES AND SUPPORTS

14. What are the challenges you (or the case manager) face in coordinating the planning and delivery of services and supports for this child and family?
 • To what extent are you (or the case manager) able to meet these challenges?

15. How do you maintain communication with all the child and family's service providers and informal helpers?
 • Is this communication helpful? How so?
 • Is this communication frequent enough?

CM COORDINATES SERVICES AND SUPPORTS

16. How would you describe your (or the case manager's) working relationships with each of the formal service providers and informal helpers?
 • Listen for qualities such as warmth, trust, genuineness, engagement, mutual liking, and respect

CM ENSURES PLANS/SUPPORTS RESPOND TO EMERGING AND CHANGING NEEDS

17. In your opinion, how responsive are the plans and services to the emerging and changing needs of this child and family?
 • What are the barriers that make it difficult for you (or the case manager) to ensure that the plans/services are responsive?



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DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

2B. ACCESS TO SERVICES - The child and family have access to a comprehensive range of services that are flexible enough for the child and family to integrate the services into their daily routines.

Read aloud to Informant: I have a few questions about access to services.

CONVENIENT TIMES	CONVENIENT LOCATIONS
<p>22. Are the appointment times with you and with the other service providers convenient for the child and family? Yes__ No__</p> <p>Explain:</p>	<p>23. Are the locations of the meetings with you and with the other providers convenient for the child and family? Yes__ No__</p> <p>Explain:</p> <hr/> <p>24. Does the child and family need any support to increase their access to services? Yes__ No__</p> <p>Explain:</p>

APPROPRIATE LANGUAGE	
<p>25. What is the primary language of the child and family?</p> <p><i>Child:</i></p> <p><i>Family:</i></p> <p>Do the service providers who are working with this family speak the primary language of the child__and/or family__during the meetings?</p> <p>Yes__ No__</p> <p><i>If no, explain why not:</i></p>	<p>26. Is written information provided to the child and family in their primary language? Yes__ No__</p> <p>Explain:</p>



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DOMAIN 2: Community-Based: Services are provided within or close to the child’s home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

- 2C. MINIMAL RESTRICTIVENESS - The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.
- 2D. INTEGRATION AND COORDINATION - There is coordination among providers, continuity of services and integration of components of the service system so that the child and family can easily move within and through the system.

Read aloud to Informant: Let’s talk about the network of providers who are working with this child and family.

MINIMAL RESTRICTIVENESS

- | | |
|--|---|
| <p>27. Are the child and family comfortable spending time in the places where they receive services?</p> <p>Yes__ No__</p> <p>Explain:</p> | <p>28. To what extent are the services for this child and family provided in the least restrictive while also most appropriate environment(s) possible?</p> <ul style="list-style-type: none"> • Are the service environments carefully matched to the family’s needs and strengths, or are they limited to whatever is available? |
|--|---|

INTERGRATION AND COORDINATION

- | | |
|---|---|
| <p>29. How do the different service providers involved with the child and family integrate and coordinate their work?</p> <ul style="list-style-type: none"> • Who is involved in service planning and how do they participate? • Do the various service providers and informal helpers directly communicate with one another between service plan updates? • How are the child and family involved in the communication that occurs among and between service providers and informal helpers? | <p>30. How smooth is the process for linking the child and family with additional services, if necessary?</p> <ul style="list-style-type: none"> • What are the barriers to seamless linkage with services and supports? |
|---|---|



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DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

Read aloud to Informant: The next questions relate to culture, meaning the ideas, values, routines, lifestyles, and traditions that you have that are based on where you have lived and how you have been raised.

AWARENESS OF PROVIDER'S CULTURE	AWARENESS OF CULTURAL DYNAMICS
31. What is your sense of your own culture, in relation to your role in assisting this child and family? • How do you describe your cultural identity (values, beliefs, and lifestyle)? • How do you think the child and family view you in terms of your culture?	32. In your work, how do cultural differences and similarities influence how people get along and work together?

AWARENESS OF CHILD/FAMILY'S CULTURE	
33. What is the cultural identity of this child and family as reflected in their values, beliefs and lifestyles?	34. How would you describe the community/neighborhood where the child and family live?



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System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.

AWARENESS OF CHILD/FAMILY'S CULTURE

<p>35. What are the child and family's beliefs and values regarding family and health?</p> <ul style="list-style-type: none"> • Who do they consider part of a family (e.g. mother, father, siblings, grandparents, godparents) • Where are family commitments placed on their list of priorities? What kinds of family commitments? • What does this family think makes a person healthy or sick? 	<p>36. How do the child and family's culture impact their lives and relate to their concerns?</p>
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AWARENESS OF CHILD/FAMILY'S CULTURE

RESPONSIVENESS

<p>37. How does their culture impact their decision-making processes?</p>	<p>38. How does your awareness of the child and family's culture influence your service planning and delivery?</p> <ul style="list-style-type: none"> • Are you able to adapt services to the child and family's culture? If yes, how?
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For summative ratings, also see #25 - #26 (plans and services provided in preferred language).

System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

3D. INFORMAL SUPPORTS - The family's informal or natural sources of support are included in service planning and delivery. Service providers are knowledgeable about informal resources that may be used on behalf of the child and family and are able to access them.

Read aloud to Informant: Let's talk about the agencies and informal resources that provide services and supports to this child and family.

AGENCY CULTURE

39. Does the family understand how your agency works and how the agencies of other service providers work (e.g. hours, regulations, services)?

Yes__ No__ Explain:

- Do you think the family's participation or decisions would be any different if they knew more or less about the agencies and how they work?

Yes__ No__ Explain:

- Do you or any of the other providers assist the child and family in understanding and navigating the various agencies and organizations?

Yes__ No__ Explain:

INFORMAL SUPPORTS

40. Are you and the child's other formal service providers aware of the informal and community resources that are available to the child and family? (like sports, clubs, churches/temples/mosques, and after-school activities)

Yes__ No__ Explain:

- Are all of the formal service providers able to access these informal resources so that they are integrated into the overall service/support plan?

Yes__ No__ Explain:

- *If no:* What prevents them from accessing these resources?

For summative ratings, also see #8 (informal helper involvement).



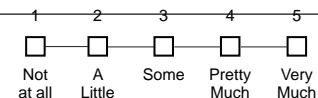
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Domain 4: Impact The impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.

Read aloud to Informant: The final questions relate to the impact that services and supports have had on this child and family. For the next 6 questions, please use the following 1 – 5 rating scale:



41. The child has made progress towards meeting his/her goals.

1 2 3 4 5
 — — — —
 Not at all A Little Some Pretty Much Very Much

Explain:

42. The family has made progress towards meeting its goals.

1 2 3 4 5
 — — — —
 Not at all A Little Some Pretty Much Very Much

Explain:

43. The primary caregiver is better able to deal with his/her child's problems.

1 2 3 4 5
 — — — —
 Not at all A Little Some Pretty Much Very Much

Explain:

44. Services have improved this child's overall situation.

1 2 3 4 5
 — — — —
 Not at all A Little Some Pretty Much Very Much

Explain:

45. Services have improved this family's overall situation.

1 2 3 4 5
 — — — —
 Not at all A Little Some Pretty Much Very Much

Explain:



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Domain 4: Impact The impact that services and supports have had on this child and family.

4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

<p>46. I am satisfied with the coordination of services in this case.</p> <p style="text-align: center;"> 1 2 3 4 5 <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> — <input type="checkbox"/> Not A Some Pretty Very at all Little Much Much </p> <p>Explain:</p>	<p>47. What do you think has been most helpful about the services and supports provided to this child and family?</p>
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<p>48. What do you think has been least helpful about the services and supports provided to this child and family?</p>	<p>49. Is there anything else you think would be important for me to know what kids, families and service providers need?</p> <p style="margin-top: 100px;">• Is there anything you would like to ask me?</p>
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<p><i>For summative ratings, also see questions re: Service Type and Intensity (1A), Family Involvement (1B), Access to Services (2B), and Cultural Responsiveness (3B)</i></p>	<p>Thanks so much for participating in this interview!</p>
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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Thanks for agreeing to participate in this review. When we asked ___(child's name)___ and his/her family if there is anyone who has been especially helpful to them, they mentioned you, so I'm grateful to have the opportunity to hear about your perspective on ___(child's name)___ and his/her family.

I'm going to ask you a number of questions about the services that ___(child's name)___ and his/her family are currently receiving. I will ask you to share what you know about the service planning and delivery processes, and also to share your opinions about the services and supports that are being provided. In the end, we will talk about the success that ___(child's name)___ and his/her family have experienced so far.

Some of these questions might be too detailed for you to answer, or might cover topics that you don't have information or opinions about. If that is the case, just let me know, and we will move on to the next section. Do you have any questions? *(Answer any questions asked by the informant)*

Before we get started, let's talk a little bit about how you came to have a special role in ___(child's name's)___ and his/her family's life.

<p>1. How long have you known this child/family?</p>	<p>2. What is your relation to this child/family?</p>
<p>3. What are you doing to help this child/family?</p>	<p>4. How long have you been helping this child/family?</p>



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DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Now, I'd like to get a sense of what makes *_(child's name)_* and his/her family unique.

ASSESSMENT: STRENGTHS	
<p>5. Tell me a little bit about this child.</p> <ul style="list-style-type: none"> • What you like best about this child? • What are his/her interests? • What does he/she do well at? 	<p>6. Tell me a little bit about <i>_(child's name's)_</i> family.</p> <ul style="list-style-type: none"> • What you like best about his/her family? • What would you consider its strengths?

ASSESSMENT: NEEDS	
<p>7. What are this child and family's current needs?</p> <p>What were their needs when they first sought help?</p>	<p>8. Does it seem like the people who are providing this child and family with services and supports know about the strengths and needs that you have just described?</p>

SUMMARY OF CURRENT SERVICES	INFORMAL HELPERS
<p><i>For the following section, refer to the Summary of Goals, Services & Supports (Page 11) that was created during the Document Review.</i></p> <p>9. Let's review this summary of the current services and supports that are being provided to <i>_(child's name)_</i> and his/her family.</p> <ul style="list-style-type: none"> • Which of these services and supports have you known about? 	<p>10. Do you participate in any of these services or supports with <i>_(child's name)_</i> and his/her family?</p> <p>Yes__ No__</p> <ul style="list-style-type: none"> • <i>If yes:</i> Which services or supports are you involved in? How were you invited to get involved? • <i>If no:</i> What are the reasons that you are not involved in the formal services?



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System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

1A. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

Read aloud to Informant: Let's talk about the plan that has been developed for this child and family. Do you know about the current plan that outlines the goals and services for _(child's name)_ and his/her family? YES___ NO___ If NO: Skip ahead to Question #13

SERVICE GOALS

<p>First let's focus on the goals that are specified in this plan. (Refer to "goals" in the Summary of Goals, Services & Supports, Page 11)</p> <p>11. How do the service plan goals reflect the needs that you described for <u>_(child's name)_</u> and his/her family?</p>	<p>12. How do the goals incorporate the strengths that you described for <u>_(child's name)_</u> and his/her family?</p> <p>12a. If the strengths are not formally incorporated into the goals and service plan, are they acknowledged in other ways?</p>
--	---

SERVICE TYPES

Now let's focus on the types of services that _(child's name)_ and his/her family are receiving. (Refer to "service type" in the Summary of Goals, Services & Supports, Page 11)

13. Do you feel like these services and supports are the appropriate **types** for _(child's name)_ and his/her family to be participating in at this time?
Yes___ No___

- What would you change?

SERVICE INTENSITY

<p>14. Do you feel like the current combination of services and supports is too intense, not intense enough, or just right for <u>_(child's name)_</u> and his/her family? ___too intense ___ not intense enough ___ just right</p> <p>Explain:</p>	<p>15. Do you feel the amount of interaction that service providers have with <u>_(child's name)_</u> and his/her family is too intense, not intense enough, or just right? ___too intense ___ not intense enough ___ just right</p> <p>Explain:</p>
--	---



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System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

1C. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

2A. EARLY INTERVENTION - Services are provided in a timely manner, before problems escalate, to prevent future emotional disturbances, maladaptive behaviors or serious negative outcomes. Services are provided in early childhood when risks are identified and/or as soon as problems emerge.

Read aloud to Informant: *_(Case Manager's name)_* is the person who is responsible for helping *_(child's name)_* and his/her family to coordinate the services that they receive. Do you know who this person is? Yes___ No___ *(If no, skip to question #19)*

CM COORDINATES SERVICES AND SUPPORTS

<p>16. Does he/she create a sense of teamwork among the various service providers, friends, and family who are helping the family? Yes___ No___ Explain:</p>	<p>17. How does he/she include you in the team?</p>
--	---

<h3>CM ENSURES PLAN/SUPPORT RESPOND TO EMERGING AND CHANGING NEEDS</h3>	<h3>EARLY INTERVENTION</h3>
---	-----------------------------

<p>18. Does <i>_(Case Manager's name's)_</i> support and involvement make it possible for the plan and services to be responsive to the emerging and changing needs of this family?</p>	<p>19. Do you think it would have made any difference if <i>_(child's name)_</i> and his/her family had received help sooner than they did? Yes___ No___</p> <ul style="list-style-type: none"> • What would be different if they received help sooner?
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System of Care Practice Review

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

2C. MINIMAL RESTRICTIVENESS - The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.

2D. INTEGRATION AND COORDINATION - There is coordination among providers, continuity of services and integration of components of the service system so that the child and family can easily move within and through the system.

MINIMAL RESTRICTIVENESS	INTEGRATION AND COORDINATION
<p>20. To what extent are the services for <i>_(child's name)_</i> and his/her family provided in the least restrictive, while also most appropriate environment(s) possible?</p> <ul style="list-style-type: none"> To what extent are the service environments based on the child and family's needs and strengths, versus the availability of services? 	<p>Let's talk about the team of providers who are working with <i>_(child's name)_</i> and his/her family.</p> <p>22. Does it seem like all of the service providers, friends and family are working together, as a team, to help <i>_(child's name)_</i> and his/her family? Yes__ No__</p> <p>Explain:</p>
<p>21. Do <i>_(child's name)_</i> and his/her family seem comfortable spending time in the places where they get help?</p>	
INTEGRATION AND COORDINATION	
<p>23. How do the different service providers integrate and coordinate their work?</p> <ul style="list-style-type: none"> Do you communicate directly with any of the other service providers or family helpers? Yes__ No__ <p>Explain:</p>	<p>24. Does it seem like there is a smooth and seamless process to link the family with additional services as needs arise? Yes__ No__</p> <p>Explain:</p>



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System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

- 3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.
- 3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.
- 3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

Read aloud to Informant: The next questions relate to culture, meaning the ideas, values, routines, lifestyles, and traditions that you have that are based on where you have lived and how you have been raised.

AWARENESS OF CHILD/FAMILY'S CULTURE

- | | |
|--|--|
| <p>25. What is this family's culture?</p> <ul style="list-style-type: none"> What does this family believe in? What are this family traditions and celebrations? Who do they think makes up a family (e.g. mother, father, siblings, grandparents, godparents)? What does this family think makes a person healthy or sick? | <p>26. Do the people working with <i>_(child's name)_</i> and his/her family seem to understand the family's culture, in terms of their values, beliefs and lifestyle?
Yes___ No___
Explain:</p> |
| <p>27. Do the people working with <i>_(child's name)_</i> and his/her family seem to recognize and respect how the family's culture influences the family's preferences, decisions and participation?
Yes___ No___
Explain:</p> | |



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Florida Mental Health Institute

System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

- 3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.
- 3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.
- 3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

Read aloud to Informant: The next questions relate to culture, meaning the ideas, values, routines, lifestyles, and traditions that you have that are based on where you have lived and how you have been raised.

AWARENESS OF PROVIDER'S CULTURE	AWARENESS OF CULTURAL DYNAMICS
28. Do the the service providers seem to recognize how their own culture influences their work? Yes__ No__ Explain:	29. Do they seem aware of how differences and similarities in culture can impact how people relate to each other? Yes__ No__ Explain:
SENSITIVITY AND RESPONSIVENESS	AGENCY CULTURE
30. Do they seem to take the family's culture into account when planning and providing services and supports for <i>_(child's name)_</i> and his/her family? Yes__ No__ Explain:	31. Do <i>_(child's name)_</i> and his/her family seem to understand how the different agencies and organizations work (e.g. hours, regulations, service guidelines)? Yes__ No__ Explain:



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Florida Mental Health Institute

System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3D. INFORMAL SUPPORTS - The family's informal or natural sources of support are included in service planning and delivery. Service providers are knowledgeable about informal resources that may be used on behalf of the child and family and are able to access them.

Read aloud to Informant: Let's talk about the agencies that provide services & supports to this child and family.

<p>32. Does it seem like all of the formal service providers who are working with <i>_(child's name)_</i> and his/her family are aware of the informal and community resources that are available to them? (Like sports, religious activities, and time with family and/or friends) Yes__ No__</p> <p>Explain:</p>	<p>33. Does it seem like all of the formal service providers are able to access these informal supports and resources so that they are integrated into the overall service/support plan? Yes__ No__</p> <p>Explain:</p> <ul style="list-style-type: none"> • If no, what gets in the way of formal providers accessing the natural supports?
<p>34. Are you involved in the service planning process? Yes__ No__</p> <p>Explain:</p>	<p>35. Do you receive any support (e.g. money, food/gas, vouchers, training, respite, information) in order to provide help and support to this child and family? Yes__ No__</p> <p>Explain:</p> <p><i>If no:</i> Would it help you to receive supports like this in order for you to help the family?</p>

For summative ratings also see #10 (informal helper involvement).



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System of Care Practice Review

Domain 4: Impact The impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.

Read aloud to Informant: The final questions relate to the impact that services and supports have had on this child and family. For the next 6 questions, please use the following 1 – 5 rating scale:

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

36. The child has made progress towards meeting his/her goals.

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

Explain:

37. The family has made progress towards meeting its goals.

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

Explain:

38. The parent/primary caregiver is better able to deal with his/her child's problems.

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

Explain:

39. Services have improved this child's overall situation.

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

Explain:

40. Services have improved this family's overall situation.

1 2 3 4 5
 — — — —
 Not A Some Pretty Very
 at all Little Much Much

Explain:

Domain 4: Impact The impact that services and supports have had on this child and family.

4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

41. I am satisfied with the coordination of services in this case.

1	2	3	4	5
□	□	□	□	□
Not at all	A Little	Some	Pretty Much	Very Much

Explain:

42. What do you think has been most helpful about the services and supports provided to *_(child's name)_* and his/her family?

43. What do you think has been least helpful about the services and supports provided to *_(child's name)_* and his/her family?

44. Is there anything else you think would be important for me to know about *_(child's name)_* and his/her family or the services they have been receiving?

- Is there anything you think your community should know about what kids and families who live here need?
- What is working and what is not working for kids and families who live in your community?

Thanks so much for participating in this interview!

System of Care Practice Review

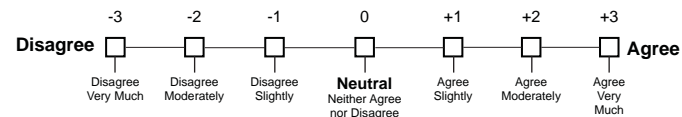
Summative Questions

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IA. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

ASSESSMENT / INVENTORY

1. A **thorough assessment** or inventory was conducted **across life domains**. Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	10	1, 1a, 3	
Primary Caregiver Interview	22	5, 6	
Child/Youth Interview	35	5	
Formal Provider Interview	46	1, 4	
	47	5	
Informal Helper Interview	60	8, 9	

System of Care Practice Review

Summative Questions

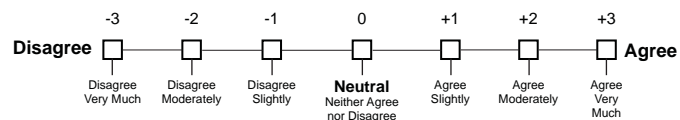
DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IA. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

ASSESSMENT / INVENTORY

3. The **strengths** of the child and family have been identified.

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	10	2	
Primary Caregiver Interview	21	1, 2	
Child/Youth Interview	34	1, 2	
Formal Provider Interview	46	2	
Informal Helper Interview	60	5, 6, 8, 9	

System of Care Practice Review

Summative Questions

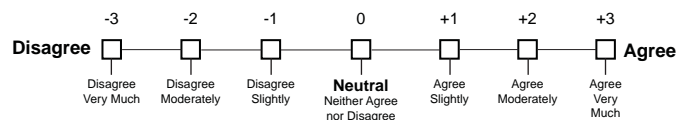
DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IA. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

SERVICE PLANNING

4. There is a **primary** service plan that is **integrated** across providers and agencies.

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	10	1	
	11	Summary	
	12	Basic Information	
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Child/Youth Interview	—	—	
Formal Provider Interview	47	6, 7	
Informal Helper Interview	60	9,10	
	61	Instructions	

System of Care Practice Review

Summative Questions

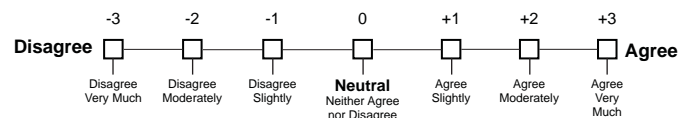
DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IA. INDIVIDUALIZED - The development of a unique service plan for each child and family in which their needs and strengths are assessed, prioritized and addressed across life domains.

SERVICE PLANNING

5. The service plan **goals** reflect **needs** of the child and family.

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	11	Summary	
	12	4-7,9	
Primary Caregiver Interview	24	10	
Child/Youth Interview	36	7	
Formal Provider Interview	48	9	
Informal Helper Interview	61	11	

System of Care Practice Review

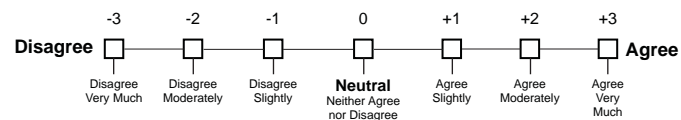
Summative Questions

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IB. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

11. The child and family **influence** the service **planning process** (initial plan & updates).
 (i.e. informed choices and preferences of the child and family are evident in the plan and services)

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	13	8, 11	
Primary Caregiver Interview	25	15a-15c	
Child/Youth Interview	37	12	
Formal Provider Interview	49	13c	
Informal Helper Interview	—	—	

System of Care Practice Review

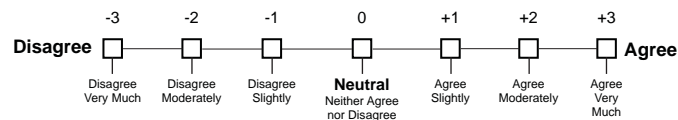
Summative Questions

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IB. FULL PARTICIPATION - The child and family, along with formal providers and informal helpers, participate in developing, implementing and evaluating the service plan.

14. The formal providers and informal helpers participate in service planning (initial plan & updates).

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	14	13, 15	
Primary Caregiver Interview	25	15	
	29	34	
Child/Youth Interview	—	—	
Formal Provider Interview	49	13	
	53	29	
Informal Helper Interview	62	17	

System of Care Practice Review

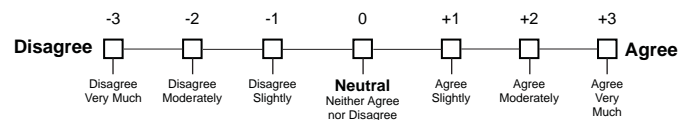
Summative Questions

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family determine the types and mix of services provided.

IC. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

15. There is **one person** who successfully **coordinates** the **planning** and **delivery** of services and supports.

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
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	45	47	
Formal Provider Interview	58	Instructions, 14-17	
Informal Helper Interview	62	16-18	
	64	41	

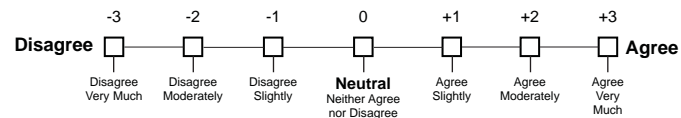
System of Care Practice Review

Summative Questions

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family dictate the types and mix of services provided.

IC. CASE MANAGEMENT - Support is provided to the child and family to ensure that they receive services in a coordinated manner, that the type and intensity of services are appropriate, and the service plan is responsive to the child and family's changing needs over time.

16. Service plans and services are **responsive** to the emerging and changing needs of the child and family. Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	14	14, 15	
Primary Caregiver Interview	26	19, 20	
Child/Youth Interview	38	18, 19	
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Informal Helper Interview	62	18	

System of Care Practice Review

Summative Questions

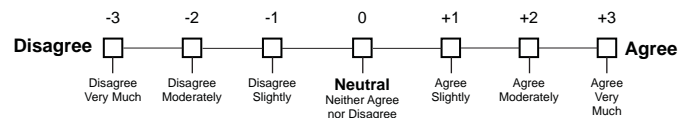
DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

2C. MINIMAL RESTRICTIVENESS - The child and family are served in as normal an environment as possible, in the least intrusive manner possible, so that families can continue their day-to-day routines as much as possible.

CONVENIENT LOCATIONS

24. Services are provided in environment(s) that **feels comfortable** to the child and family.

Check Most Appropriate on Scale Below



Don't Know
 Does Not Apply

INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
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Primary Caregiver Interview	29	31	
Child/Youth Interview	41	28, 29	
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Informal Helper Interview	63	21	

System of Care Practice Review

Summative Questions

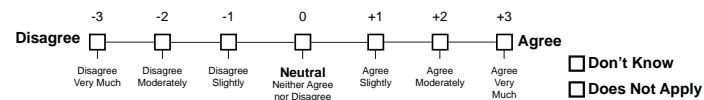
DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

AWARENESS OF CHILD AND FAMILY'S CULTURE

29. Service providers know about the **family's** concepts of **health** and **family**.

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
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Child/Youth Interview	42	32	
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Informal Helper Interview	64	25	

System of Care Practice Review

Summative Questions

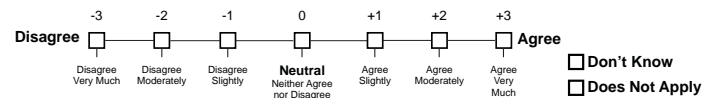
DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

AWARENESS OF PROVIDERS' CULTURE

31. Service providers are **aware** of their **own culture** (values, beliefs and lifestyle) and **how it influences** the way they interact with the child and family.

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	19	32	
Primary Caregiver Interview	30	40	
Child/Youth Interview	42	35	
Formal Provider Interview	54	31	
Informal Helper Interview	65	28	

System of Care Practice Review

Summative Questions

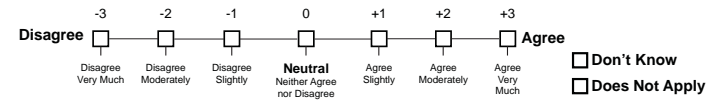
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3A. AWARENESS - Providers within the system are aware of the impact of their own culture, the culture of the child and family, and cultural context in general on the delivery of services. Providers accept cultural differences and recognize cultural dynamics.

AWARENESS OF CULTURAL DYNAMICS

32. Service providers are **aware** of the **dynamics** inherent when working with families whose culture (values, beliefs and lifestyle) may be different from or similar to their own.

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	19	33	
Primary Caregiver Interview	30	41	
Child/Youth Interview	42	36	
Formal Provider Interview	54	32	
Informal Helper Interview	65	29	

System of Care Practice Review

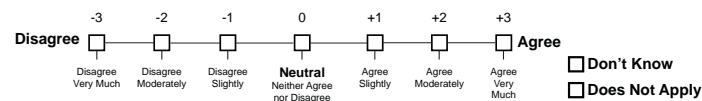
Summative Questions

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.

33. Service providers **translate their awareness** of the family's culture (values, beliefs and lifestyle) into **action**.

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
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Primary Caregiver Interview	31	42	
Child/Youth Interview	43	37	
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System of Care Practice Review

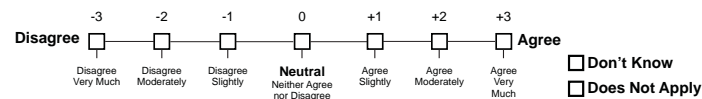
Summative Questions

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3B. SENSITIVITY AND RESPONSIVENESS - Services are adapted to the cultural context of the child and family.

34. Services are **responsive** to the child and family's **culture** (values, beliefs and lifestyle).

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	19	34, 35	
Primary Caregiver Interview	31	42	
Child/Youth Interview	43	37	
Formal Provider Interview	55	38	
Informal Helper Interview	65	30	

System of Care Practice Review

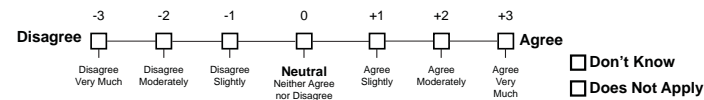
Summative Questions

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

35. Service providers **recognize** that the **family's participation** in service planning and in the decision making process is **impacted** by their knowledge/understanding of the **expectations** of the agencies/ programs/providers.

Check Most Appropriate on Scale Below



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Primary Caregiver Interview	31	43	
Child/Youth Interview	43	38	
Formal Provider Interview	56	39	
Informal Helper Interview	65	31	

System of Care Practice Review

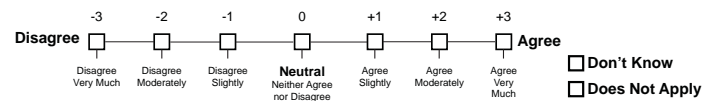
Summative Questions

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3C. AGENCY CULTURE - The child and family are assisted in understanding the cultures of the agencies providing them with services, in terms of how the system operates, the rules and regulations and what is expected of them.

36. Service providers **assist** the child and family in understanding/navigating the **agencies** they represent.

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
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Document Review	19	36	
Primary Caregiver Interview	31	43	
Child/Youth Interview	43	38	
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System of Care Practice Review

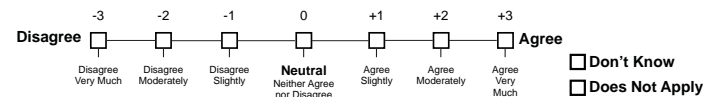
Summative Questions

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family.

3D. INFORMAL SUPPORTS - The family's informal or natural sources of support are included in service planning and delivery. Service providers are knowledgeable about informal resources that may be used on behalf of the child and family and are able to access them.

37. Service planning and delivery **intentionally** includes **informal sources** of support for the child and family. (i.e. informal helpers and community-based activities and opportunities)

Check Most Appropriate on Scale Below



INDEX			EXPLAIN RATING BELOW
	Page #	Question #	
Document Review	11	Summary	
	14	13	
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	31	44, 45	
Child/Youth Interview	35	6	
	43	39, 40	
Formal Provider Interview	47	8, 8a	
	56	40	
Informal Helper Interview	59	10	
	60	1-4	
	66	32-35	

System of Care Practice Review

Summative Questions

DOMAIN 4: Impact The final domain relates to the impact that services and supports have had on this child and family.

4A. IMPROVEMENT - Services that have had a positive impact on the child and family have enabled the child and family to improve their situation.

CHILD	FAMILY																																																																
<p>38a. The services/supports provided to the child have improved his/her situation.</p> <p><input checked="" type="checkbox"/> Check Most Appropriate on Scale Below</p> <div style="text-align: center;"> <table style="margin: auto;"> <tr> <td style="text-align: center;">-3</td> <td style="text-align: center;">-2</td> <td style="text-align: center;">-1</td> <td style="text-align: center;">0</td> <td style="text-align: center;">+1</td> <td style="text-align: center;">+2</td> <td style="text-align: center;">+3</td> <td></td> </tr> <tr> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Neutral</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">Disagree Very Much</td> <td style="text-align: center;">Disagree Moderately</td> <td style="text-align: center;">Disagree Slightly</td> <td style="text-align: center;">Neutral Neither Agree nor Disagree</td> <td style="text-align: center;">Agree Slightly</td> <td style="text-align: center;">Agree Moderately</td> <td style="text-align: center;">Agree Very Much</td> <td style="text-align: center;"><input type="checkbox"/> Don't Know <input type="checkbox"/> Does Not Apply</td> </tr> </table> </div>	-3	-2	-1	0	+1	+2	+3		Disagree	Disagree	Disagree	Neutral	Agree	Agree	Agree	Agree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disagree Very Much	Disagree Moderately	Disagree Slightly	Neutral Neither Agree nor Disagree	Agree Slightly	Agree Moderately	Agree Very Much	<input type="checkbox"/> Don't Know <input type="checkbox"/> Does Not Apply	<p>38b. The services/supports provided to family have improved their situation.</p> <p><input checked="" type="checkbox"/> Check Most Appropriate on Scale Below</p> <div style="text-align: center;"> <table style="margin: auto;"> <tr> <td style="text-align: center;">-3</td> <td style="text-align: center;">-2</td> <td style="text-align: center;">-1</td> <td style="text-align: center;">0</td> <td style="text-align: center;">+1</td> <td style="text-align: center;">+2</td> <td style="text-align: center;">+3</td> <td></td> </tr> <tr> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Disagree</td> <td style="text-align: center;">Neutral</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> <td style="text-align: center;">Agree</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;">Disagree Very Much</td> <td style="text-align: center;">Disagree Moderately</td> <td style="text-align: center;">Disagree Slightly</td> <td style="text-align: center;">Neutral Neither Agree nor Disagree</td> <td style="text-align: center;">Agree Slightly</td> <td style="text-align: center;">Agree Moderately</td> <td style="text-align: center;">Agree Very Much</td> <td style="text-align: center;"><input type="checkbox"/> Don't Know <input type="checkbox"/> Does Not Apply</td> </tr> </table> </div>	-3	-2	-1	0	+1	+2	+3		Disagree	Disagree	Disagree	Neutral	Agree	Agree	Agree	Agree	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Disagree Very Much	Disagree Moderately	Disagree Slightly	Neutral Neither Agree nor Disagree	Agree Slightly	Agree Moderately	Agree Very Much	<input type="checkbox"/> Don't Know <input type="checkbox"/> Does Not Apply
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EXPLAIN RATING BELOW	EXPLAIN RATING BELOW

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Child/Youth Interview	44	41	Child/Youth Interview	44	42
Formal Provider Interview	57	41, 44	Formal Provider Interview	57	42, 43, 45
Informal Helper Interview	67	36, 39	Informal Helper Interview	67	37, 38, 40

System of Care Practice Review

Summative Questions

DOMAIN 4: Impact The final domain relates to the impact that services and supports have had on this child and family.

4B. APPROPRIATENESS - Services that have had a positive impact on the child and family have been appropriate for meeting the needs of the child and family.

CHILD	FAMILY
<p>39a. The services/supports provided to the child have appropriately met his/her needs.</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Check Most Appropriate on Scale Below</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p>-3 -2 -1 0 +1 +2 +3</p> <p>Disagree Disagree Disagree Neutral Agree Agree Agree</p> <p style="font-size: small;">Very Much Moderately Slightly Neither Agree nor Disagree Slightly Moderately Very Much</p> </div> <div style="text-align: center;"> <p><input type="checkbox"/> Don't Know</p> <p><input type="checkbox"/> Does Not Apply</p> </div> </div>	<p>39b. The services/supports provided to the family have appropriately met their needs.</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Check Most Appropriate on Scale Below</p> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> <p>-3 -2 -1 0 +1 +2 +3</p> <p>Disagree Disagree Disagree Neutral Agree Agree Agree</p> <p style="font-size: small;">Very Much Moderately Slightly Neither Agree nor Disagree Slightly Moderately Very Much</p> </div> <div style="text-align: center;"> <p><input type="checkbox"/> Don't Know</p> <p><input type="checkbox"/> Does Not Apply</p> </div> </div>

EXPLAIN RATING BELOW	EXPLAIN RATING BELOW

INDEX			INDEX		
	Page #	Question #		Page #	Question #
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Informal Helper Interview	68	42-44	Informal Helper Interview	68	42-44

System of Care Practice Review

DOMAIN 1: Child-Centered and Family-Focused: The needs of the child and family dictate the types and mix of services provided.	
DOMAIN RATING: _____	
SUMMATIVE QUESTION	
1A. INDIVIDUALIZED	AVERAGE RATING = ____
Assessment / Inventory	
1. A thorough assessment or inventory was conducted across life domains .	-3 -2 -1 0 +1 +2 +3 n/a
2. The needs of the child and family have been identified and prioritized across a full range of life domains.	-3 -2 -1 0 +1 +2 +3 n/a
3. The strengths of the child and family have been identified.	-3 -2 -1 0 +1 +2 +3 n/a
Service Planning / Delivery	
4. There is a primary service plan that is integrated across providers and agencies.	-3 -2 -1 0 +1 +2 +3 n/a
5. The service plan goals reflect needs of the child and family.	-3 -2 -1 0 +1 +2 +3 n/a
6. The service plan goals incorporate the strengths of the child and family.	-3 -2 -1 0 +1 +2 +3 n/a
7. The service planning and delivery <i>informally</i> acknowledges/considers the strengths of the child and family.	-3 -2 -1 0 +1 +2 +3 n/a
Types of Services/Supports	
8. The types of services/supports provided to the child and family reflect their needs and strengths.	-3 -2 -1 0 +1 +2 +3 n/a
Intensity of Services/Supports	
9. The intensity of the services/supports provided to the child and family reflects their needs and strengths.	-3 -2 -1 0 +1 +2 +3 n/a
1B. FULL PARTICIPATION	AVERAGE RATING = ____
10. The child and family actively participate in the service planning process (initial plan & updates).	-3 -2 -1 0 +1 +2 +3 n/a
11. The child and family influence the service planning process (initial plan & updates).	-3 -2 -1 0 +1 +2 +3 n/a
12. The child and family understand the content of the service plan.	-3 -2 -1 0 +1 +2 +3 n/a
13. The child and family actively participate in services .	-3 -2 -1 0 +1 +2 +3 n/a
14. The formal providers and informal helpers participate in service planning (initial plan & updates).	-3 -2 -1 0 +1 +2 +3 n/a
1C. CASE MANAGEMENT	AVERAGE RATING = ____
15. There is one person who successfully coordinates the planning and delivery of services and supports.	-3 -2 -1 0 +1 +2 +3 n/a
16. Service plans and services are responsive to the emerging and changing needs of the child and family.	-3 -2 -1 0 +1 +2 +3 n/a

System of Care Practice Review

DOMAIN 2: Community-Based: Services are provided within or close to the child's home community, in the least restrictive setting possible, and are coordinated and delivered through linkages between public and private providers.

DOMAIN RATING: _____

SUMMATIVE QUESTION	
2A. EARLY INTERVENTION	AVERAGE RATING = ____
17. As soon as the child and family began experiencing problems, the system clarified the child and family's needs.	-3 -2 -1 0 +1 +2 +3 n/a
18. As soon as the child and family entered the service system, the system responded by offering the appropriate combination of services and supports.	-3 -2 -1 0 +1 +2 +3 n/a
2B. ACCESS TO SERVICES	AVERAGE RATING = ____
Convenient Times	
19. Services are scheduled at convenient times for the child and family.	-3 -2 -1 0 +1 +2 +3 n/a
Convenient Locations	
20. Services are provided within or close to the home community.	-3 -2 -1 0 +1 +2 +3 n/a
21. Supports are provided to increase access to service location.	-3 -2 -1 0 +1 +2 +3 n/a
Appropriate Language	
22. Service providers verbally communicate in the primary language of the child/family.	-3 -2 -1 0 +1 +2 +3 n/a
23. Written documentation regarding services/service planning is in the primary language of the child/family.	-3 -2 -1 0 +1 +2 +3 n/a
2C. MINIMAL RESTRICTIVENESS	AVERAGE RATING = ____
24. Services are provided in a comfortable environment.	-3 -2 -1 0 +1 +2 +3 n/a
25. Services are provided in the least restrictive and most appropriate environment.	-3 -2 -1 0 +1 +2 +3 n/a
2D. INTEGRATION AND COORDINATION	AVERAGE RATING = ____
26. There is ongoing two-way communication among and between all team members, including formal service providers, informal helpers (if desired by the family), and family members including the child.	-3 -2 -1 0 +1 +2 +3 n/a
27. There is a smooth and seamless process to link the child and family with additional services if necessary.	-3 -2 -1 0 +1 +2 +3 n/a

System of Care Practice Review

DOMAIN 3: Culturally Competent: Services are attuned to the cultural, racial, and ethnic background and identity of the child and family. <p style="text-align: right;">DOMAIN RATING: _____</p>

SUMMATIVE QUESTION	
3A. AWARENESS	AVERAGE RATING = ____
Awareness of Child/Family's Culture	
28. Service providers recognize that the child and family must be viewed within the context of their own cultural group and their neighborhood and community.	-3 -2 -1 0 +1 +2 +3 n/a
29. Service providers know about the family's concepts of health and family.	-3 -2 -1 0 +1 +2 +3 n/a
30. Service providers recognize that the family's culture, values, beliefs and lifestyle influence the family's decision-making process.	-3 -2 -1 0 +1 +2 +3 n/a
Awareness of Providers' Culture	
31. Service providers are aware of their own cultural values, beliefs and lifestyles and how these influence the way they interact with the child and family.	-3 -2 -1 0 +1 +2 +3 n/a
Awareness of Cultural Dynamics	
32. Service providers are aware of the dynamics inherent when working with families whose cultural values, beliefs and lifestyle may be different from or similar to their own.	-3 -2 -1 0 +1 +2 +3 n/a
3B. SENSITIVITY AND RESPONSIVENESS	AVERAGE RATING = ____
33. Service providers translate their awareness of the family's values, beliefs and lifestyle into action.	-3 -2 -1 0 +1 +2 +3 n/a
34. Services are responsive to the child and family's values, beliefs and lifestyle.	-3 -2 -1 0 +1 +2 +3 n/a
3C. AGENCY CULTURE	AVERAGE RATING = ____
35. Service providers recognize that the family's participation in service planning and in the decision making process is impacted by their knowledge/understanding of the expectations of the agencies/programs/providers.	-3 -2 -1 0 +1 +2 +3 n/a
36. Service providers assist the child and family in understanding/navigating the agencies they represent.	-3 -2 -1 0 +1 +2 +3 n/a
3D. INFORMAL SUPPORTS	AVERAGE RATING = ____
37. Service planning and delivery intentionally includes informal sources of support for the child and family.	-3 -2 -1 0 +1 +2 +3 n/a



Louis de la Parte
Florida Mental Health Institute

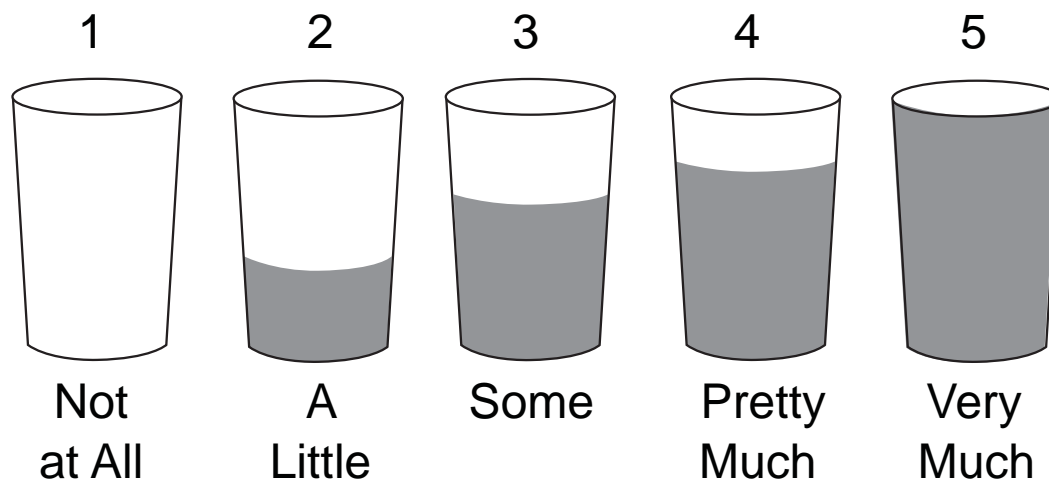
System of Care Practice Review

System of Care Practice Review

Check Most Appropriate on Scale Below

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not at all	A Little	Some	Pretty Much	Very Much

Rating Chart for Children.





Louis de la Parte
Florida Mental Health Institute

System of Care Practice Review

Consider including a stick figure for each formal provider and informal helper with the person's name and role written below each figure in the space below.



In a thorough assessment information is gathered about the following issues:

- Emotional
- Behavioral
- Medical
- Physical
- Intellectual
- Educational
- Social
- Recreational
- Vocational
- Cultural
- Spiritual
- Financial
- Legal
- Familial
- Residential
- Safety
- Self-Care
- Drug/Alcohol Use