TIES Only Survey
Pre-Test

Please provide us with the following information:

Participant Name: _____

Agency Name: _____

Agency Address: _____
_____

Date Completed: _____

Please complete all forms in full and return to the facilitator or research assistant.

Thank you for your time!

_____

Research Staff: Please place initials where appropriate.

Collected By: _____
Checked By: _____
Entered By: _____

Participant ID: _____   Agency ID: _____   Condition:_____
Date Completed: _____   RA Initials: _____

Clinician Demographic Form

Please answer each of the following questions:

1. How many total years have you been working in a child and adolescent mental health setting? _____

2. What is your profession?

    ☐ Administrator   ☐ Intake Worker   ☐ Social Worker

    ☐ Psychologist   ☐ Case Manager   ☐ Physician

    ☐ Other (please specify): _____

3. What is the highest educational degree you have attained?

    ☐ BA, BS   ☐ Master's Degree   ☐ Doctorate   ☐ MD

    ☐ Other (please specify): _____

4. Are you licensed or certified as a practicing mental health professional? ☐ Yes   ☐ No

    If <u>yes</u>:

        How many total years have you been practicing? _____
        Are you currently practicing? ☐ Yes   ☐ No

5. Please indicate your:

    Age: _____

    Gender: ☐ Male   ☐ Female

    Race/ethnicity: ☐ African American   ☐ Asian   ☐ Latino/Latina

                                 ☐ American Indian   ☐ Caucasian   ☐ Other: _____

6. Please rate your knowledge about engagement principles. Check one:

        ☐ Excellent   ☐ Good   ☐ Moderate   ☐ Low

Knowledge of Family Barriers and Engagement Principles

Instructions: Please complete all questions by circling the correct answer(s).

1. Which of the following are common perceptual barriers for families? (choose all that apply)

    Intelligence   Language

    Mistrust of mental health provider   Mental Health Stigma

2. Which of the following are common concrete barriers for families? (choose all that apply)

    Time   Insurance/Finances

    Fear   Competing priorities

3. What percentage of youth with mental health needs have inadequate or no contact with mental health services?

    30%   50%

    75%   90%

4. What percentage of families schedule intake appointments but never attend?

    30%   50%

    75%   90%

5. Which of the following is not a major barrier to urban clients attending mental health appointments?

    Poverty   Single parent status

    Stress   Crime

6. True or False: Concrete barriers keep more families from engaging in mental health treatment than perceptual barriers

7. Which of the following is not a goal of Telephone Engagement?

    Clarify the need for mental health care   Answer the phone as quickly as possible

    Verify insurance coverage   Problem solve around barriers to care

8. Identify two strategies for engaging families during the first phone contact.

    Avoid asking things that might upset   Make jokes to lighten the situation
    the parent

    Ask parents up front about   Consider past experiences with mental health care
    issues

9. Each intake call should be treated as a…(choose one)

   Burden   Routine call

   Friend   Crisis

10. Which of the following help to clarify the need for mental health care? (choose all that apply)

    Defining the concern   Reinforcing what the parent has done well

    Finding out who else is involved   Asking the client to repeat him/herself
    with the child

11. Increasing caregiver investment and efficacy involves…(choose all that apply)

    Reinforcing parents for what they   Asking parents to sign a treatment contract
    have done well

    Telling the parent your goals for   Seeking the parent's perspective on the
    treatment   issue

12. True or False: Problem solving is essential in engaging families.

13. Identify the engagement techniques for concluding the call. (choose all that apply)

    Encourage the caller to make a list   Ask the caller how he/she will discuss the
    of treatment goal and concerns   appointment with the child

    Clarify the timeline of the first   Follow up the call with a reminder call/
    appointment   appointment card

14. True or False: Families are more likely to attend if they are skeptical about treatment.

15. True or False: he first clinical appointment is important because it is when you collect diagnostic information.

16. Circle two critical elements of the engagement process in the first appointment.

    Ask about past mental illness   Clarify the helping process

    Focus on immediate concerns   Clarify insurance information

17. Allowing time to build trust is a component of which critical element of the engagement process:

    Focus on practical concerns   Clarify the helping process for the client

    Develop a collaborative relationship Identify barriers to help-seeking

18. True or False: Barriers to treatment should only be assessed at the beginning and end of treatment.

19. Developing a collaborative relationship with clients involves:

Committing to the partnership   Being client-centered

Helping the family to tell their own story   Being directive in your sessions

20. True or False: Vulnerable populations are more likely to stay in treatment because they need treatment the most.

21. The goals for retaining families are…. (circle all that apply)

Validate families   Remind families of their appointments

Identify barriers   Empower parents

22. True or False: Cultural and racial differences between provider and client do not affect treatment retention.

23. Which of the following is the strongest predictor of treatment success:

Wanting treatment   Caring provider

Convenient appointments   Therapeutic alliance

24. True or False: Providing positive feedback to parents helps retain families in treatment.

25. How many sessions are required for half of patients to obtain clinically significant results?

None   One to three

Three to five   More than eight

26. How many families terminate services prematurely?

40%   60%

55%   75%

27. Which of the following are not successful goals for discharge planning?

Start planning at beginning of treatment   Adjust treatment plan as needed

Help families transition to new services appropriate   Discharge when provider deems

28. True or False: Treatment goals and discharge goals are not the same thing.

29. If family is not ready to end services, the provider should…

    Discuss it at a later time   Discuss what needs to take place for discharge

    End services anyway   Discuss how the family defines success

30. True or False: If family is not making progress, adjust treatment plan as needed in order to help family reach goals.

Please continue to the next set of questions.

Measure of Beliefs about Participation in Family-Centered Service Delivery

Instructions: Please circle your response for each statement.

	Strongly Disagree		Neutral			Strongly Agree
1. Service providers will have difficulty working with families or other service providers in implementing a family-centered philosophy	1	2	3	4	5	6	7
2. Family-centered service means that service providers will sacrifice their professional integrity	1	2	3	4	5	6	7
3. As compared to traditional practice, service providers using a family-centered approach will be more satisfied with the care they provide to children	1	2	3	4	5	6	7
4. Parents should always have the ultimate responsibility for making decisions about their child's rehabilitation services	1	2	3	4	5	6	7
5. A family-centered approach will reduce the quality of services for children (because less time will be spent providing direct services to the child)	1	2	3	4	5	6	7
6. In a family-centered approach, service providers will be unsure how to share roles with families	1	2	3	4	5	6	7
7. Participation in services in a family-centered way is essential	1	2	3	4	5	6	7
8. Parents' lack of understanding of what family-centered services really means will affect the ideal practice of family-centered service	1	2	3	4	5	6	7
9. A family-centered approach will be more beneficial to children than a traditional approach to service delivery	1	2	3	4	5	6	7
10. It is important to attend to family priorities for goals and services (even when these priorities differ a lot from the priorities of the service provider)	1	2	3	4	5	6	7
11. In a family-centered approach, families will "follow through" better with treatment plans because they are partners with service providers	1	2	3	4	5	6	7
12. Family-centered service will reduce service providers' stress because the responsibility for decision-making will be shared between parents and service providers	1	2	3	4	5	6	7
13. I have the skills and abilities needed to participate in a family-centered approach to service	1	2	3	4	5	6	7
14. Compared to traditional practice, family-centered service will increase the work of service providers	1	2	3	4	5	6	7

	Strongly Disagree			Neutral			Strongly Agree
15. Family-centered service will take more time to implement than traditional service delivery	1	2	3	4	5	6	7
16. It is important to consider the needs of all family members in rehabilitation service delivery (e.g., parents, siblings, grandparents).	1	2	3	4	5	6	7
17. A family-centered approach will make service delivery effective because everyone on the team is working toward the same goal	1	2	3	4	5	6	7
18. Encouraging the involvement of all family members is a good thing	1	2	3	4	5	6	7
19. A family-centered approach will not meet the needs of parents	1	2	3	4	5	6	7
20. I am confident that I am able to work with others in a family-centered way	1	2	3	4	5	6	7
21. Service providers' preferences, desires, or opinions regarding their role in the delivery of services will create obstacles affecting the ideal practice of family-centered services	1	2	3	4	5	6	7
22. In a family-centered approach, families will be required to take on responsibilities they would rather have service providers perform	1	2	3	4	5	6	7
23. Family-centered service will increase the efficiency of service delivery by improving communication among service providers and families	1	2	3	4	5	6	7
24. Service providers' lack of familiarity, experience, or training in matters related to family-centered service will affect the ideal practice of family-centered services	1	2	3	4	5	6	7
25. It is essential to encourage and have family members choose how much they want to be involved in making decisions about their child's services	1	2	3	4	5	6	7
26. I intend to participate in services in a family-centered way	1	2	3	4	5	6	7
27. I am able to do things expected of me according to a family-centered approach	1	2	3	4	5	6	7
28. Parents' lack of awareness of expectations of them (according to principles of family-centered service) will affect the ideal practice of family-centered service.	1	2	3	4	5	6	7

Adapted from G. King et al., 2003