

# SELF-ASSESSMENT TOOL

NATIONAL ASSESSMENT CENTER ASSOCIATION



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# SELF-ASSESSMENT TOOL

## NATIONAL ASSESSMENT CENTER ASSOCIATION

### Overview:

In February 2021, the National Assessment Center Association (NAC) released an updated framework of the Assessment Center Model that was inclusive of standards and criteria in an effort to align Centers across the Country. The updated Framework is grounded in research and best practices. The Framework identifies standards for Assessment Centers, criteria needed to achieve those standards, outputs, and suggested quality assurance measures. It also identifies short-, medium-, and long-term outcomes with the intention of creating consistency among Centers across the United States and the ability to identify and advocate for a collective impact among Centers.

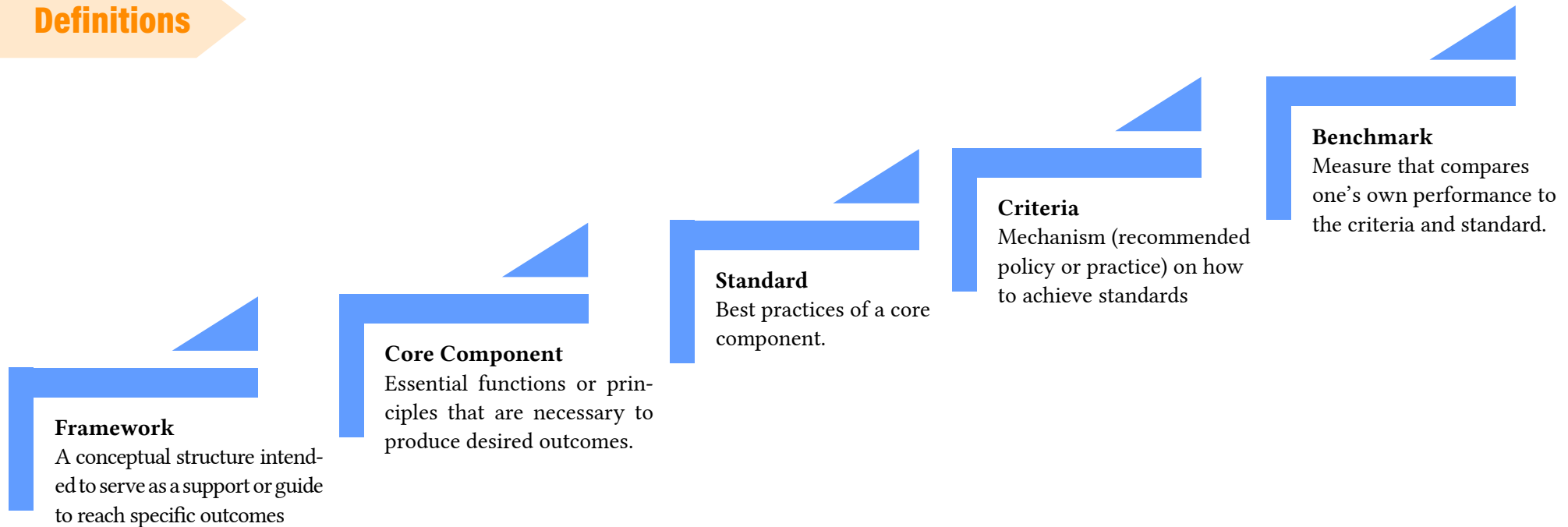
The purpose of this self-assessment tool is to help Centers examine, review, and reflect on their current operations and to what extent those operations align with the Assessment Center Framework. This tool should help Centers gauge not only where there is alignment, but also where opportunities exist for improvement and enhancement. Self-assessment tools can serve as goal-setting tools for organizations and help inform strategic planning and continuous quality improvement efforts.

### Forming a Self-Assessment Team

Completion of this tool should not be the responsibility of any one person. Prior to completing the tool, the Assessment Center should assemble a self-assessment team. Recommended team members include:

- ▶ Assessment Center Staff
- ▶ Assessment Center Directors/leaders
- ▶ Assessment Center Board Members/Advisory Members
- ▶ Youth and Family Members
- ▶ System Stakeholders: Child Welfare, Justice, Education, Law Enforcement
- ▶ State/County Representatives
- ▶ Community Providers

## Definitions



## Instructions

The rating categories below were developed to be consistent with the EPIS framework (Exploration, Preparation, Implementation, and Sustainment) that guides technical assistance efforts supporting implementation of evidence-based practices in child welfare and social service settings (see Aarons, Hurlburt, & Horwitz, 2011). Each benchmark is rated using the following scale:

- ▶ *Not a Current Practice* = No knowledge of a policy, practice, or procedure
- ▶ *Not Under Consideration* = Center has knowledge of a policy, practice, or procedure, but cannot achieve this standard at the current time.
- ▶ *Practice Under Consideration* = Policy, practice, or procedure has been discussed or considered for development but is not currently part of routine AC operations
- ▶ *Informal Practice* = Policy, practice, or procedure is not a part of formal AC operations but is used on an ad hoc basis by Center staff
- ▶ *Formal Policy: Inconsistent Practice* = Policy is a part of formal AC operating documents, but implementation of policy is inconsistent among staff.
- ▶ *Formal Practice* = Policy, practice, or procedure is a routine part of formal operations (e.g., relevant staff are trained, supervised, and/or outcomes are monitored)

Members of the Self-Assessment Team responsible for reviewing and rating benchmarks should document key observations that support their ratings in the “Selection Justification” column. Justifications should include who staff talked to, data or documents used, etc. This helps to explain why and how the rating was selected specifically to ensure consistency if staff complete the tool in the future to know the rationale and mechanism used to reach the rating selected. Each benchmark should receive a single rating by the Self-Assessment Team. When there are divergent views about the best choice for a benchmark rating, the team should carefully consider all viewpoints before settling on a rating that reflects the consensus of the team. If some participants dissent from this rating, their view and the evidence for it should be noted in the narrative conclusions section (see below). Key observations can be documented on the worksheet (Notes Supporting Rating) and should include concrete findings that justify the benchmark rating.

After all benchmarks within the Core Component have been rated and summed, the Self-Assessment Team can review these ratings and come to an overall conclusion as to whether practices benchmarked within the Core Component is being fully implemented or whether specific elements have either not been considered or represent an ad hoc or informal practice that needs to be strengthened. Each Core Component does not receive a final numerical score. Instead, the Self-Assessment Team uses the EPIS framework to develop an overall conclusion (referred to as Element Summary rating below) regarding their practices within each Core Component. Each element should receive a rating as Exploration, Preparation, Implementation, or Sustainment reflecting the applicable EPIS framework phase. The following table can help the team to link benchmark ratings to the Element Summary rating:

SELF-ASSESSMENT ELEMENT RATINGS	EPIS FRAMEWORK /PHASE
Majority of the benchmarks are rated <i>Not a Current Practice</i>	<b>Exploration Phase.</b> In this phase, the Assessment Center has not yet considered or are just beginning to consider the criteria for implementation of the Core Component. Assessment Centers should consider the practices and procedures they need to target for improvement. This can involve setting a goal for the key benchmarks to target for strategic planning. The Self-Assessment Team should identify barriers and challenges to changing the current practice. Guidance may be needed from external sources to develop an initial plan for system-level change.
Majority of the benchmarks are rated <i>Not Under Consideration</i>	<b>Exploration Phase.</b> In this phase, the Assessment Center has knowledge of a policy, practice, or procedure, but cannot implement the criteria and standard at the time. Assessment Centers should consider the practices and procedures they need to target for implementation. This can involve setting a goal for the key benchmarks to target for strategic planning. The Self-Assessment Team should identify barriers and challenges to changing the current practice. Guidance may be needed from external sources to develop an initial plan for system-level change.
Majority of benchmarks are rated as <i>Under Consideration or Informal Practice</i>	<b>Preparation Phase.</b> In this phase, the Assessment Center has practices that have involved some level of planning, where barriers and challenges to implementing the practice have already been identified and initial steps have been taken to overcome the barriers. However, there has not been a systematic protocol or consistent effort to implement the criteria.
Majority of benchmarks are rated as <i>Informal Practice</i>	<b>Preparation Phase.</b> In this phase, the Assessment Center has practices and procedures aligning with the criteria that have been operationally defined (e.g., in a working draft) and are being piloted or implemented by a small number of staff. In order to formally implement the practices or procedures agency- or program-wide, steps of the Preparation Phase likely need to be completed before moving to the next phase.
Majority of the benchmarks are rates as <i>Formal Policy; Inconsistent Practice</i>	<b>Implementation Phase.</b> In this phase, the Assessment Center has formally adopted policies, but the implementation of policies into daily operation and practice are inconsistent or non-existent. Support is needed to ensure consistent effort in implementing criteria.
Majority of the benchmarks are rated as a <i>Formal Policy and Practice</i>	<b>Implementation Phase.</b> The Assessment Center has formally adopted practices that are supported by policy. There is general knowledge of the criteria and standards evidenced staff member's training and working knowledge of the policy or practice.
	<b>Sustainment Phase.</b> The Assessment Center has practices and procedures that have been implemented system wide. The practice is considered ingrained and stable throughout the system. Practices in the Sustainment phase are those that are regularly monitored through quality assurance processes and there is a commitment by the Assessment Center to maintain the practice (e.g., practice is consistent with the mission statement, training is routine and applicable to all staff, funding is secure).



# CORE COMPONENT: SINGLE POINT OF CONTACT

**STANDARD 1: INTENTIONAL EFFORT HAS BEEN MADE TO ENSURE COMMUNITY CONSENSUS AND CROSS SYSTEM COLLABORATION IN DEVELOPING THE DOMAIN(S), REFERRAL SOURCES, AND TARGET POPULATION TO BE SERVED BY THE ASSESSMENT CENTER (AC).**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: YOUTH AND FAMILIES ARE ENGAGED IN THE CONSENSUS, GOVERNANCE, OPERATION, AND/OR OVERSIGHT OF THE ASSESSMENT CENTER (FRAMEWORK, PG.10)</b>							
Our AC has a formal advisory committee or governance board with organizing documents (bylaws, charter, etc.).							
Our AC has organizing (bylaws, charter, etc.) documents that require positions be allocated to youth and family participation.							
Youth and families are currently active members on our board/committee.							
<b>CRITERIA 1.1 TOTAL:</b>							
<b>CRITERIA 1.2: ASSESSMENT CENTERS HAVE CLEARLY DEFINED THEIR DOMAINS, POINTS OF CONTACT, AND TARGET POPULATION. (FRAMEWORK, PG.10)</b>							
Policies and procedures clearly define the AC's target population. Contact points listed pgs. 13 - 17.							
Formal agreements or MOUS are in place that dictate how the AC serves as a point of contact for the target population.							
For voluntary access, Centers have websites, social media pages, etc. that clearly define who can access the Center, why they would access the Center and how.							
<b>CRITERIA 1.2 TOTAL:</b>							

**CRITERIA 1.3: THE GOVERNANCE OR ADVISORY BOARD ACCURATELY REFLECTS THE COMMUNITY IT SERVES INCLUDING THE TARGET POPULATION. (FRAMEWORK, PG.10)**

Practices of the governing board/advisory committee regularly analyze the community's demographics (race, ethnicity, gender, sexual orientation, etc.) and actively seek to reflect those demographics within the board or committee.							
Those defined in your target population are active members of the governance or advisory board.							
<b>CRITERIA 1.3 TOTAL</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE
Criteria 1.1 Sum Total						
Criteria 1.2 Sum Total						
Criteria 1.3 Sum Total						
<b>STANDARD TOTAL:</b>						

**STANDARD 2: YOUTH AND FAMILIES HAVE AN ACCESSIBLE, COORDINATED, AND STREAMLINED APPROACH TO IDENTIFY OPPORTUNITIES FOR SERVICES AND SUPPORTS THROUGH A PARTICIPATORY PROCESS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<p><b>CRITERIA 2.1: ASSESSMENT CENTERS HAVE A WRITTEN AGREEMENT, POLICIES, OR PROCEDURES WITH ONE OR MORE OF THE FOLLOWING THAT FORMALIZES THE REFERRAL PROCESS AND OUTLINES HOW THE CENTER SERVES AS A CENTRAL POINT OF CONTACT:</b></p> <ul style="list-style-type: none"> <li>▶ Juvenile Justice: Law Enforcement, courts (including probation &amp; pretrial), prosecutor, judge, child welfare, probation, defense council, youth, and parents.</li> <li>▶ Child Welfare: Child welfare organization or law enforcement</li> <li>▶ Prevention: Law Enforcement, youth and parents, schools, faith community, etc.</li> </ul> <p style="text-align: center;"><b>(FRAMEWORK, PG.10)</b></p>							
The AC has written agreements with one or more of the listed stakeholders that details expectations of both parties.							
The AC has written policies and procedures for staff when receiving referrals from one or all stakeholders.							
<b>CRITERIA 2.1 TOTAL</b>							
<p><b>CRITERIA 2.2: ASSESSMENT CENTERS HAVE SOUND AND OBJECTIVE REFERRAL PROTOCOLS FOR LAW ENFORCEMENT AND COMMUNITY TO FOLLOW TO ENSURE FAIRNESS AND REDUCE RACIAL AND ETHNIC DISPARITIES. (FRAMEWORK, PG.10, 11)</b></p>							
Policies and procedures articulate objective eligibility criteria for who can be served by the AC.							

AC has written agreements with referring parties that detail how to make a referral, eligibility criteria, and what information is needed.							
AC has referral forms (written or electronic).							
Policies and procedures require Centers to analyze demographics of youth with the referral source and reason in order to address disproportionality and disparate treatment of one or more populations.							

<b>CRITERIA 2.2 TOTAL</b>							
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<b>CRITERIA 2.3: ASSESSMENT CENTERS PROVIDE PREVENTATIVE ACCESS THROUGH YOUTH, FAMILY, COMMUNITY, AND SCHOOL REFERRALS. (FRAMEWORK, PG.11)</b>
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Policies and procedures allow youth and families to access the Assessment Center on a voluntary basis.							
The AC conducts frequent community outreach to ensure awareness of preventative access.							

<b>CRITERIA 2.2 TOTAL</b>							
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	<b>NOT A CURRENT PRACTICE OR POLICY</b>	<b>NOT UNDER CONSIDERATION</b>	<b>PRACTICE OR POLICY UNDER CONSIDERATION</b>	<b>INFORMAL PRACTICE</b>	<b>FORMAL POLICY; INCONSISTENT PRACTICE</b>	<b>FORMAL POLICY AND CONSISTENT PRACTICE</b>
Criteria 2.1 Sum Total						

Criteria 2.2 Sum Total						
Criteria 2.3 Sum Total						
<b>STANDARD TOTAL:</b>						

### Standard 3: Assessment Centers have a trauma-informed environment and process.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: EXPECTATIONS OF THE PROCESS ARE COMMUNICATED TO YOUTH AND FAMILIES IN THEIR OWN LANGUAGE IN WRITING AND VERBALLY. (FRAMEWORK, PG.11)</b>							
Policies and procedures require all youth and families to be given written materials, in their own language, explaining the AC process prior to beginning.							
Policies and procedures require all youth and families to be given a verbal explanation, in their own language, of the AC process prior to beginning.							
The AC has posted written explanations of the AC process in public places (i.e., waiting rooms, websites, etc.).							
<b>CRITERIA 3.1 TOTAL</b>							

**CRITERIA 3.2: AN ASSESSMENT CENTER'S PHYSICAL SPACE FOLLOWS TRAUMA-INFORMED BEST PRACTICES. (FRAMEWORK, PG.11, 12)**

The AC can reference publications or resources on trauma-informed best practices that have influenced their physical space.							
The AC can point to items within the physical space that are representative of the community to include language and art.							
AC physical space (all locations) allows for privacy and confidentiality when conducting screening and assessment.							
<b>CRITERIA 3.2 TOTAL</b>							

**CRITERIA 3.3: YOUTH ARE NOT TRANSPORTED TO AN ASSESSMENT CENTER BY LAW ENFORCEMENT UNLESS THEY ARE ARRESTED AND, PER LOCAL POLICY, THERE IS IMMEDIATE NEED TO SCREEN FOR RISK AND NEED OR LAW ENFORCEMENT HAVE A YOUTH IN-CUSTODY AND ARE UNABLE TO LOCATE A GUARDIAN OR SUITABLE ADULT TO RELEASE YOUTH TO. (FRAMEWORK, PG.11)**

AC policies and procedures restrict youth being transported to the Center by law enforcement unless there is imminent risk and/or need.							
AC policies and procedures prohibit youth from being restrained (i.e., handcuffs or shackles) unless there are serious safety concerns.							
<b>CRITERIA 3.3 TOTAL</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE
Criteria 3.1 Sum Total						
Criteria 3.2 Sum Total						
Criteria 3.3 Sum Total						
<b>STANDARD TOTAL:</b>						

**Standard 4: Assessment Centers have a data collection and analysis process to ensure the referral and intake process is equitable, fair, and transparent.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: CENTERS ARE COLLECTING AND ANALYZING THE REFERRALS SOURCES, HOW OFTEN REFERRALS ARE SENT, AND THE REASONS FOR REFERRALS. (FRAMEWORK, PG.10, 11)</b>							
The AC database requires the input of referral source and reason for referral on each youth and family served.							
Policies and procedures require frequent analysis of referrals.							
The analysis is frequently reported to AC staff, board, and stakeholders.							
<b>CRITERIA 4.1 TOTAL</b>							

**CRITERIA 4.2: ASSESSMENT CENTERS ARE ANALYZING DEMOGRAPHICS OF YOUTH WITH THE REFERRAL SOURCES AND REFERRAL REASONS. (FRAMEWORK, PG.10,11)**

The AC policies and procedures require staff to input demographics of youth into their internal database.							
Policies and procedures require frequent analysis of referral sources and reason with demographics of youth services.							
AC demonstrates they take action to address any potential disproportionality or disparate treatment identified in the analysis.							
The analysis is frequently reported to AC staff, board, and stakeholders.							

**CRITERIA 4.3: ASSESSMENT CENTERS TRACK AND ANALYZE YOUTH/FAMILIES REFERRED TO AN ASSESSMENT CENTER VERSUS WHO ACCESS (ENGAGE IN SCREENING/ASSESSMENT) THE ASSESSMENT CENTER. (FRAMEWORK, PG.10, 11)**

AC policies and procedures require staff to input into a database whether a referred youth engaged in the AC process.							
Policies and procedures require frequent analysis of youth engaged in the AC process including their demographics.							



The analysis is frequently reported to AC staff, board, and stakeholders.							
<b>CRITERIA 4.3 TOTAL</b>							

	<b>NOT A CURRENT PRACTICE OR POLICY</b>	<b>NOT UNDER CONSIDERATION</b>	<b>PRACTICE OR POLICY UNDER CONSIDERATION</b>	<b>INFORMAL PRACTICE</b>	<b>FORMAL POLICY; INCONSISTENT PRACTICE</b>	<b>FORMAL POLICY AND CONSISTENT PRACTICE</b>
Criteria 4.1 Sum Total						
Criteria 4.2 Sum Total						
Criteria 4.3 Sum Total						
<b>STANDARD TOTAL:</b>						

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							

Core Component Summary Rating	Exploration	Preparation	Implementation	Sustainment
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- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
  
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement:
  
- ▶ List the changes recommended by the team:

# CORE COMPONENT: SCREENING & ASSESSMENT

**Screening:** Screening is a structured, formal, validated process. Its purpose is to determine which youths warrant immediate attention and intervention and which may need more comprehensive assessment. It evaluates for the possible presence of a problem but does not diagnose or determine the severity of need, risk, or diagnoses.

**Assessment:** Assessment is a comprehensive and individualized examination of the psychosocial needs and problems, informed by screening that results in recommendations for treatment, services, or other resources. Assessment generally involves more specialized staff and includes multiple sources of information beyond a youth self-report.

- ▶ **Tier I Assessment Center:** An Assessment Center that conducts screening only and refers out for further assessment.
- ▶ **Tier II Assessment Center:** An Assessment Center that conducts both screening and assessment.

## PLEASE SELECT ONE OF THE FOLLOWING:

Our Center is a Tier 1 Center:

Our Center is a Tier 2 Center:

# SCREENING

## STANDARD 1: ASSESSMENT CENTERS HAVE A SCREENING PROCESS THAT INVOLVES DOMAINS RELEVANT TO THEIR TARGET POPULATION/COMMON NEEDS FOUND IN THEIR TARGET CRITERIA.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: CENTERS HAVE REVIEWED PROFESSIONAL LITERATURE TO IDENTIFY COMMON NEEDS FOR THE TARGET POPULATION. (FRAMEWORK, PG.22)</b>							
The AC regularly reviews professional literature to identify needs of the AC's target population.							
AC staff receiving briefings and/or trainings on current professional literature specific to the target population served by the AC.							
<b>CRITERIA 1.1 TOTAL:</b>							
<b>CRITERIA 1.2: CENTERS LOOK FOR AVAILABLE SCREENING TOOLS THAT PROVIDE COVERAGE OF COMMON NEEDS. (FRAMEWORK, PG.22)</b>							
The AC regularly reviews the available professional literature to maintain up-to-date knowledge on screening tools linked to common needs of the target population							

AC staff receiving briefings and/or trainings on current professional literature specific to screening tools linked to common needs of the target population.							
<b>CRITERIA 1.2 TOTAL:</b>							
<b>CRITERIA 1.3: SELECTION OF SCREENING TOOLS IS INFORMED BY READING LEVEL, ADMINISTRATION TIME TO PROMOTE ADEQUATE COMPREHENSION AND UNDERSTANDING. (FRAMEWORK, PG.22)</b>							
The AC can reference the reading level of each selected tool(s) and that reading level is at or below reading level of target population.							
The AC can reference the administration time needed for each selected tool(s) utilized in the screening process.							
<b>CRITERIA 1.3 TOTAL</b>							

**STANDARD WORKSHEET:**

SCREENING TOOL	TOPIC FOCUS	READING COMPREHENSION LEVEL	ADMINISTRATION TIME

## SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 1.1 Sum Total							
Criteria 1.2 Sum Total							
Criteria 1.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 2: ASSESSMENT CENTERS HAVE ESTABLISHED A "SCREENING SYSTEM" THAT IS EVIDENCE-BASED.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 2.1: SCREENING TOOLS UTILIZED BY ASSESSMENT CENTERS ARE EVIDENCE-BASED MEANING THEY HAVE DEMONSTRATED RELIABILITY AND VALIDITY FOR THE POPULATION OF YOUTH SERVED BY THAT ASSESSMENT CENTER. (FRAMEWORK, PG.22, 23)</b>							
The AC can reference the research for each selected tool that shows reliability and validity for all target populations served.							
<b>CRITERIA 2.1 TOTAL</b>							

**CRITERIA 2.2: SCREENING TOOLS USED HAVE AN ESTABLISHED CUT-SCORE AND RESPONSE PROTOCOL. (FRAMEWORK, PG.22, 23)**

For each screening tool used, the AC has incorporated cut-scores (or locally developed decision rules) based on the available professional literature.							
For each screening tool included in the screening process, decision thresholds and follow-up responses are documented in policy and procedure							
<b>CRITERIA 2.2 TOTAL</b>							

**CRITERIA 2.3: IN THE ABSENCE OF A CUT SCORE ON A SCREENING TOOL, THE ASSESSMENT CENTERS HAS SOUGHT OUT APPROPRIATE CONSULTATION FROM PROFESSIONALS TO DEVELOP LOCAL DECISIONS AND CREATE CUT SCORES. (FRAMEWORK, PG.22, 23)**

For screening tools without cut scores established by the tool developer, AC can demonstrate consultation from professionals in establishing their cut scores/decision thresholds.							
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	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE
Criteria 2.1 Sum Total						
Criteria 2.2 Sum Total						
Criteria 2.3 Sum Total						
<b>STANDARD TOTAL:</b>						

## STANDARD WORKSHEET

SCREENING TOOL	POPULATIONS WITH DEMONSTRATED RELIABILITY	POPULATIONS WITH DEMONSTRATED VALIDITY	CUT SCORES	RESPONSE PROTOCOLS

### STANDARD 3: ASSESSMENT CENTER STAFF ARE SUPPORTED THROUGH ONGOING TRAINING ON SCREENING BEST PRACTICE.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: ALL STAFF CONDUCTING SCREENING WITH YOUTH ARE TRAINED ON AND AWARE OF LOCAL POLICY AND PROCEDURE AS IT RELATES TO THE USE OF EACH SCREENING TOOL IN ACCORDANCE WITH THE MANUAL AND BEST PRACTICES. (FRAMEWORK, PG.22, 23)</b>							
Policies, procedures, and onboarding practices require staff conducting screening functions to receive training on each screening tool.							
Policies, procedures, and onboarding practices provide staff with manuals and materials associated with each screening tool.							



<p>Policies, procedures, and onboarding practices train all staff conducting screening on associate cut scores and response protocols.</p>							
<p><b>CRITERIA 3.1 TOTAL</b></p>							
<p align="center"><b>CRITERIA 3.2: STAFF RECEIVE BOOSTER TRAINING TO ENSURE FIDELITY TO LOCAL PROCESS AND THAT SCREENING REMAINS CONSISTENT WITH BEST PRACTICE. (FRAMEWORK, PG.22, 23)</b></p>							
<p>Policies and procedures require staff to receive annual booster trainings on screening tools, cut scores, and response protocols.</p>							
<p>Policies and procedures require staff to receive annual booster trainings on screening best practices.</p>							
<p><b>CRITERIA 3.2 TOTAL</b></p>							
<p align="center"><b>CRITERIA 3.3: ASSESSMENT CENTERS HAVE POLICY AND PROTOCOL TO ENSURE UNIFORMITY IN THE WAY THE SCREENING IS CONDUCTED. (FRAMEWORK, PG.22, 23)</b></p>							
<p>The AC leadership annually conducts staff observations of the screening process to ensure screening is done in accordance with best practices and local P&amp;P.</p>							
<p>The AC leadership annually reviews screening tool results, scores, and responses by each staff member to ensure screening is done in accordance with best practices and local P&amp;P.</p>							

The AC leadership has a method of follow-up booster training and coaching for any staff member whose performance falls below the screening process requirements of the local P&P.							
<b>CRITERIA 3.3 TOTAL</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 3.1 Sum Total							
Criteria 3.2 Sum Total							
Criteria 3.3 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 4: ASSESSMENT CENTERS PROVIDE SCREENING OF YOUTH’S STRENGTHS AND NEEDS IN A TIMELY MANNER.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: FOR CENTERS WHO ALLOW FOR CRISIS REFERRALS OR TRANSPORTATION BY A LAW ENFORCEMENT OFFICER, YOUTH ARE SCREENED WITHIN 6 HOURS. (FRAMEWORK, PG. 23)</b>							
An AC's electronic database allows for input of date and time youth arrive at the facility.							

Policies and procedures require screening occur within six hours of arrival except in cases of documented impairment or refusal.							
Policies and practices require annual data analysis to ensure youth are screened within 6 hours.							
<b>CRITERIA 4.1 TOTAL</b>							
<b>CRITERIA 4.2: FOR CENTERS WHO ENGAGE YOUTH AND FAMILIES THROUGH AN APPOINTMENT-BASED APPROACH, YOUTH AND FAMILIES ARE OUTREACHED TWO BUSINESS DAYS AFTER THE REFERRAL IS RECEIVED. (FRAMEWORK, PG. 23)</b>							
An AC's electronic database allows for input of date and time referral is received.							
An AC's electronic database allows for input of date and time staff members attempt to contact youth and family.							
Policies, procedures, and practices require staff to outreach youth and families within two business days after the referral is received.							
Policies, procedures, and practices require data analysis to ensure youth and families are outreached within two business days.							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 4.1 Sum Total							
Criteria 4.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 5: ALL YOUTH WITH AN IDENTIFIED NEED DURING THE SCREENING PROCESS ARE REFERRED (INTERNALLY OR EXTERNALLY) FOR FURTHER ASSESSMENT IF NEEDS ARE NOT ALREADY BEING ADDRESSED.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 5.1: CENTERS HAVE CLEAR, DOCUMENTED RESPONSE PROTOCOLS FOR EACH SCREENING TOOL TO INCLUDE FOLLOW-UP WITH YOUTH AND FAMILY DISCUSSING THE RESULTS OF THE SCREENING PROCESS. (FRAMEWORK, PG. 25)</b>							
For each screening tool used, policy and procedures dictate the response protocol based on the identified cut score or locally developed decision threshold.							
Policies and procedures require Center staff to conduct a secondary screening that includes inquiry on duration of need, onset, frequency, and severity.							

Policies and procedures require staff to review the results of the screening process with youth and families.							
<b>CRITERIA 5.1 TOTAL</b>							
<b>CRITERIA 5.2: YOUTH SCREENED-IN ON ONE OR MORE DOMAINS RECEIVED AN APPROPRIATE FOLLOW-UP AND REFERRAL FOR FURTHER ASSESSMENT BASED ON RESULTS OF THE SCREENING PROCESS. (FRAMEWORK, PG. 25, 26)</b>							
Policies and procedures require youth “screened in” on one or more domains receive a follow-up assessment (Tier II) or referral (Tier I) to the most appropriate, community-based assessment provider unless are confined to basic needs (e.g, housing, financial insecurity)							
The AC has conducted service mapping (see accountability core component) to best identify assessment service providers (Tier I ACs)							
ACs have a data process to track the number and type of referrals provided post-screening and determine match between identified needs and referral type.							
ACs examine the screening needs/referral match data on an annual basis and utilize these results to monitor and modify referral practices.							
<b>CRITERIA 5.2 TOTAL</b>							

**CRITERIA 5.3: REFERRALS ARE PROVIDED CONSISTENT WITH CASE MANAGEMENT STANDARDS AS INCORPORATED INTO LOCAL POLICIES AND PROCEDURES.**

SEE CASE MANAGEMENT SECTION ON PAGE 75

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 5.1 Sum Total							
Criteria 5.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 6: ASSESSMENT CENTERS HAVE A DATA COLLECTION AND ANALYSIS PROCESS TO ENSURE THE SCREENING PROCESS IS EQUITABLE, FAIR, AND TRANSPARENT.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 6.1: CENTERS FREQUENTLY COLLECT AND ANALYZE DATA TO ENSURE THE PROPORTION OF YOUTH WHO SCREEN-IN VS THOSE WHO SCREEN OUT ARE IN ALIGNMENT WITH EVIDENCE-BASE. (FRAMEWORK, PG. 23)</b>							
An AC's electronic database allows for input of screening tool results.							

An AC's electronic database allows staff to indicate whether youth were "screened in" or screened out" based on the results and follow-up for each tool used in the screening process.							
AC staff annually review screening data to ensure the proportion of youth screened in and screened out for each screening tool is consistent with the available professional literature							
<b>CRITERIA 6.1 TOTAL:</b>							
<b>CRITERIA 6.2: CENTERS HAVE A PROCESS TO ANALYZE AND REPORT OUT TO FAMILY, COMMUNITY, AND STAKEHOLDERS THE NEEDS OF YOUTH IDENTIFIED FROM SCREENING. (FRAMEWORK, PG. 23)</b>							
The AC has a documented process that results in an annual summary report of the AC's screening process including at a minimum the number of screens conducted, results of screening tools, referral rates, and demographics of youth served through the screening process.							
The AC has a mechanism to provide an annual summary report to families served, referral partners, and local stakeholders.							
<b>CRITERIA 6.2 TOTAL:</b>							

**CRITERIA 6.3: CENTERS HAVE A PROCESS TO ENSURE THE PREVIOUS TWO CRITERIA INFORM CHANGES/REVISIONS TO THE SCREENING PROCESS. (FRAMEWORK, PG. 23)**

The AC has a documented continuous quality improvement process that uses information from 6.1 & 6.2 to improve screening process, use of specific tools, and staff response protocols.							
<b>CRITERIA 6.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 6.1 Sum Total							
Criteria 6.2 Sum Total							
Criteria 6.3 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 7: YOUTH AND FAMILIES ARE TREATED AS PARTNERS IN THE SCREENING PROCESS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
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**CRITERIA 7.1: CENTERS HAVE POLICIES AND PROCEDURES THAT ENSURE YOUTH KNOWINGLY AND VOLUNTARILY CONSENT TO THE SCREENING PROCESS. (FRAMEWORK, PG. 24)**

Policies and procedures require staff to disclose to youth and families the purpose of the screening process, content domains covered by each screening tool, how the screening information will be used, and who will have access to the results of the screening process							
<b>CRITERIA 7.1 TOTAL:</b>							



**CRITERIA 6.2: CENTERS HAVE POLICIES FOR STAFF TO INFORM YOUTH AND FAMILIES THAT SELF-ADMINISTERED SCREENING TOOLS ARE VOLUNTARY. (FRAMEWORK, PG. 24)**

Policies, procedures, and practices exist that provide all youth and families the right to refuse (e.g., not complete a screening tool).							
The AC has a method of tracking and documenting refusal rates per screening tool.							

**CRITERIA 7.2 TOTAL:**
**CRITERIA 6.3: CENTERS HAVE POLICIES AND PROCEDURES THAT ALLOW FOR YOUTH AND THEIR FAMILIES TO REFUSE PARTICIPATION. (FRAMEWORK, PG. 24)**

Policies, procedures, and practices exist that give all youth and families the right to refuse to participate in the screening process as a whole.							
The AC has a method of tracking and documenting refusal rates for the screening process as a whole.							

**CRITERIA 7.3 TOTAL:**
**CRITERIA 7.4: CENTERS HAVE POLICIES AND PROCEDURES THAT INFORM YOUTH OF LOCAL CONSENT LAWS AND THEIR RIGHTS TO ACCESS SUPPORTS AND SERVICES. (FRAMEWORK, PG. 24)**

Policies, procedures, and practices require staff to inform youth of local consent laws and their rights; preferably in written language that is easy to understand.							
AC leadership conduct regular audits or observations to ensure that youth and families are provided written notice of local consent laws and their rights.							

**CRITERIA 7.4 TOTAL:**

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 71 Sum Total							
Criteria 72 Sum Total							
Criteria 73 Sum Total							
Criteria 74 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 8: CENTERS HAVE A METHOD TO COLLECT FEEDBACK FROM YOUTH AND FAMILIES.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 8.1: YOUTH AND FAMILIES ARE ENGAGED IN FEEDBACK AFTER THE SCREENING PROCESS AS IT RELATES TO THE RESULT OF THE SCREEN(S). (FRAMEWORK, PG. 26)</b>							
Policies and procedures require AC staff to review the results of the screening process with youth and families and conduct secondary screen (see 5.1) to verify duration of needs, onset, frequency, and severity.							
Policies and procedures require AC staff to document results of the screening process and feedback.							

AC leadership conduct regular audits or observations to ensure that youth and family feedback occurs consistent with local P&P							
<b>CRITERIA 8.1 TOTAL:</b>							

**CRITERIA 8.2: CENTERS HAVE A METHOD TO COLLECT FEEDBACK FROM YOUTH AND FAMILIES ON THEIR EXPERIENCE WITH THE SCREENING PROCESS. (FRAMEWORK, PG. 26)**

AC has a mechanism (form, survey, etc.) that allows youth and families to provide feedback on the screening process in a confidential manner.							
The AC regularly analyzes the feedback received from youth and families and utilize these results to monitor and improve the screening process and staff training.							
<b>CRITERIA 8.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 8.1 Sum Total							
Criteria 8.2 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 9: ASSESSMENT CENTERS MAINTAIN CONFIDENTIALITY AND PROTECT THE RIGHTS OF YOUTH AND FAMILIES DURING THE SCREENING PROCESS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 9.1: CENTERS HAVE POLICIES THAT PROMOTE COMMUNICATION OF SCREENING RESULTS IN A DESCRIPTIVE MANNER THAT SUPPORT REFERRAL DECISION MAKING (I.E., DON'T SHARE THE ENTIRE TOOL AND AVOID COMMUNICATION OF NUMERIC SCORES THAT CAN BE MISINTERPRETED). (FRAMEWORK, PG. 25, 26)</b>							
Policies and procedures restrict staff from sharing completed screening tool, raw scores, or total scores.							
The AC provides staff with training on how to document screening results using language that communicates screening in decisions and recommended follow-up/referral.							
AC leadership conducts annual review of written communication to ensure that staff are reporting screening results/decisions consistent with local P&P							
<b>CRITERIA 9.1 TOTAL:</b>							
<b>CRITERIA 9.2: CENTERS HAVE POLICIES AND PROCEDURES EXPLAINING EFFORTS TO ENSURE CONFIDENTIALITY FOR THE YOUTH DURING THE SCREENING PROCESS (I.E., THE ASSESSMENT WILL NOT BE HEARD BY OTHERS) (FRAMEWORK, PG. 24)</b>							
Policies, procedures, and practices require staff to conduct the screening process in a space that ensures confidentiality during the screening process.							
<b>CRITERIA 9.2 TOTAL:</b>							

**CRITERIA 9.3: CENTERS HAVE POLICIES AND AGREEMENTS WITH REFERRING PARTNERS THAT INFORMATION DISCLOSED DURING THE SCREENING CANNOT BE USED IN ANY ADJUDICATORY OR DISCIPLINARY PROCESS WITHOUT CONSENT. (FRAMEWORK, PG. 24)**

Policies, procedures, and practices require AC staff to obtain a release of information signed by a legally authorized representative to provide screening results to other systems, providers, supports.							
MOUs or agreements with justice system stakeholders, education, child welfare, etc. explicitly state that information disclosed during screening process is not to be used in adjudicatory or disciplinary processes without consent by a legally authorized representative.							

**CRITERIA 9.3 TOTAL:**

**CRITERIA 9.4: CENTERS HAVE AGREEMENTS IN PLACE WITH PARTNERS AND SYSTEMS THAT SCREENING RESULTS ARE NOT TO BECOME PART OF YOUTH'S PERMANENT RECORD (I.E., COURT, EDUCATION, & CHILD WELFARE) AND WILL NOT BE USED AGAINST THE YOUTH (I.E., DELINQUENCY ADJUDICATION OR SCHOOL DISCIPLINARY HEARING) (FRAMEWORK, PG. 24)**

MOUs or agreements with partners or systems (i.e., court, education, & child welfare) explicating state that screening results will not become part of a youth's permanent record.							
<b>CRITERIA 9.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 9.1 Sum Total							
Criteria 9.2 Sum Total							
Criteria 9.3 Sum Total							
Criteria 9.4 Sum Total							
<b>STANDARD TOTAL:</b>							

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
Standard 5 Sum Total							
Standard 6 Sum Total							
Standard 7 Sum Total							
Standard 8 Sum Total							
Standard 9 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							

Core Component Summary Rating	Exploration	Preparation	Implementation	Sustainment
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- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement):
- ▶ List the changes recommended by the team:

# ASSESSMENT

\*If you selected Tier 1 Assessment Center, please move to page 66.

## STANDARD 1: ASSESSMENT CENTERS HAVE AN ASSESSMENT PROCESS THAT INVOLVES DOMAINS RELEVANT TO THEIR TARGET POPULATION/Common Needs Found in their Target Criteria.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: CENTERS HAVE REVIEWED PROFESSIONAL LITERATURE TO IDENTIFY COMMON NEEDS OF THE TARGET POPULATION. (FRAMEWORK, PG. 33)</b>							
The AC regularly reviews professional literature to identify needs of the AC's target population.							
AC staff receiving briefings and/or trainings on current professional literature specific to the target population served by the AC.							
<b>CRITERIA 1.1 TOTAL</b>							
<b>CRITERIA 1.2: CENTERS LOOK FOR AVAILABLE ASSESSMENT TOOLS THAT PROVIDE COVERAGE OF COMMON NEEDS. (FRAMEWORK, PG. 33)</b>							
The AC regularly reviews the available professional literature to maintain up to date knowledge on assessment tools linked to common needs of the target population							
AC staff receiving briefings and/or trainings on current professional literature specific to assessment tools linked to common needs of the target population.							
<b>CRITERIA 1.2 TOTAL:</b>							



**CRITERIA 1.3: SELECTION OF ASSESSMENT TOOLS IS INFORMED BY READING LEVEL AND ADMINISTRATION TIME TO PROMOTE ADEQUATE COMPREHENSION AND UNDERSTANDING. (FRAMEWORK, PG. 33)**

The AC can reference the reading level of each selected tool(s) and that reading level is at or below reading level of target population.							
The AC can reference the administration time needed for each selected tool(s) utilized in the assessment process.							
<b>CRITERIA 1.3 TOTAL</b>							

## ASSESSMENT WORKSHEET

ASSESSMENT TOOL	TOPIC DOMAIN FOCUS(ES)	READING COMPREHENSION LEVEL	ADMINISTRATION TIME

## SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 1.1 Sum Total							
Criteria 1.2 Sum Total							
Criteria 1.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 2: ASSESSMENT CENTERS HAVE ESTABLISHED AN ASSESSMENT PROCESS THAT IS EVIDENCE-BASED.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 2.1: ASSESSMENT TOOLS UTILIZED BY ASSESSMENT CENTERS ARE EVIDENCE-BASED MEANING THEY HAVE DEMONSTRATED RELIABILITY AND VALIDITY FOR THE POPULATION OF YOUTH SERVED BY THAT ASSESSMENT CENTER. (FRAMEWORK, PG. 33)</b>							
The AC can reference the research for each selected tool that shows reliability and validity for all target populations served.							
<b>CRITERIA 2.1 TOTAL</b>							
<b>CRITERIA 2.2: CENTERS HAVE AN ESTABLISHED PROTOCOL FOR DETERMINING RESPONSE TO ASSESSMENT AND RECOMMENDATIONS FOR SERVICE REFERRALS. (FRAMEWORK, PG. 33, 34, 36)</b>							
For each assessment tool used, policy and procedures dictate the response protocol based on the identified cut score or locally developed decision threshold.							
Policies and procedures require staff to review the results of the assessment process with youth and families.							
Policies and procedures require AC staff to document youth and family follow through on recommendations generated from the assessment							
<b>CRITERIA 2.2 TOTAL</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE
Criteria 2.1 Sum Total						
Criteria 2.2 Sum Total						
<b>STANDARD TOTAL:</b>						

### STANDARD 3: ASSESSMENT CENTER STAFF ARE SUPPORTED THROUGH ONGOING TRAINING ON ASSESSMENT BEST PRACTICE.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: ALL STAFF CONDUCTING ASSESSMENT WITH YOUTH ARE TRAINED ON AND AWARE OF LOCAL POLICY AND PROCEDURE AS IT RELATES TO THE USE OF EACH ASSESSMENT TOOL IN ACCORDANCE WITH THE MANUAL AND BEST PRACTICES. (FRAMEWORK, PG. 34)</b>							
Policies, procedures, and onboarding practices require staff conducting assessment functions to receive training on each screening tool.							
Policies, procedures, and onboarding practices provide staff with manuals and materials associated with each assessment tool.							
Policies, procedures, and onboarding practices train all staff conducting assessment on associated response protocols.							
<b>CRITERIA 3.1 TOTAL</b>							

**CRITERIA 3.2: STAFF RECEIVE ONGOING OR BOOSTER TRAINING TO ENSURE FIDELITY TO THE LOCAL PROCESS AND THAT ASSESSMENT REMAINS CONSISTENT WITH BEST PRACTICE. (FRAMEWORK, PG. 34)**

Policies and procedures require staff to receive annual booster trainings on assessment tools and response protocols.							
Policies and procedures require staff to receive annual booster trainings on assessment best practices.							
<b>CRITERIA 3.2 TOTAL</b>							

**CRITERIA 3.3: ASSESSMENT CENTERS HAVE POLICY AND PROTOCOL TO ENSURE UNIFORMITY IN THE WAY THE ASSESSMENT IS CONDUCTED. (FRAMEWORK, PG. 34)**

The AC leadership annually conducts staff observations of the assessment process to ensure assessment is done in accordance with best practices and local P&P.							
The AC leadership annually reviews assessment tool results, scores, and responses by each staff member to ensure assessment is done in accordance with best practices and local P&P.							
The AC leadership has a method of follow-up booster training and coaching for any staff member whose performance falls below the assessment process requirements of the local P&P.							
<b>CRITERIA 3.3 TOTAL</b>							

**CRITERIA 3.4: STAFF ARE PROVIDED ONGOING COACHING ON ENGAGEMENT TECHNIQUES USED DURING ASSESSMENTS AND OVERALL QUALITY. (FRAMEWORK, PG. 34)**

The AC leadership annually conducts staff observations of the assessment to ensure quality of engagement techniques							
The AC leadership utilizes observations to inform booster training and staff development plans.							
<b>CRITERIA 3.4 TOTAL</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 3.1 Sum Total							
Criteria 3.2 Sum Total							
Criteria 3.3 Sum Total							
Criteria 3.4 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 4: ASSESSMENT CENTERS PROVIDE ASSESSMENT POST- SCREEN AND PRE- CASE PLANNING IN A TIMELY MANNER.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: WHEN SCREENS FLAG AN EMERGENT RISK (E.G., SUICIDE RISK), AN ASSESSMENT IS PROVIDED WITHIN 24 HOURS. (FRAMEWORK, PG. 34)</b>							
Assessment Centers has a method of tracking the time and date of assessments conducted in response to an emergent risk (e.g., suicide risk) indicator identified during the screening process.							
AC leadership annually review emergent risk assessment follow-up time to ensure fidelity to local P&P.							
<b>CRITERIA 4.1 TOTAL</b>							
<b>CRITERIA 4.2: YOUTH AND FAMILIES ARE ENGAGED IN THE ASSESSMENT PROCESS IN A TIMELY MANNER AFTER A SCREEN IS COMPLETED. EXAMPLE: AN ASSESSMENT IS PROVIDED NO MORE THAN FIVE BUSINESS DAYS AFTER A SCREEN, UNLESS AN EMERGENT NEED IS IDENTIFIED FROM SCREENING, IS COMPLETED UNLESS LOCAL LAW AND POLICY DICTATES A FASTER RESPONSE. (FRAMEWORK, PG. 34)</b>							
AC has a method of tracking time and date an assessment is initiated.							
Policies, procedures, and practices dictates that an assessment in is initiated within 5 working days post-screening and/or post-screening referral.							
AC leadership annually review assessment follow-up time to ensure fidelity to local P&P.							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 4.1 Sum Total							
Criteria 4.2 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 5: ASSESSMENT CENTERS ENSURE STAFF ACCESS TO SCREENING RESULTS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 5.1: INFORMATION TECHNOLOGY ALLOWS FOR THE STAFF CONDUCTING THE ASSESSMENT TO HAVE ACCESS TO THE SCREEN RESULTS AND NOTES GENERATED BY STAFF WHO COMPLETED THE SCREENING PROCESS. (FRAMEWORK, PG. 35)</b>							
AC has a data/documentation method ensuring that that staff can access and review screening results prior to an assessment.							
<b>CRITERIA 5.1 TOTAL</b>							
<b>CRITERIA 5.2: POLICIES AND PRACTICES REQUIRE STAFF TO REVIEW NEEDS IDENTIFIED IN THE SCREEN PRIOR TO ENGAGING YOUTH AND FAMILY IN THE ASSESSMENT. (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices requires documentation that screening results are reviewed prior to an assessment.							
AC leadership annually reviews documentation to ensure fidelity to the local P&P							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 5.1 Sum Total							
Criteria 5.2 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 6: ASSESSMENTS INTEGRATE MULTIPLE SOURCES OF INFORMATION WITHIN THE PROCESS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 6.1: ASSESSMENT CENTERS HAVE INFORMATION SHARING AGREEMENTS THAT ALLOW ACCESS TO A YOUTH'S INVOLVEMENT IN SERVICES ACROSS SYSTEMS AS WELL AS HISTORY OR CURRENT STATUS AS IT RELATES TO DELINQUENCY OR JUSTICE SYSTEM INVOLVEMENT, CHILD WELFARE, BEHAVIORAL HEALTH, AND/OR EDUCATIONAL RECORDS SUCH AS GRADES, ATTENDANCE, AND BEHAVIORAL INFRACTIONS. (FRAMEWORK, PG. 35)</b>							
ACs have developed information sharing agreements with referring partners to provide partner specific access to records as a routine practice when conducting assessments.							
The local child welfare department provides current and historic information on involvement including founded abuse and neglect cases, prevention/voluntary services received, and adoption records per a MOU or release of information.							



<p>The school system provides access to information such as grades, attendance, special education, disciplinary record per a MOU or release of information.</p>							
<p>Local police or court systems provide current and historic arrest records, formal court processing information (dispositions and outcomes), and history of services provided per a MOU or release of information.</p>							
<p><b>CRITERIA 6.1 TOTAL:</b></p>							
<p align="center"><b>CRITERIA 6.2: ASSESSMENT CENTERS HAVE POLICIES AND PRACTICES THAT REQUIRE STAFF TO ENGAGE OTHER SYSTEMS, STAKEHOLDERS, AND SUPPORTS WITHIN THE ASSESSMENT PROCESS. (FRAMEWORK, PG. 35)</b></p>							
<p>Policies, procedures, and practices require AC staff to obtain release of information forms to make contact and obtain relevant information from other service providers.</p>							
<p>Policies, procedures, and practices require documentation of collateral contacts within assessment reports.</p>							
<p>AC leadership conducts annual quality assurance reviews of assessment reports to determine consistent access and incorporation of collateral contacts during the assessment process.</p>							
<p><b>CRITERIA 6.2 TOTAL:</b></p>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 6.1 Sum Total							
Criteria 6.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 7: THE ASSESSMENT IS INDIVIDUALIZED TO EACH YOUTH AND FAMILY GROUNDED IN SCREENING RESULTS, DEVELOPMENTAL STATUS, AND CULTURE.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 7.1: POLICIES AND PRACTICES REQUIRE CENTERS TO INQUIRE ABOUT LANGUAGE AND READING LEVELS AND BASIC INTELLECTUAL LEVEL WITH YOUTH AND/OR CAREGIVER TO ENSURE THE ASSESSMENT PROCESS IS INDIVIDUALIZED. (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices require the AC staff conducting assessments determine language of choice and conduct the assessment in the language of choice of youth and families.							
AC staff determine intellectual and reading capacities of youth and the assessment process.							
Assessment reports document how the assessment process was individualized to accommodate any known intellectual impairments or reading difficulties.							
<b>CRITERIA 7.1 TOTAL:</b>							

**CRITERIA 6.2: ASSESSMENT CENTERS HAVE A PROCESS OF REFERRALS FOR YOUTH WHO CANNOT BE ASSESSED INTERNALLY GIVEN INDIVIDUALIZED NEEDS (I.E., INTELLECTUAL LEVEL). (FRAMEWORK, PG. 35)**

Policies, procedures, and practices exist that provide a process of referring youth and families for an appropriate, individualized assessment when that youth cannot be served by the assessment center due to language, intellectual, or cognitive capacity.

**CRITERIA 7.2 TOTAL:**

**CRITERIA 7.2: POLICIES AND PRACTICES REQUIRE STAFF TO INQUIRE ABOUT CULTURE AND CULTURAL ACCOMMODATIONS NEEDED DURING THE ASSESSMENT PROCESS. (FRAMEWORK, PG. 35, 36, 37)**

Policies, procedures, and practices exist that require AC staff conducting an assessment to obtain information about the youth/family culture.

Assessment reports document how the assessment process was individualized to accommodate youth and family culture

AC staff conducting assessments receive training on cultural competencies relevant to the target population served by the AC.

**CRITERIA 7.3 TOTAL:**

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 71 Sum Total							
Criteria 72 Sum Total							
Criteria 73 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 8: THE ASSESSMENT IDENTIFIES AND ARTICULATES YOUTH AND FAMILY STRENGTHS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 8.1: ASSESSMENT CENTER STAFF ARE TRAINED ON ENGAGEMENT SKILLS AND STRENGTH-BASED APPROACHES. (FRAMEWORK, PG. 36)</b>							
AC staff receive annual training on family engagement strategies to facilitate active engagement in the assessment process.							
AC staff receive annual training on strengths-based approaches and incorporate these approaches into the assessment process.							
<b>CRITERIA 8.1 TOTAL:</b>							

**CRITERIA 8.2: EVERY ASSESSMENT IDENTIFIES YOUTH AND/OR FAMILY’S STRENGTHS AND HAS A STRENGTHS-BASED RECOMMENDATION. (FRAMEWORK, PG. 36, 37)**

Local policy, procedures, and practices require staff to utilize strength-based best practices or evidence-based within the assessment process.							
Local P&P require that identified strengths are documented in an assessment report.							
Local P&P require that assessment reports include strengths-based recommendations.							
AC leadership has a method to document fidelity to strengths-based documentation and recommendations.							

**CRITERIA 8.2 TOTAL:**

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 8.1 Sum Total							
Criteria 8.2 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 9: A SUMMARY IS PROVIDED THAT INTEGRATES FINDINGS OF THE ASSESSMENT AND IDENTIFIES DRIVERS OF THE PROBLEM BEHAVIOR.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 9.1: A DOCUMENTED SUMMARY OF ASSESSMENT RESULTS IS KEPT INTERNALLY. (FRAMEWORK, PG. 37)</b>							
Local P&P require that each assessment completed by the AC has concise and coherent summary of the assessment findings.							
Local P&P requires that all assessments are archived at the AC consistent with confidentiality and local records rules and regulations.							
<b>CRITERIA 9.1 TOTAL:</b>							
<b>CRITERIA 9.2: POLICIES AND PRACTICES REQUIRE STAFF TO DISCUSS THE IDENTIFIED DRIVERS OF THE "PROBLEM" BEHAVIOR THAT INITIATED THE REFERRAL TO THE ASSESSMENT CENTER WITH YOUTH AND FAMILIES. (FRAMEWORK, PG. 37)</b>							
Local P&Ps require that all assessments clearly delineate drivers of the problem behavior in the assessment summary.							
AC leadership has a method to document fidelity to local P&P requiring documentation of drivers of the problem behavior in the assessment.							
<b>CRITERIA 9.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 9.1 Sum Total							
Criteria 9.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 10: ASSESSMENTS ARE USED AS A GUIDE TO DEVELOP SPECIFIC RECOMMENDATIONS ON INDIVIDUALIZED NEEDS AND STRENGTHS TO PRIORITIZE REFERRALS FOR SERVICES AND SUPPORTS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 10.1: ASSESSMENT CENTERS HAVE POLICIES AND PRACTICES THAT SUPPORT DISCUSSION OF ASSESSMENT FINDINGS AND RECOMMENDATIONS WITH YOUTH AND FAMILIES. (FRAMEWORK, PG. 37)</b>							
Assessment Centers provide staff training on needs and strengths matching to appropriate recommendations.							
Local P&P require a feedback session with youth and families to discuss the assessment results and recommendations.							
AC leadership conducts annual QA monitoring of feedback sessions provided consistent with 10.1							
<b>CRITERIA 10.1 TOTAL:</b>							

**CRITERIA 10.2: ASSESSMENT CENTERS PROVIDE A WRITTEN SUMMARY OF RECOMMENDATIONS WITH RATIONALE OR SUPPORT FOR THE RECOMMENDATIONS.  
(FRAMEWORK, PG. 37)**

Local P&P, practices require that each assessment report includes a written summary of prioritized recommendations that are justified based on the assessment results.							
AC leadership has a QA monitoring process conducted annually to monitor assessment report summary and recommendations and fidelity to the local P&P							
<b>CRITERIA 10.2 TOTAL:</b>							

**CRITERIA 10.3: REFERRALS ARE PROVIDED CONSISTENT WITH CASE MANAGEMENT STANDARDS AS INCORPORATED INTO LOCAL POLICIES AND PROCEDURES.**

See Case Management Section

**CRITERIA 10.3 TOTAL:**

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 10.1 Sum Total							
Criteria 10.2 Sum Total							
Criteria 10.3 Sum Total							
<b>STANDARD TOTAL:</b>							



## STANDARD 11: YOUTH AND FAMILIES ARE TREATED AS PARTNERS IN THE ASSESSMENT PROCESS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 11.1: CENTERS HAVE POLICIES AND PROCEDURES THAT ENSURE YOUTH KNOWINGLY AND VOLUNTARILY CONSENT TO THE ASSESSMENT. (FRAMEWORK, PG. 35)</b>							
Policies and procedures require staff to disclose to youth and families the purpose of the assessment process, content domains covered by each assessment tool, how the assessment information will be used, and who will have access to the results of the assessment process							
<b>CRITERIA 11.1 TOTAL:</b>							
<b>CRITERIA 11.2: CENTERS HAVE POLICIES AND PROCEDURES REQUIRING STAFF TO INFORM YOUTH AND FAMILIES THAT PARTICIPATING IN THE ASSESSMENT IS VOLUNTARY. (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices exist that provide all youth and families the right to refuse (e.g., not complete a assessment tool).							
The AC has a method of tracking and documenting refusal rates per assessment tool.							
<b>CRITERIA 11.2 TOTAL:</b>							
<b>CRITERIA 11.3: CENTERS HAVE POLICIES AND PROCEDURES THAT ALLOW FOR YOUTH AND THEIR FAMILIES TO REFUSE PARTICIPATION. (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices exist that give all youth and families the right to refuse to participate in the assessment process as a whole.							

The AC has a method of tracking and documenting refusal rates for the assessment process as a whole.							
<b>CRITERIA 11.3 TOTAL:</b>							
<b>CRITERIA 11.4: CENTERS HAVE POLICIES AND PROCEDURES THAT INFORM YOUTH OF LOCAL CONSENT LAWS AND THEIR RIGHTS TO ACCESS SUPPORTS AND SERVICES. (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices require staff to inform youth of local consent laws and their rights, preferably in writing in language that is easy to understand.							
AC leadership conduct regular audits or observations to ensure that youth and families are provided written notice of local consent laws and their rights.							
<b>CRITERIA 11.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 11.1 Sum Total							
Criteria 11.2 Sum Total							
Criteria 11.3 Sum Total							
Criteria 11.4 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 12: CENTERS HAVE A METHOD TO COLLECT FEEDBACK FROM YOUTH AND FAMILIES.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 12.1: CENTERS HAVE A METHOD TO COLLECT FEEDBACK FROM YOUTH AND FAMILIES ON THEIR EXPERIENCE WITH THE ASSESSMENT PROCESS. (FRAMEWORK, PG. 37)</b>							
Policies and procedures require AC staff to review the results of the assessment process with youth and families.							
Policies and procedures require AC staff to document results of the assessment process and feedback.							
AC leadership conduct regular audits or observations to ensure that youth and family feedback occurs consistent with local P&P							
<b>CRITERIA 12.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 12.1 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 13: ASSESSMENT CENTERS MAINTAIN CONFIDENTIALITY AND PROTECT THE RIGHTS OF YOUTH AND FAMILIES DURING THE ASSESSMENT PROCESS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 13.1: CENTERS HAVE POLICIES THAT PROMOTE COMMUNICATION OF ASSESSMENT FINDINGS TO SERVICE PROVIDERS AND SUPPORTS IN A DESCRIPTIVE MANNER THAT SUPPORT REFERRAL DECISION MAKING (I.E., SPECIFIC RESULTS FROM SPECIFIC TOOLS USED IN THE ASSESSMENT ARE NOT SHARED TO AVOID COMMUNICATION OF NUMERIC SCORES THAT CAN BE MISINTERPRETED). (FRAMEWORK, PG. 35)</b>							
Policies and procedures restrict staff from sharing completed assessment tool, raw scores, or total scores.							
The AC provides staff with training on how to document assessment results using language that communicates assessment in decisions and recommendation.							
AC leadership conducts annual review of written communication to ensure that staff are reporting assessment results/decisions consistent with local P&P							
<b>CRITERIA 13.1 TOTAL:</b>							
<b>CRITERIA 13.2: CENTERS HAVE POLICIES AND PROCEDURES EXPLAINING EFFORTS TO ENSURE CONFIDENTIALITY TO THE YOUTH DURING THE ASSESSMENT PROCESS (I.E., THE ASSESSMENT WILL BE CONDUCTED IN PRIVATE) (FRAMEWORK, PG. 35)</b>							
Policies, procedures, and practices require staff to conduct the assessment process in a space that ensures confidentiality during the assessment process.							
<b>CRITERIA 13.2 TOTAL:</b>							

**CRITERIA 13.3: CENTERS HAVE POLICIES AND AGREEMENTS WITH REFERRING PARTNERS THAT INFORMATION DISCLOSED DURING THE ASSESSMENT CANNOT BE USED IN ANY ADJUDICATORY OR DISCIPLINARY PROCESS WITHOUT CONSENT. (FRAMEWORK, PG. 35)**

Policies, procedures, and practices require AC staff to obtain a release of information signed by a legally authorized representative to provide assessment results to other systems, providers, supports.							
MOUs or agreements with justice system stakeholders, education, child welfare, etc. explicitly stating that information disclosed during assessment process is not to be used in adjudicatory or disciplinary processes without consent by a legally authorized representative.							
Policies, procedures, and practices require AC staff to obtain a release of information signed by a legally authorized representative to provide assessment results to other systems, providers, supports.							
<b>CRITERIA 13.3 TOTAL:</b>							

**CRITERIA 13.4: CENTERS HAVE AGREEMENTS IN PLACE WITH PARTNERS AND SYSTEMS THAT ASSESSMENT RESULTS ARE NOT TO BECOME PART OF YOUTH'S PERMANENT RECORD (I.E., COURT, EDUCATION, & CHILD WELFARE) AND WILL NOT BE USED AGAINST THE YOUTH (I.E., DELINQUENCY ADJUDICATION OR SCHOOL DISCIPLINARY HEARING) (FRAMEWORK, PG. 35)**

MOUs or agreements with partners or systems (i.e., court, education, & child welfare) explicating state that assessment results will not become part of a youth's permanent record.							
<b>CRITERIA 13.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 13.1 Sum Total							
Criteria 13.2 Sum Total							
Criteria 13.3 Sum Total							
Criteria 13.4 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 14: ASSESSMENT CENTERS HAVE A DATA COLLECTION AND ANALYSIS PROCESS TO ENSURE THE ASSESSMENT PROCESS IS EQUITABLE, FAIR, AND TRANSPARENT.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 14.1: CENTERS HAVE A PROCESS TO ANALYZE AND REPORT OUT TO FAMILY, COMMUNITY, AND STAKEHOLDERS THE NEEDS OF YOUTH IDENTIFIED FROM ASSESSMENT. (FRAMEWORK, PG. 34)</b>							
The AC has a documented process that results in an annual summary report of the AC's assessment process including at a minimum the number of assessments conducted, results of assessment tools, referral rates, and demographics of youth served through the assessment process.							

The AC has a mechanism to provide an annual summary report to families served, referral partners, and local stakeholders.							
<b>CRITERIA 14.1 TOTAL:</b>							
<b>CRITERIA 14.2: CENTERS HAVE A PROCESS TO ENSURE DATA ANALYSIS INFORMS CHANGES/REVISIONS TO THE ASSESSMENT PROCESS. (FRAMEWORK, PG. 34)</b>							
The AC has a documented continuous quality improvement process that uses information from 14.1 to improve the assessment process, use of specific tools, and staff response protocols.							
<b>CRITERIA 14.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 14.1 Sum Total							
Criteria 14.2 Sum Total							
<b>STANDARD TOTAL:</b>							

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
Standard 5 Sum Total							
Standard 6 Sum Total							
Standard 7 Sum Total							
Standard 8 Sum Total							
Standard 9 Sum Total							
Standard 10 Sum Total							
Standard 11 Sum Total							
Standard 12 Sum Total							
Standard 13 Sum Total							
Standard 14 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							



Core Component Summary Rating	Exploration	Preparation	Implementation	Sustainment
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- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement:
- ▶ List the changes recommended by the team:

# CORE COMPONENT: CASE MANAGEMENT

- ▶ **Tier I Assessment Center:** An Assessment Center that conducts screening only and refers out for further assessment.
- ▶ **Tier II Assessment Center:** An Assessment Center that conducts both screening and assessment.

Please select one of the following:

Our Center is a Tier 1 Center:  Only answer respond to benchmarks questions in GREEN

Our Center is a Tier 2 Center:  Answer all questions

## STANDARD 1: CENTERS FREQUENTLY TRAIN AND SUPPORT STAFF ON CASE MANAGEMENT BEST PRACTICES.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: TIER II CENTERS HAVE INTERNAL POLICIES AND PROCEDURES THAT ENSURES A MANAGEABLE WORKLOAD THAT ENABLES STAFF TO EFFECTIVELY ENGAGE WITH YOUTH AND FAMILIES.</b>							
The AC has policies and procedures that limits the number of youth and families a staff member can case manage at any given time							
Policy and procedure provide guidance to staff determining frequency of contacts with youth and families in order to effectively engage.							
The AC onboarding process and ongoing training include youth and family engagement methods.							
<b>CRITERIA 1.1 TOTAL:</b>							

**CRITERIA 1.2: CENTERS PROVIDE ONGOING STAFF DEVELOPMENT OPPORTUNITIES AROUND EFFECTIVE CASE MANAGEMENT AND OTHER TOPICS REFERENCED IN THE STAFF DEVELOPMENT CORE COMPONENT.**

Annual booster trainings are offered to staff on case management strategies and effective youth and family engagement.							
<b>CRITERIA 1.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 1.1 Sum Total							
Criteria 1.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 2: ASSESSMENT CENTERS TAKE A MULTIDISCIPLINARY APPROACH TO CASE MANAGEMENT.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 2.1: ASSESSMENT CENTERS HAVE INFORMATION SHARING AGREEMENTS TO INFORM KEY STAKEHOLDERS AND PARTNERS OF INDIVIDUALIZED NEEDS TO ENSURE EFFECTIVE LINKAGE AND CASE MANAGEMENT. (FRAMEWORK, PG. 46, 47)</b>							
The AC has information sharing agreements with stakeholders that allow for sharing of needs identified during screening and/or assessment so to reduce duplication of services.							

Policies, procedures, and practices encourage staff to engage stakeholders already involved with youth and families in plan development							
<b>CRITERIA 2.1 TOTAL:</b>							
<b>CRITERIA 2.2: CENTERS HAVE POLICIES AND PROCEDURES THAT REQUIRE STAFF TO COMPLETE A RELEASE OF INFORMATION WITH ALL YOUTH AND FAMILIES. (FRAMEWORK, PG. 58, 59)</b>							
Policies and procedures require staff to obtain a release of information with all youth and families.							
Policies and procedures require staff to obtain consent with all youth and families to share information with community partners or natural community supports.							
<b>CRITERIA 2.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 2.1 Sum Total							
Criteria 2.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 3: TIER II CENTERS CREATE INDIVIDUALIZED PLANS, IN ACTIVE PARTNERSHIP WITH YOUTH AND FAMILIES, THAT ARE INFORMED FROM THE SCREENING AND ASSESSMENT PROCESS THAT ARE MANAGEABLE, MEASURABLE, AND YOUTH/FAMILY CENTERED.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: CENTERS HAVE POLICIES, PROCEDURES, AND FORMS THAT ALLOW FOR CONSISTENCY IN PLAN CREATION AND CASE MANAGEMENT AMONG STAFF. (FRAMEWORK, PG.46, 47)</b>							
The AC has a universal form for staff to create the individualized plan							
Policies and procedures provide guidance to staff on how to complete the forms and best practice on creating individualized plans							
<b>CRITERIA 3.1 TOTAL:</b>							
<b>CRITERIA 3.2: CENTERS HAVE POLICIES AND PROCEDURES THAT ENSURE PLANS ARE MADE IN PARTNERSHIP WITH YOUTH AND FAMILIES AND ARE STRENGTHS-BASED. (FRAMEWORK, PG.46, 47)</b>							
The AC onboarding process and ongoing training include strength-based approaches.							
Policies and procedures require staff to ensure individualized plans are strength-based							
AC supervisors or staff regularly review plans created by staff to ensure a strength-based approach							
Policies and procedures require that youth and their families be active partners and have choice in the plan created							
<b>CRITERIA 3.2 TOTAL:</b>							

**CRITERIA 3.3: TIER II CENTERS ESTABLISH A MAXIMUM NUMBER OF NEEDS AND ASSOCIATED SERVICES AND SUPPORTS THAT CAN BE MANAGED AT ONE TIME. (FRAMEWORK, PG.46, 47)**

The AC has policies and procedures that provide guidance to staff on the maximum number of needs, services, and supports that can be managed at one time.							
Policies, procedures, and practices ensure staff get input from youth and families on the priority of needs addressed and the number of services and supports included in the plan.							
The AC has quality assurance processes in place to frequently review plans to ensure number of needs and goals align with policies and procedures.							
<b>CRITERIA 3.3 TOTAL:</b>							

**CRITERIA 3.4: TIER II CENTERS INCORPORATE A SIGNED PARTICIPATION AGREEMENT OUTLINING PARTICIPATION EXPECTATIONS, LENGTH OF TIME, AND WHAT HAPPENS IF "OUT-OF-COMPLIANCE" WITH YOUTH AND FAMILY. (FRAMEWORK, PG.46, 47)**

The AC has a uniform participation agreement form that requires staff to include expectations, length of time, and "out-of-compliance" consequences.							
Policies and procedures require staff to have a participation agreement signed by all youth and families.							
<b>CRITERIA 3.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 3.1 Sum Total							
Criteria 3.2 Sum Total							
Criteria 3.3 Sum Total							
Criteria 3.4 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 4: ASSESSMENT CENTERS MATCH YOUTH AND FAMILIES TO SERVICES AND SUPPORTS, IN ACTIVE PARTICIPATION WITH YOUTH AND FAMILIES, THAT ALIGN WITH NEEDS, CULTURE, AND IDENTITY IDENTIFIED IN THE SCREENING AND ASSESSMENT PROCESS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: INDIVIDUALIZED PLANS ONLY ADDRESS AREAS AND NEEDS IDENTIFIED WITHIN THE SCREENING AND ASSESSMENT PROCESS. (FRAMEWORK, PG.46, 47)</b>							
Policies and procedures require only needs identified in the screening and assessment process are included in individualized plans							
The AC has quality assurance processes in place to frequently review plans and ensure they accurately reflect the needs identified in the screening and assessment process.							
<b>CRITERIA 4.1 TOTAL:</b>							

**CRITERIA 4.2: CENTERS ENGAGE AND CATALOG DIVERSE AND EFFECTIVE COMMUNITY-BASED SERVICES AND SUPPORTS IN ORDER TO PROVIDE YOUTH AND FAMILIES WITH INDIVIDUALIZED OPTIONS.**

The AC has an electronic system to catalog community-based services and supports							
The AC has a process to catalog which community-based services are evidence-based and effective.							
The AC has a process to catalog which community-based services are gender and culturally specific.							
<b>CRITERIA 4.2 TOTAL:</b>							

**CRITERIA 4.3: CENTERS HAVE AGREEMENTS OR MEMORANDUMS OF UNDERSTANDING WITH COMMUNITY PARTNERS/AGENCIES OR SERVICE PROVIDERS THAT ALLOW FOR A REFERRAL OF YOUTH AND FAMILIES. (FRAMEWORK, PG.46, 47)**

The AC has MOUs or agreements with community-based services providers that allow for referrals							
The AC has electronic or written forms that allow for referrals directly to community agencies or service providers.							
<b>CRITERIA 4.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 4.1 Sum Total							



Criteria 4.2 Sum Total							
Criteria 4.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 5: ASSESSMENT CENTERS PROVIDE TIMELY FOLLOW-UP WITH YOUTH AND FAMILIES AFTER A SCREENING OR ASSESSMENT.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 5.1: FOR CENTERS IMPLEMENTING REFERRALS FOR ASSESSMENT OR INFORMATION SHARING, A FOLLOW-UP WITH THE YOUTH AND FAMILY OCCURS WITHIN TWO BUSINESS DAYS AFTER THE SCREENING PROCESS. (FRAMEWORK, PG. 42)</b>							
An AC's electronic database allows for input of date and time staff follow-up with youth and families							
Policies and procedures require staff to follow-up with youth and families within two business days after the screening process.							
The AC has quality assurance processes in place to frequently review plans and ensure they accurately reflect the needs identified in the screening and assessment process.							
<b>CRITERIA 5.1 TOTAL:</b>							

**CRITERIA 5.2: TIER II CENTERS IMPLEMENTING THE COMPREHENSIVE CASE MANAGEMENT APPROACH; STAFF FOLLOW-UP WITH FAMILIES OCCURS WITHIN ONE WEEK OF THE DEVELOPMENT OF THE INDIVIDUALIZED PLAN, SOONER IF NECESSARY, BASED ON YOUTH AND FAMILY'S NEEDS. (FRAMEWORK, PG. 42)**

An AC's electronic database allows for input of date and time the plan is developed and the date and time staff follow-up with youth and families							
Policies and Procedures require staff to follow-up with youth and families within one week after the development of an individualized plan							
<b>CRITERIA 5.2 TOTAL:</b>							

**CRITERIA 5.3: ALL CONTACTS WITH THE YOUTH/FAMILY OR COLLATERAL CONTACTS SHOULD BE DOCUMENTED IN THE CENTER'S INFORMATION TECHNOLOGY SYSTEM. (FRAMEWORK, PG. 42, 48)**

The AC has an electronic database that allows for staff to enter notes directly related to case management.							
Policies and procedures require staff to enter notes related to contacts (attempted and successful) and interactions with youth, family, and other collateral contacts.							
<b>CRITERIA 5.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 5.1 Sum Total							
Criteria 5.2 Sum Total							
Criteria 5.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 6: ASSESSMENT CENTERS FACILITATE ACCESS TO SERVICES AND SUPPORTS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 6.1: WHENEVER POSSIBLE, CENTERS MAKE THE REFERRAL TO THE SERVICE OR SUPPORT IN FRONT OF THE YOUTH AND FAMILIES TO FACILITATE A WARM HAND-OFF AND ACCESSIBILITY BARRIERS HAVE BEEN IDENTIFIED AND REMOVED. (FRAMEWORK, PG.46, 47)</b>							
Policies, procedures, and practices require staff to have intentional conversation around a youth and family's access to transportation, insurance, affordability, etc. prior to making referrals.							
Policies, procedures, and practices require staff to address accessibility barriers identified.							
Policies, procedures, and practices encourage staff to make referrals to services while youth and family are present.							
<b>CRITERIA 6.1 TOTAL:</b>							

**CRITERIA 6.2: POLICIES AND PROCEDURES SUPPORT CONTINUOUS FEEDBACK AND CHECK-IN OPPORTUNITIES WITH THE YOUTH, CAREGIVERS, AND OTHER SUPPORTS THROUGHOUT THE CASE MANAGEMENT PROCESS. (FRAMEWORK, PG.47, 48)**

Policies, procedures, and practices require staff to frequently check-in, virtually and in-person, with youth and families							
Policies, procedures, and practice require staff to make check-in meetings spaces and times accessible and convenient.							
Policies, procedures, and practices require staff check-ins with youth and families to review the success of services and supports.							
<b>CRITERIA 6.2 TOTAL:</b>							

**CRITERIA 6.3: POLICIES AND PROCEDURES SUPPORT ADDITIONAL CASE PLANNING IF SERVICES AND SUPPORTS ARE NOT EFFECTIVE OR ACCESSIBLE. (FRAMEWORK, PG.47, 48)**

Policies, procedures, and practices require staff to do additional case planning if support and services are found not to be effective or accessible during check ins							
<b>CRITERIA 6.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 6.1 Sum Total							
Criteria 6.2 Sum Total							
Criteria 6.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 7: YOUTH AND FAMILIES ARE TREATED AS PARTNERS IN THE CASE MANAGEMENT PROCESS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 7.1: CENTERS HAVE POLICIES AND PROCEDURES THAT ALLOW FOR YOUTH AND THEIR FAMILIES TO REFUSE PARTICIPATION. (FRAMEWORK, PG.46)</b>							
Policies, procedures, and practices exist that give all youth and families the right to refuse to participate in the case management process.							
<b>CRITERIA 7.1 TOTAL:</b>							
<b>CRITERIA 7.2: YOUTH AND FAMILIES ARE ENGAGED IN THE DEVELOPMENT OF THEIR INDIVIDUALIZED PLAN. (FRAMEWORK, PG.46, 47)</b>							
Policies, procedures, and practices require individualized plans to include protective factors, strengths, and any other existing positive supports identified by youth and families.							
Policies, procedures, and practices require youth and families to drive goal setting and establishing success measures within the plan.							

The AC has a continuous quality improvement process to periodically review plans to ensure youth and family involvement.							
AC onboarding and booster trainings include those that are focused on youth and family engagement and motivational interviewing							
<b>CRITERIA 7.2 TOTAL:</b>							
<b>CRITERIA 7.3: YOUTH AND FAMILIES ARE GIVEN CHOICE OF SERVICE PROVIDERS AND SUPPORTS. (FRAMEWORK, PG.46, 47)</b>							
Policies, procedures, and practices require staff to provide youth and families with choice in the services and supports included in the individualized plan.							
<b>CRITERIA 7.3 TOTAL:</b>							
<b>CRITERIA 7.4: CENTERS HAVE A METHOD TO COLLECT FEEDBACK FROM YOUTH AND FAMILIES ON THEIR EXPERIENCE WITH THE CASE MANAGEMENT PROCESS. (FRAMEWORK, PG.47, 48)</b>							
AC has a mechanism (form, survey, etc.) that allows youth and families to give feedback on the case management process.							
The AC regularly analyzes the feedback received from youth and families to improve practices and inform staff development efforts.							
Policies, procedures, and practices are in place for youth and families to report grievances about staff or community partners.							
<b>CRITERIA 7.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 7.1 Sum Total							
Criteria 7.2 Sum Total							
Criteria 7.3 Sum Total							
Criteria 7.4 Sum Total							
<b>STANDARD TOTAL:</b>							

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
Standard 5 Sum Total							
Standard 6 Sum Total							
Standard 7 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							

Core Component Summary Rating	Exploration	Preparation	Implementation	Sustainment
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- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
  
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement):
  
- ▶ List the changes recommended by the team:



# CORE COMPONENT: STAFF SUPPORT AND DEVELOPMENT

**STANDARD 1: ASSESSMENT CENTERS CREATE AND SUSTAIN AN ENVIRONMENT OF WELLNESS FOR STAFF THAT RECOGNIZES THE EFFECTS OF STRESS CREATED FROM DAILY WORK.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: ASSESSMENT CENTERS HAVE A METHOD TO ANNUALLY, AT A MINIMUM, RECEIVE FEEDBACK FROM STAFF ON SATISFACTION AND WELLNESS AND ARE TRANSPARENT WITH THE FEEDBACK RECEIVED TO ALL LEVELS OF THE ORGANIZATION.</b>							
The AC has adopted policies and practices to annually survey staff on their level of satisfaction and overall wellness annually.							
The AC has a mechanism that uniformly and universally gauges satisfaction levels and overall wellness of staff.							
The AC has policies and practices that communicate results of satisfaction and wellness survey to all levels of the organization.							
The AC engages all levels of the organization in discussion regarding results of feedback.							
<b>CRITERIA 1.1 TOTAL:</b>							

**CRITERIA 1.2: ASSESSMENT CENTERS HAVE UNDERGONE AN ORGANIZATIONAL ASSESSMENT FOR TRAUMA-INFORMED PRACTICES WITHIN THE PAST FIVE YEARS. (FRAMEWORK, PG. 52)**

The AC has engaged in an organizational assessment for trauma-informed practices within the past five years.							
The AC has developed an action plan based on the results of the organizational assessment that is shared with Board, community, and staff.							
<b>CRITERIA 1.3 TOTAL:</b>							

**CRITERIA 1.3: EMPLOYEE ASSISTANCE PROGRAM (EAP) AND/OR COUNSELING IS OFFERED TO STAFF AS NEEDED. (FRAMEWORK, PG. 52)**

The AC policies and procedures offer EAP for staff.							
The AC frequently reminds and encourages staff to use EAP if needed.							
<b>CRITERIA 1.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 1.1 Sum Total							
Criteria 1.2 Sum Total							
Criteria 1.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 2: ASSESSMENT CENTERS SUPPORT STAFF WITH COMPREHENSIVE ONBOARDING TO ENSURE THEY ARE PREPARED TO SERVE YOUTH AND FAMILIES.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 2.1: ASSESSMENT CENTERS HAVE A MENU OF REQUIRED TRAINING AND COMPETENCIES THAT ARE INCLUSIVE OF THE TOPICS LISTED ON PAGE 54 OF THE ASSESSMENT CENTER FRAMEWORK (FRAMEWORK, PG. 52 - 54)</b>							
The AC policies, procedures, and practices include a comprehensive menu of trainings and competencies required for onboarding new staff.							
The list of onboarding training and competencies included on page 54 of the Framework is represented in the AC's required menu of onboarding training and competencies.							
<b>CRITERIA 2.1 TOTAL:</b>							

**CRITERIA 2.2: POLICIES AND PROCEDURES REQUIRE TRAININGS TO BE COMPLETED PRIOR TO WORKING WITH YOUTH AND FAMILIES. (FRAMEWORK, PG. 53)**

The AC policies, procedures, and practices prohibit staff from working with youth and families until required training and competencies are completed.							
<b>CRITERIA 2.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 2.1 Sum Total							
Criteria 2.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 3: ASSESSMENT CENTERS SUPPORT STAFF WITH INTENTIONAL ONGOING PROFESSIONAL DEVELOPMENT OPPORTUNITIES.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
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**CRITERIA 3.1: ASSESSMENT CENTERS HAVE AN ANNUAL BOOSTER TRAINING SCHEDULE AVAILABLE TO STAFF. (FRAMEWORK, PG. 52 - 53)**

In response to best practices, community needs, and staff requests, the AC creates and updates a schedule of annual trainings for staff.							
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The AC annually provides booster trainings for onboarding training and competencies.							
<b>CRITERIA 3.1 TOTAL:</b>							
<b>CRITERIA 3.2: AN INDIVIDUALIZED PLAN IS CREATED FOR EACH STAFF PERSON THAT IS TAILORED TO PROFESSIONAL DEVELOPMENTAL NEEDS AND DESIRES IDENTIFIED BY BOTH STAFF AND SUPERVISORS. (FRAMEWORK, PG. 55)</b>							
AC policies and practices create an individualized professional development plan for each staff member							
The plan is created with staff input about professional training needs and desires.							
The plan is created with input from supervisors and staff.							
The plan is created based on data analysis that cross references youth outcomes with staff.							
<b>CRITERIA 3.2 TOTAL:</b>							
<b>CRITERIA 3.3: ASSESSMENT CENTERS POLL STAFF ON TRAININGS NEEDED OR DESIRED TO EXPAND SKILLSET. (FRAMEWORK, PG. 53)</b>							
The AC regularly polls staff on training and support needs.							
The AC annual schedule of trainings is reflective of poll results.							
<b>CRITERIA 3.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 3.1 Sum Total							
Criteria 3.2 Sum Total							
Criteria 3.3 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 4: ASSESSMENT CENTERS CREATE AN ENVIRONMENT WHERE STAFF ARE PROVIDED SUPPORT TO PRACTICE SKILLS THEY LEARNED IN TRAINING AND INTEGRATE THEM INTO THE WORK PROCESSES.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: POLICIES AND PROCEDURES SUPPORT STAFF FOLLOWING TRAINING WITH COACHING, COMMUNITIES OF PRACTICES, CODING, OR OTHER FORMS OF IMPLEMENTATION SUPPORT. (FRAMEWORK, PG. 53)</b>							
AC policies, procedures, and practices provide staff with implementation support following skill-specific training.							
The AC has designated coaches to support implementation of skills.							
<b>CRITERIA 4.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 4.1 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 5: ASSESSMENT CENTERS PROVIDE CONSISTENT AND QUALITY FEEDBACK AND SUPERVISION TO STAFF.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: POLICIES AND PROCEDURES REQUIRE REGULAR MEETINGS BETWEEN STAFF AND SUPERVISORS. (FRAMEWORK, PG. 54 - 55)</b>							
AC policies, procedures, and practices require regular meetings between staff and their immediate supervisors.							
AC supervisors implement reflective supervision techniques during meetings with staff.							
AC supervisors are trained in trauma-informed supervision.							
<b>CRITERIA 5.1 TOTAL:</b>							
<b>CRITERIA 5.2: PERFORMANCE EVALUATIONS ARE CONDUCTED ANNUALLY THAT SPECIFICALLY EVALUATE THE SKILLS REQUIRED TO SERVE YOUTH AND FAMILIES. (FRAMEWORK, PG. 54 - 55)</b>							
AC policies, procedures, and practices require supervisors to conduct annual performance evaluations.							
The AC provides supervisors with support on best practices in conducting performance evaluations.							
The AC has a process to ensure performance evaluations are completed consistently among supervisors.							
<b>CRITERIA 5.2 TOTAL:</b>							

**CRITERIA 5.3: JOB DESCRIPTIONS, DUTIES, AND STAFF PERFORMANCE MEASURES ALIGN WITH TRAINING AND SKILLS EXPECTED FROM STAFF. (FRAMEWORK, PG. 54 - 55)**

All positions within an AC have an accompanying job description that detail duties of the job and skill set(s) required and desired.							
AC provide staff with job description prior to hiring.							
Performance measures within an evaluation align with duties and skills listed in the job description.							
<b>CRITERIA 5.3 TOTAL:</b>							

**CRITERIA 5.4: INFORMAL AND FORMAL RECOGNITION OF STAFF IS INCORPORATED THROUGHOUT POLICY, PRACTICE, AND SUPERVISION. (FRAMEWORK, PG. 54 - 55)**

The AC has established formal recognition of staff within policy and practice.							
The AC actively promotes informal and peer-to-peer recognition.							
The mechanism to gauge satisfaction (referenced in 1.1) includes questions around whether staff feel recognized and celebrated.							
<b>CRITERIA 5.4 TOTAL:</b>							



	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 5.1 Sum Total							
Criteria 5.2 Sum Total							
Criteria 5.3 Sum Total							
Criteria 5.4 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 6: ASSESSMENT CENTERS LEADERS COMMUNICATE AND INVOLVE STAFF IN ORGANIZATIONAL PLANNING AND SIGNIFICANT CHANGE AND/OR DECISIONS.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 6.1: LEADERSHIP OF ASSESSMENT CENTERS ENGAGE ALL LEVELS OF STAFF IN DECISIONS, ORGANIZATIONAL CHANGE, AND ORGANIZATIONAL PLANNING (I.E., STRATEGIC PLANNING). (FRAMEWORK, PG. 54 - 55)</b>							
The AC has a mechanism to seek out feedback and input when planning for organizational changes and operational decisions.							
All levels of staff are engaged in the development of the AC's action plan (see accountability).							

The mechanism to gauge satisfaction (referenced in 1.1) includes questions around whether staff feel their feedback is valued in organizational decision-making							
<b>CRITERIA 6.1 TOTAL:</b>							
<b>CRITERIA 6.2: LEADERSHIP OF ASSESSMENT CENTERS COMMUNICATE TO ALL LEVELS OF STAFF THE RATIONALE OF LARGE CHANGES AND DECISIONS IN A TIMELY MANNER. (FRAMEWORK, PG. 54 - 55)</b>							
AC practices require leadership to communicate rationale of large changes to all levels of staff in a timely manner.							
<b>CRITERIA 6.2 TOTAL:</b>							

	<b>Not a Current Practice or Policy</b>	<b>Not Under Consideration</b>	<b>Practice or Policy Under Consideration</b>	<b>Informal Practice</b>	<b>Formal Policy; inconsistent practice</b>	<b>Formal policy and consistent practice</b>	<b>Total</b>
Criteria 6.1 Sum Total							
Criteria 6.2 Sum Total							
<b>STANDARD TOTAL:</b>							

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
Standard 5 Sum Total							
Standard 6 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							

Core Component Summary Rating	Exploration	Preparation	Implementation	Sustainment
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- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
  
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement):
  
- ▶ List the changes recommended by the team:

# CORE COMPONENT: ACCOUNTABILITY

## STANDARD 1: ASSESSMENT CENTERS HAVE WRITTEN POLICIES AND PROCEDURES THAT OUTLINE INFORMATION SHARING EXPECTATIONS THAT ENSURES TIMELY EXCHANGE OF RELEVANT INFORMATION.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 1.1: INFORMATION SHARING AGREEMENTS ARE IN PLACE WITH COMMUNITY AND SYSTEM PARTNERS. (FRAMEWORK, PG. 58-59)</b>							
The AC has written agreements with one or more stakeholders, dependent on target population, that details information sharing expectations.							
The AC policies, procedures, and practices provide guidance to staff on information sharing expectation that align with written agreements.							
<b>CRITERIA 1.1 TOTAL:</b>							
<b>CRITERIA 1.2: POLICIES AND PROCEDURES ON INFORMATION SHARING EXIST AND ARE REVIEWED YEARLY FOR RELEVANCE AND NEEDED UPDATES. (FRAMEWORK, PG. 58 -59)</b>							
The AC has policies and procedures on information sharing that align with best practice, taking into consideration local and national laws.							

The AC has policies and procedures that provide guidance to staff on information sharing.							
<b>CRITERIA 1.2 TOTAL:</b>							
<b>CRITERIA 1.3: ASSESSMENT CENTERS INCORPORATE A CROSS-SYSTEM REVIEW ON INFORMATION SHARING WITH STAKEHOLDERS AND PARTNERS TO DETERMINE WHETHER IMPROVEMENTS ARE NEEDED. (FRAMEWORK, PG. 58-59)</b>							
The AC regularly reviews information sharing agreements with stakeholders and system partners for relevance, changes, and edits.							
<b>CRITERIA 1.3 TOTAL:</b>							
<b>CRITERIA 1.4: POLICIES AND PROCEDURES ARE CONSISTENT WITH LEGAL, ETHICAL, AND PROFESSIONAL STANDARDS OF PRACTICE. (FRAMEWORK, PG. 58-59)</b>							
The AC should reference local and national law(s) and best practice literature that informs information sharing policies and procedures.							
The AC should reference local and national law(s) and best practice literature that informs information sharing agreements.							
The AC reviews laws and best practice literature annually for potential updates needed to information sharing agreements.							
<b>CRITERIA 1.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 1.1 Sum Total							
Criteria 1.2 Sum Total							
Criteria 1.3 Sum Total							
Criteria 1.4 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 2: ASSESSMENT CENTERS IMPLEMENT A PROCESS BY WHICH RELEASE OF INFORMATION FORMS ARE UNIVERSALLY ADMINISTERED AT INTAKE.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 2.1: CENTERS HAVE POLICIES AND PROCEDURES THAT REQUIRE STAFF TO COMPLETE RELEASE OF INFORMATION WITH ALL YOUTH AND FAMILIES. (FRAMEWORK, PG. 58-59)</b>							
The AC has a standard release of information form, which is compliant with local and federal laws (i.e., HIPAA, FERPA, etc.).							
The AC policies, procedures, and practices requires a release of information be completed with all youth and families when communicating with stakeholders, providers, etc.							
<b>CRITERIA 2.1 TOTAL:</b>							

**CRITERIA 2.2: CENTERS HAVE WRITTEN POLICIES AND PROCEDURES ON HOW AND WHEN TO OBTAIN A RELEASE OF INFORMATION WHEN WORKING WITH YOUTH AND FAMILIES. (FRAMEWORK, PG. 58-59)**

AC has written policies and procedures detailing how and when to obtain re-lease(s) of information							
AC periodically conducts a continuous quality improvement (CQI) process to ensure releases are obtained and completed correctly							
<b>CRITERIA 2.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 2.1 Sum Total							
Criteria 2.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 3: STAFF ARE SUPPORTED AND TRAINED ON INFORMATION SHARING BEST PRACTICE.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 3.1: ASSESSMENT CENTERS PROVIDE TRAINING ON LAW, POLICY, AND PROCEDURE TO ALL PERSONNEL INVOLVED IN INFORMATION SHARING. (FRAMEWORK, PG. 58-59)</b>							
The AC provides training on information sharing and release of information in their onboarding process for new staff.							

The AC holds frequent booster trainings on information sharing and release of information							
<b>CRITERIA 3.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 3.1 Sum Total							
<b>STANDARD TOTAL:</b>							

#### **STANDARD 4: ASSESSMENT CENTERS IMPLEMENT AN ELECTRONIC SYSTEM AND PROCESS THAT ALLOWS THEM TO CAPTURE STRATEGIC DATA AND EASILY EXTRACT FOR REVIEW AND ANALYSIS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 4.1: ASSESSMENT CENTERS HAVE AN INTERNAL, ELECTRONIC DATABASE THAT CAN BE USED TO MANAGE INFORMATION ON THE YOUTH IT SERVES. (FRAMEWORK, PG. 60)</b>							
The AC has an internal, electronic database.							
The internal, electronic database is accessible and used by staff to enter and manage information on the youth it serves.							
<b>CRITERIA 4.1 TOTAL:</b>							



**CRITERIA 4.2: DATA COLLECTED FROM OTHER SYSTEMS IS INTEGRATED OR ENTERED AS NEEDED. (FRAMEWORK, PG. 60)**

The AC has information sharing agreements in place with other stakeholders that allows AC staff to have access to other informational databases (child welfare, courts, etc.) and allows for such data to be merged or manually entered into AC database.							
The AC policies and procedures detail what information staff should access and enter (if needed) into the internal database							
The internal, electronic database has a "required" feature that ensures data entry for required data.							
<b>CRITERIA 4.2 TOTAL:</b>							

**CRITERIA 4.3: THE COMPUTER-BASED SYSTEM IS EASILY ACCESSIBLE TO STAFF FOR RECORD REVIEW AND DATA ENTRY AND ALLOWS FOR DATA TO BE EXTRACTED FOR ANALYSIS. (FRAMEWORK, PG. 60)**

The AC database can be easily accessed by staff when working with youth and families.							
The AC database allows multiple users to enter data at any given time.							
The AC database can generate standardized and ad-hoc reports to extract data for analysis.							
<b>CRITERIA 4.3 TOTAL:</b>							

**CRITERIA 4.4: ASSESSMENT CENTERS COLLECT DEMOGRAPHIC DATA ON ALL YOUTH SERVED. (FRAMEWORK, PG. 60)**

Policies, procedures, and practices require staff to enter all youth demographic information into the internal, electronic database.							
The demographic fields within the AC database are marked as "required."							
<b>CRITERIA 4.4 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 4.1 Sum Total							
Criteria 4.2 Sum Total							
Criteria 4.3 Sum Total							
Criteria 4.4 Sum Total							

**STANDARD 5: STAFF ARE SUPPORTED AND TRAINED ON INFORMATION TECHNOLOGY.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 5.1: CENTERS HAVE POLICIES AND PROCEDURE AROUND DATA ENTRY AND TIMELINESS. (FRAMEWORK, PG. 60)</b>							
The AC has policies and procedures outlining expectations for data entry.							

The AC has policies and procedures that provide staff with a timeframe for when data should be entered							
<b>CRITERIA 5.1 TOTAL:</b>							
<b>CRITERIA 5.2: ASSESSMENT CENTERS HAVE CLEAR REQUIREMENTS FOR STAFF ON WHAT DATA IS REQUIRED TO BE COLLECTED VERSUS WHAT DATA IS RECOMMENDED. (FRAMEWORK, PG. 60)</b>							
AC have written policies and procedures that detail information required to be entered in the database							
AC have written policies and procedures that detail information recommended to be entered							
AC have a continuous quality improvement (CQI) process that reviews data entry for accuracy and timeliness							
<b>CRITERIA 5.2 TOTAL:</b>							
<b>CRITERIA 5.3: ASSESSMENT CENTERS PROVIDE TRAINING TO STAFF ON HOW TO EFFECTIVELY UTILIZE THE ELECTRONIC DATABASE AND PROCEDURES ON DATA COLLECTION. (FRAMEWORK, PG. 60)</b>							
The AC includes database training in onboarding process							
AC have a continuous quality improvement (CQI) process that reviews data entry for accuracy and timeliness and uses results to inform booster trainings.							
The AC frequently communicates the purpose and value of data collection, how it relates to the overall mission of the Assessment Center, and how data is used by staff							
<b>CRITERIA 5.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 5.1 Sum Total							
Criteria 5.2 Sum Total							
Criteria 5.3 Sum Total							
<b>STANDARD TOTAL:</b>							

## STANDARD 6: ASSESSMENT CENTERS HAVE A PLAN FOR IMPACT, OUTCOME, AND MEASUREMENT.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 6.1: ASSESSMENT CENTERS HAVE AN ACTION PLAN (I.E., LOGIC MODEL, THEORY OF CHANGE, ETC.) THAT CLEARLY ARTICULATES THEIR INTENDED OUTCOMES AND PLANS FOR MEASUREMENT. (FRAMEWORK, PG. 61, 62) (SEE ASSESSMENT CENTER LOGIC MODEL ON PG. 65 FOR EXAMPLE)</b>							
The AC has an action plan that has been created and/or updated within the past five years.							
The action plan articulates intended outcomes for the AC.							
The action plan articulates measurement methods.							
<b>CRITERIA 6.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 6.1 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 7: ASSESSMENT CENTERS HAVE A PLAN, POLICIES AND PROCEDURES IN PLACE THAT SUPPORTS CONTINUOUS EVALUATION OF DATA TO ENSURE OUTCOMES ARE MET.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 7.1: CENTERS HAVE A WRITTEN PLAN AND GUIDELINES ON THE METHOD AND FREQUENCY IN WHICH THEY REVIEW, ANALYZE, AND INTERPRET DATA AND OUTCOMES. (FRAMEWORK, PG. 61, 62)</b>							
The AC uses the outcomes and measurements stated in the action plan to inform a plan for continuous evaluation.							
Included in the plan for evaluation is the method and frequency in which data and outcomes will be reviewed and analyzed.							
The AC communicates data analysis and outcomes to stakeholders annually; at a minimum							
<b>CRITERIA 7.1 TOTAL:</b>							
<b>CRITERIA 7.2: CENTERS MODIFY THEIR COURSE OF ACTION BASED ON FINDING FROM PROGRAM DATA AND ANALYSIS. (FRAMEWORK, PG. 61, 62)</b>							
The AC can articulate changes made to programming, training, approach, etc. based on data analysis							

The AC communicates response to data analysis and changes made to stakeholders							
<b>CRITERIA 7.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 7.1 Sum Total							
Criteria 7.2 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 8: ASSESSMENT CENTERS HAVE A DATA COLLECTION AND ANALYSIS PROCESS TO ENSURE EQUITABLE, FAIR, AND TRANSPARENT TREATMENT OF YOUTH AND FAMILIES.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 8.1: CENTERS HAVE A PROCESS IN PLACE TO ANALYZE THE INTERSECTIONALITY OF OUTCOMES AND DEMOGRAPHIC DATA TO IDENTIFY AREAS OF DISPARATE TREATMENT AND INEQUITIES. (FRAMEWORK, PG. 62)</b>							
The AC database can extract demographic data on youth and families served.							
The AC regularly reviews and analyzes all Center outcomes specific to youth demographics (i.e., race, ethnicity, gender) to identify potential disparities.							

The AC can demonstrate changes made to programming, training, approach, etc. based on equity data analysis							
<b>CRITERIA 8.1 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 8.1 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 9: THE ASSESSMENT CENTER MANAGES A DIRECTORY OF SERVICE PROVIDERS.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 9.1: ASSESSMENT CENTERS HAVE AN ELECTRONIC, INFORMATION SYSTEM THAT ALLOWS THEM TO CATALOG COMMUNITY SERVICE PROVIDER INFORMATION. (FRAMEWORK, PG. 63, 64)</b>							
The AC information system has the capacity to catalog community-based service provider information.							
The AC policy, procedures and practices utilizes the information system to give staff access to information on community-based service providers							
<b>CRITERIA 9.1 TOTAL:</b>							

**CRITERIA 9.2: CENTERS HAVE IDENTIFIED A WIDE RANGE OF COMMUNITY-BASED SERVICES THAT ARE INCLUSIVE, DEVELOPMENTALLY APPROPRIATE, AND STRENGTHS-BASED. (FRAMEWORK, PG. 63, 64)**

The AC actively seeks out diverse service providers to include in the information system in order for staff to make referrals							
The AC actively seeks out community-based services where staff and programming represent the cultures of youth and families served to include language.							
The AC staff and leadership regularly meet with service providers to allow for a more comprehensive understanding of services, locations, requirements							
The AC has service providers and supports in their information system who address pro-social, treatment and basic needs in the catalog.							
<b>CRITERIA 9.2 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 9.1 Sum Total							
Criteria 9.2 Sum Total							
<b>STANDARD TOTAL:</b>							



## STANDARD 10: ASSESSMENT CENTERS CONDUCT SERVICE SYSTEM MAPPING AND FREQUENT CATALOGING PROVIDER INFORMATION.

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
<b>CRITERIA 10.1: ASSESSMENT CENTERS UPDATE A CATALOG OF SERVICE PROVIDERS ON A YEARLY BASIS AT A MINIMUM. (FRAMEWORK, PG. 63, 64)</b>							
AC policies, procedures, and practices require the Center to continuously update the catalog of service providers.							
Included in the catalog of service providers is general information (hours, location, etc.), available programming, and eligibility information.							
<b>CRITERIA 10.1 TOTAL:</b>							
<b>CRITERIA 10.2: ASSESSMENT CENTERS GO THROUGH A THOROUGH SERVICE MAPPING PROCESS EVERY THREE YEARS. (FRAMEWORK, PG. 63, 64)</b>							
The AC has engaged in service mapping with community stakeholders that reviews and maps available community services and supports to include who they serve, how referrals are made, and what services are provided.							
Service mapping with community and system stakeholders has occurred within the past three years.							
<b>CRITERIA 10.2 TOTAL:</b>							

**CRITERIA 10.3: THE ASSESSMENT CENTER COMMUNICATES GAPS IN SERVICES AND SUPPORTS THROUGH COMMUNITY FORUMS, ANNUAL REPORTS, ETC. (FRAMEWORK, PG. 63, 64)**

Gaps in services and supports identified by the AC in the cataloging or service mapping process have been communicated to community stakeholders through forums, reports, etc.							
<b>CRITERIA 10.3 TOTAL:</b>							

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Criteria 10.1 Sum Total							
Criteria 10.2 Sum Total							
Criteria 10.3 Sum Total							
<b>STANDARD TOTAL:</b>							

**STANDARD 11: ASSESSMENT CENTERS GATHER FEEDBACK FROM YOUTH AND FAMILIES ON QUALITY OF SERVICES.**

BENCHMARK	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	SELECTION JUSTIFICATION
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**CRITERIA 11.1: ASSESSMENT CENTERS HAVE A MECHANISM TO GATHER FEEDBACK FROM YOUTH AND FAMILIES ON THE QUALITY OF SERVICES TO ENSURE SERVICE PROVIDERS ARE RESPONDING TO YOUTH AND FAMILY NEEDS. (FRAMEWORK, PG. 63, 64)**

ACs have a mechanism to gather feedback from youth and families on quality of services (i.e., survey).							
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The AC enters feedback into the internal information system.							
The internal database allows for staff to document the success or challenges of youth and families accessing needed services.							
When Centers identify a service provider that is failing to meet youth and family needs, policies and practices ensure communication regarding concerns is had directly with provider.							
If concerns remain, policies, procedures and practices remove the provider from the Center's catalog of service providers.							
AC policies, procedures, practices require staff to enter outcomes of youth and families in the internal information system							
<b>CRITERIA 11.1 TOTAL:</b>							

# CORE COMPONENT SCORING

	NOT A CURRENT PRACTICE OR POLICY	NOT UNDER CONSIDERATION	PRACTICE OR POLICY UNDER CONSIDERATION	INFORMAL PRACTICE	FORMAL POLICY; INCONSISTENT PRACTICE	FORMAL POLICY AND CONSISTENT PRACTICE	TOTAL
Standard 1 Sum Total							
Standard 2 Sum Total							
Standard 3 Sum Total							
Standard 4 Sum Total							
Standard 5 Sum Total							
Standard 6 Sum Total							
Standard 7 Sum Total							
Standard 8 Sum Total							
Standard 9 Sum Total							
Standard 10 Sum Total							
Standard 11 Sum Total							
<b>CORE COMPONENT TOTAL:</b>							
Core Component Summary Rating	Exploration		Preparation		Implementation		Sustainment

- ▶ Summary of Evidence Supporting the Core Component Summary Rating:
- ▶ Potential Next Steps (e.g., Benchmarks/Areas to target for System improvement; strategies to guide system improvement):
- ▶ List the changes recommended by the team: