

OneNet Implementation Project Assessment and Work Plan Form

You are logged in as Western and Pacific CW Implementation Center (WPIC)

WPIC IP ID Number: IP107

OMB Number: (0970-0377)

[Help on this page](#)

The OneNet IP Assessment & Work Plan Form records descriptive information about the provider's plans for the implementation project and must be completed prior to entering T/TA Activities into OneNet. This form also documents completion of activities during the assessment and work plan phase of the Standard Business Process, including when authorized assessment activities are being carried out and when the IP work plan has been approved.

Items with an asterisk after the label are required.

IP Title*: test

State/Tribe/Territory participating in IP*:

Select State/Tribes

- Alabama
- Alaska
- Arizona
- Arkansas
- California

Click to ADD >>
<< Click to REMOVE

Added State/Tribes

If other than the State/Tribe child welfare agency, specify the primary participant(s) in the IP (e.g, county or local jurisdiction, court, private agencies operating on behalf of the state, etc.):

Region*: Region 1 - Boston

Assessment Activities

Are Activities currently being carried out as a part of the Authorized Assessment?* Yes No

Is the Assessment Complete?* Yes No **Date of Completion*:**

Project Information

Brief Description of the Implementation Project*:

0 characters (6000 max)

Project Duration*: Years Months

Project Start/End Dates*: -

Practice Area(s)*:

Select Practice Area(s)

- General
- Secondary CA/N Prevention
- CPS Referral and Intake
- Assessment of Safety and Risk
- Comprehensive Family Assessment

Click to ADD >>
<< Click to REMOVE

Added Practice Area(s)

Other (Specify):

Organizational/Systemic Area(s)*:

Select Organizational/Systemic Area(s)

- Practice Model
- Mission/Vision/Principles
- Leadership Decision-making/Practice
- Management/Administrative Decision-making/Practice
- Supervisory Decision-making/Practice

Click to ADD >>
<< Click to REMOVE

Added Organizational/Systemic Area(s)

Other (Specify):

IC Category:

Choose IC: None

Select Category

Click to ADD >>
<< Click to REMOVE

Added Category

Other (Specify):

IC Contact Info*:

Name*: **Email*:** **Phone*:** **Extension:**
(XXX-XXX-XXXX)

State/Tribe Info*:
Name*: **Email*:** **Phone*:** **Extension:**
(XXX-XXX-XXXX)

Will the project support implementation of one or more provisions of the Fostering Connections to Success and Increasing Adoptions Act of 2008?* Yes No

Information Entered By*:

Additional Network Members Needed to Deliver T/TA

Select Network Member(s)

- AdoptUsKids
- NRC for Adoption (NRCA)
- NRC for Child Protective Services (NRCCPS)
- NRC for Child Welfare Data and Technology (NRC-CWI)
- NRC for Community-Based Child Abuse Prevention (NR)

Click to ADD >>
<< Click to REMOVE

Added Network Member(s)

Cancel Save

Brief Description of activities planned*:

0 characters (2000 max)

State/Tribe Info*:**Name*:****Email*:****Phone*:****Extension:**

(XXX-XXX-XXXX)

Work Plan Tab Entered By*:**Optional Field:****Optional Field:**

Cancel

Save

[Access Standard Assessment Tool, Logic Model and Work Plans in TTACC Portal](#)**Is the Work Plan Complete?*** Yes No**Date of Completion*:**

Approval of Work Plan

Approval Status of Work Plan*: Approved Not Approved More Information Required Cancelled**Name of Approver*:****Date Approved*:****Approval Entered By*:**

Cancel

Save

IP Close Out

Has this Implementation Project concluded?* Yes No**Date T/TA work Completed*:****Further T/TA expected to be needed*:** Yes No**Name of Closer*:****Date of Closeout*:****Comments/Notes:**

0 characters (2000 max)

Closeout Entered By*:

Cancel

Save