

ATTACHMENT E

QUESTION BY QUESTION SOURCE TABLE FOR THE STAFF SURVEY

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QUESTION BY QUESTION SOURCE LIST FOR PAF STAFF SURVEY

This document lists each question on the PAF staff survey, along with its source(s).

| Staff Survey Question # | Question Text | Source |
|-------------------------|---|--|
| 1 | Which of the following best describes your role within [PAF PROGRAM]? | Developed for PAF |
| 2 | What is your age? | PREP Staff Survey |
| 3 | Are you male or female? | OMB |
| 4 | Are you Hispanic/Latino? If so, are you Mexican/Mexican American/Chicano/a? Puerto Rican? Cuban? | OMB |
| 5 | What is your race? | OMB |
| 6 | What is the highest level of education you have completed? | PREP Staff Survey |
| 7 | Prior to your current role, in which types of fields did you work? | TCU Survey of Organizational Functioning |
| 8 | How many years of experience do you have working in programs for expectant and parenting youth (either working directly with youth or in youth program administration)? | Modified from the TCU Survey of Organizational Functioning |
| 9 | How long have you worked for your current employer? | Modified from TCU Survey of Organizational Functioning |
| 10 | Please indicate the programs from which you currently serve clients | Developed for PAF |
| 11 | Please indicate the number of years you have spent serving clients in each of the following programs: Cal LEARN, AFLP, PYD | Developed for PAF |

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| 12 | <p>The next questions are about your work activities. Please indicate how often you engage in the following activities as part of your job. <i>Please answer thinking about your job as a whole.</i></p> <ul style="list-style-type: none"> a. Screen or assess potential participants for program eligibility b. Conduct participant intake c. Conduct substance abuse screening and/or assessment d. Screen participants for emotional or mental health problems e. Provide parenting education f. Provide case management services g. Develop or use coordinated care plans h. Monitor the implementation and the quality of screening and assessment protocols i. Conduct individual or group counseling sessions j. Conduct motivational interviewing sessions (conversations to elicit and strengthen motivation for change) k. Conduct parent-child therapy sessions l. Coordinate services for participants with other partner agencies m. Manage or supervise other individuals at your organization n. Work with clients to accomplish personal goals (for example, completing school, job searching) o. Conduct administrative activities (for example, paperwork) p. Other activities (Specify) | Modified from RPG Staff Survey |
| 13 | <p>In thinking about your current role with [PROGRAM], please indicate if for each of the following, you received sufficient training, you received some training but need more, you did not receive any training and need some, or if you don't feel you needed training in this area.</p> <ul style="list-style-type: none"> a. General introduction/overview of the program b. Training on core or required program topics c. Refresher training on program concepts d. Individual training (i.e., direct coaching from a supervisor, being mentored, shadowing a more experienced case manager) e. Training on youth engagement f. Specialized trainings (for example: domestic violence, mental health) | Modified from General Caseworker Survey |

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|-------------------------|---|---------------------------|
| 14 | <p>In the past fifteen months, how frequently have you participated in formal <i>state-run</i> training for [PROGRAM]?</p> <p>1 <input type="checkbox"/> Once a month 2 <input type="checkbox"/> Once every two months 3 <input type="checkbox"/> Once every three months 4 <input type="checkbox"/> Once every six months 5 <input type="checkbox"/> Once every twelve months 6 <input type="checkbox"/> Once in the past fifteen months 7 <input type="checkbox"/> I have not participated in any state-run [PROGRAM] training in the last fifteen months</p> <p>na <input type="checkbox"/> Not applicable – there was no formal training offered by the state for this program</p> | Modified from PREP survey |
| 15 | <p>In the past fifteen months, how frequently have you participated in formal training for [PROGRAM] conducted by <i>staff from your organization</i>?</p> <p>1 <input type="checkbox"/> Once a month 2 <input type="checkbox"/> Once every two months 3 <input type="checkbox"/> Once every three months 4 <input type="checkbox"/> Once every six months 5 <input type="checkbox"/> Once every twelve months 6 <input type="checkbox"/> Once in the past fifteen months 7 <input type="checkbox"/> I have not participated in any [PROGRAM] training conducted by my organization in the last fifteen months</p> <p>na <input type="checkbox"/> Not applicable – there was no formal training offered by my organization for this program</p> | Modified from PREP survey |
| 16 | <p>In the past fifteen months, how frequently have you received targeted support and individualized feedback to help you implement [PROGRAM] from either your organization, the developer, or a partner organization?</p> | Modified from PREP survey |
| 17 | <p>What additional training, if any, beyond any training for [PROGRAM] have you ever received?</p> | Modified from PREP survey |
| 18 | <p>In the past 15 months, how frequently have you participated in other formal training (not including formal training for [PROGRAM])?</p> | Modified from PREP survey |

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| 19 | <p>I need more training on...</p> <ul style="list-style-type: none"> a. Increasing participation of youth in the program b. Monitoring progress of youth as they participate in the program and receive services c. Improving the quality of communication with teens d. Engaging teens I work with in the services I provide e. Decreasing youth's risk behaviors and improving their decision-making skills f. Discussing sensitive topics such as birth control, sexual risky behaviors and healthy relationships with youth g. Improving youth's decision-making skills | Modified from TCU Survey of Organizational Functioning |
| 20 | <p>On average, what is your monthly caseload of clients... (mark one)</p> <ul style="list-style-type: none"> a. 1– 10 clients b. 11– 15 clients c. 16 – 20 clients d. 21 – 25 clients e. 26 – 30 clients f. 31 – 35 clients g. 36 – 40 clients h. More than 40 clients i. Not a case manager/Don't see clients | Developed for PAF |
| 21 | <p>How often do you typically see clients (mark one)</p> <ul style="list-style-type: none"> a. 1 visit with each client every 3 months b. 1 visit with each client every month c. 2 visits with each client every month d. There is no standard number of visits that you typically conduct e. I am not a case manager or client visits are not part of my job | Developed for PAF |
| 22 | <p>If you have supervisory responsibilities, how many case workers do you typically supervise?</p> <ul style="list-style-type: none"> a. None b. 1 – 4 c. 5 – 10 d. 10 – 15 e. More than 15 | Developed for PAF |

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| 23 | <p>In the past 12 months, have you noticed an increase or decrease in each of the following:</p> <ul style="list-style-type: none"> a. Your case load size b. Your overall workload c. Your paperwork d. The amount of time spent per visit e. The number of client visits per month | Modified from General Case Worker Survey |
| 24 | <p>Please rate how much you agree or disagree with the following statements about your workload:</p> <ul style="list-style-type: none"> a. The quality of the services I deliver would improve if my caseload was lower b. I often feel overwhelmed by the number of clients I serve on a monthly basis c. The number of clients I serve is just right | Developed for PAF |
| 25 | <p>Please rate how much you agree or disagree with the following statements about your organization:</p> <ul style="list-style-type: none"> a. Training helps facilitate implementation of this program b. Training activities take too much time away from delivery of program services c. The resources that are available help facilitate implementation of this program d. The workload and pressures here decrease my motivation to deliver the program services e. It is too difficult to adapt information and skills learned in trainings so that they will work in this program f. The background of program staff limits the kind of improvements to this program's implementation that are possible g. There is too little appreciation for trying to improve implementation of this program | Developed for PAF |

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| 26 | <p>Please read the following statements and decide how strongly you disagree or agree with each statement. My supervisor...</p> <ul style="list-style-type: none"> a. encourages staff to help each other with work problems? b. provides emotional support to me in difficult situations with program participants? c. is appropriately flexible when it comes to applying rules? d. supports me in balancing the demands of my job with my personal life? e. knows effective ways to work with program participants f. encourages creative solutions g. reinforces the training I receive h. has expectations for my work that are challenging but reasonable? i. gives me clear feedback on my job performance? j. has helped me work more effectively as part of a team? k. has regular meetings with me l. trusts my professional judgement | Modified from RPG survey |
| 27 | <p>How often do you request support or share knowledge and materials with each of the following people to address the day-to-day challenges of delivering services as part of [PROGRAM] – regularly, occasionally, or never?</p> <ul style="list-style-type: none"> a. Other colleagues delivering the same program within my organization b. Other colleagues delivering different services or programs in my organization c. Other staff outside my organization | Developed for PAF |

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| 28 | <p>Organizations have a “personality” that is reflected in the day to day operations of the organization and the way staff members view their work. These items ask about some dimensions that relate to the use of [PROGRAM] in your organization or school. For each item, please indicate the extent to which you disagree or agree the statement is true for your organization or school. Since you started to implement the program...</p> <p>Please rate how much you agree or disagree with the following statements:</p> <p><i>Mark (x) one for each</i></p> <ul style="list-style-type: none"> a. Staff members are adequately trained to implement the program at this organization b. Top administration strongly supports the implementation of the program c. Staff members get positive feedback and/or recognition for their efforts to implement the program d. Top administrators minimize obstacles and barriers to implementing the program at this organization e. This organization established clear and specific goals related to the implementation of the program f. There are performance-monitoring systems in place to guide the implementation of the program g. Training and individualized feedback are readily available to staff members involved in implementing the program h. Adequate resources are available to implement the program as prescribed i. Staff members have been encouraged to express concerns that arise in the course of implementing the program | RPG Staff Survey |
| 29 | <p>Please rate how much you agree or disagree with the following statements [<i>Options are: Strongly Disagree, Disagree, Neither Agree Nor Disagree, Agree, Strongly Agree</i>]: In my community . . .?</p> <ul style="list-style-type: none"> a. There are other programs that address topics that are the same as or similar to our program b. There is broad community support for programs that provide support for young parents or expectant youth, including helping to reduce teen pregnancy and STIs. | PREP Staff Survey |

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| 30 | <p>The following statements are about the feelings someone might have about using new types of programs or interventions which have structured components and provide written instructions (such as a facilitator’s guide or manual). To what extent do you agree or disagree with each statement in thinking about your work?</p> <p><i>A manualized intervention refers to any intervention that has specific guidelines and/or components that are outlined in a manual and/or that are to be followed in a structured or predetermined way.</i></p> <ol style="list-style-type: none"> I am willing to try new types of interventions or programs even if I have to follow a treatment manual Field experience is more important than using structured or manualized interventions I would not use structured or manualized interventions I would try a new manualized or structured intervention even if it were very different from what I am used to doing | Modified from RPG Staff Survey |
| 31 | <p>How much would each of the following influence your decision to adopt a new program if:</p> <ol style="list-style-type: none"> it was intuitively appealing?. it was required by your supervisor?. it was required by your agency or organization?. it was required by state agency funding your program? it was being used by colleagues who were happy with it? you felt you had enough training to use it correctly? | Modified from RPG Staff Survey |
| 32 | <p>Which of the following best describes what adjustments or adaptations you have made while implementing [PROGRAM]: (mark one)</p> <ul style="list-style-type: none"> I have been able to use the program exactly as defined by the developer (without any adjustments or adaptations) and meet the needs of my clients I have made minor adjustments or adaptations to the program design in order to meet for it to work for my clients I have made significant adjustments or adaptations to the program’s design (for example: structure, content, methods) in order to make it work for my clients | Developed for PAF |

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| 33 | <p>33. Which of the following adjustments or adaptations did you make to the program’s design in order to meet your clients’ needs?</p> <p>MARK ALL THAT APPLY ADD BOX: NO CHANGES MADE</p> <p>1 <input type="checkbox"/> Changed procedures and methods 2 <input type="checkbox"/> Changed the sequence of sessions or activities 3 <input type="checkbox"/> Increased the number of sessions or visits 4 <input type="checkbox"/> Decreased the number of sessions or visits 5 <input type="checkbox"/> Increased the length of sessions or visits 6 <input type="checkbox"/> Decreased the length of sessions or visits 7 <input type="checkbox"/> Changed program content 8 <input type="checkbox"/> Changed program materials 9 <input type="checkbox"/> Other (Please specify): _____</p> | Modified from RPG Survey |
| 34 | <p>Please rate how much you agree or disagree with the following statements about potential challenges you may have faced during program implementation (mark one for each item) [Options are: Strongly Disagree, Disagree, Neither Agree Nor Disagree, Agree, Strongly Agree]:</p> <p>a. Clients needed more than the time and resources I was able to give them b. I did not get the training and support I needed to deliver the program c. I had too many clients d. I had to spend a lot of time on crisis intervention and management, which prevented me from covering the program topics e. Many of my clients were disengaged or disinterested in the program f. Many of my clients frequently missed appointments and scheduled sessions g. I did not understand how to use some of the strategies required by the program</p> | Developed for PAF |

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|-------------------------|--|-------------------|
| 35 | <p>Which of the following statements most accurately describes how the training related to your ability to overcome challenges you faced during implementation of the [PROGRAM]?</p> <ul style="list-style-type: none"> 1 <input type="checkbox"/> The training was instrumental in helping me overcome the challenges I faced. 2 <input type="checkbox"/> The training was a little helpful in helping me overcome the challenges I faced. 3 <input type="checkbox"/> The training was not helpful in helping me overcome the challenges I faced. 4 <input type="checkbox"/> I already had the skills I needed in overcoming the types of challenges I faced. | Developed for PAF |

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| 36 | <p>Below are statements that describe ways a case worker or home visitor might think or feel about the client (i.e. teen parent or expectant youth) with whom she/he is working. <u>Think about the client visits you went on in the last month.</u> For how many of your clients, would you agree with the following statements? Work fast, your first thoughts are the ones we would like to see.</p> <ul style="list-style-type: none"> a. The client and I agree about the steps to be taken to benefit her and her family. b. The client and I both feel confident about the usefulness of our current activity in [PROGRAM]. c. I believe the client likes me. d. I have doubts about what we are trying to accomplish with [PROGRAM]. e. I am confident in my ability to help the client. f. I appreciate the client as a person. h. We agree on what is important for the client to work on. i. The client and I have built a mutual trust. j. The client and I have different ideas on what she wants and needs. k. We have established a good understanding between us of the kind of changes that would be good for this client. l. The client believes the way we are working toward her goals is correct. m. I believe the client can be successful | Modified from the Working Alliance Inventory-SF |
| | | |
| 37 | <p>Please rate how much you agree or disagree with each of the following statements about youth:</p> <ul style="list-style-type: none"> a. Youth in crisis should not be asked to set goals. b. The program is difficult to implement because there are youth who have no strengths. c. Youth should take the lead in establishing goals for themselves. d. Some youth are so vulnerable that I should not set high expectations for them. e. Not all youth can be successful. f. Helping youth participate in their community builds resilience. g. Youth do not need to participate in identifying the steps needed to achieve their goals. | Developed for PAF |

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| 38 | <p>Please rate how much you agree or disagree with the following statements about your role:</p> <ul style="list-style-type: none"> a. I assist youth in reflecting on caring relationships in their lives. b. I assist youth in developing S.M.A.R.T. goals. c. I know how to assist youth in reframing problems into challenges. d. I know how to include life planning into my home visits. e. When youth are in crisis, it is up to me to determine the best course of action. f. I use specific approaches to help youth identify their personal strengths. g. I establish high expectations for all youth. h. I rarely provide time for youth to reflect on past successes to help them achieve their goals. i. I encourage youth to have caring relationships outside of the program. j. I assist youth in using their strengths to work on their goals. <p>I assist youth in identifying opportunities to participate and contribute in ways that are important to them.</p> | Developed for PAF |

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| | <p>Please rate each item by checking the number that best describes <u>your</u> perception of your skill level in each area.</p> <p>INTERPERSONAL SKILLS</p> <ul style="list-style-type: none"> a. Interviewing b. Listening c. Counseling d. Non-verbal communication e. Reasoning f. Empathizing g. Interpersonal relationships h. Cultural sensitivity <p>CASE SKILLS</p> <ul style="list-style-type: none"> i. Eliciting accurate information from youth and/or their families j. Evaluating case facts k. Gathering complete and quality information from youth and their families l. Effectively having youth complete case plans m. Decision making skills n. Accuracy of judgments o. Developing case plans with youth and/or their families p. Involving youth in the assessment process q. Identifying youth and family strengths r. Connecting youth with needed resources s. Collaborative decision making with youth and/or their families | <p>From General Caseworker Survey</p> |