**LTFC Staff Questionnaire – Clinician/Lead Clinician**

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| **Interview Details** |  |
| Program Name: | Interviewer Name: |
| Full Name: | Date/Time of Interview: |
| Past and Current Position(s) at Program: |

\*Note: Before beginning the interview and/or providing this questionnaire to staff, provide a brief introduction, including monitor role and purpose of monitoring visit, confidentiality of staff interview, and clarify any questions. See *Introduction Prompt for Staff* for additional guidance as needed.

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|  | NOTES |
| **Tell me about your role and main responsibilities as a clinician.** |  |
| **Tell me about your educational background and how you ended up working as a clinician here.*** **Are you licensed? (If not licensed, explain your current licensure status.)**
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| **What is your typical caseload?** * **What would be the ideal manageable caseload?**
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| **Do you have any concerns related to the confidentiality of mental health services? (i.e. designated confidential space, confidential record management system)** If so, please describe.* Where do you meet with UACs?
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| **What approach do you implement in providing individual and group counseling sessions for UACs?*** Can you describe how your model or approach is trauma-informed?
* Describe how you successfully implement mental health and crisis-related interventions with UACs.
* Explain your process for tracking progress in a child’s case.
* How do you determine the frequency of meetings with UACs?
* Describe how mental health services are tailored for cultural sensitivity and age appropriateness.
* Do you utilize any assessment or screening tools in addition to ORR required assessments?
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| **What does *trauma-informed care* mean to you?****How do you deliver trauma-informed care as part of the clinical team?** |  |
| **What are the things that you love/enjoy about your job? What are the challenges you face in your job?** |  |
| **What system do you use to track and document clinical sessions?*** **What do you primarily use the UAC Portal for? (i.e. risk assessment, ISP, etc.)**
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| **Do you feel that you have received adequate training to perform your clinician duties? If not, please explain.*** **What additional trainings do you think the clinical team could benefit from?**
* What did you think about the additional training on sexual abuse for medical and mental health practitioners? (i.e. helpful, sufficient, any suggestions for improvement, etc.)
* How do you keep up-to-date on current and new ORR policies and procedures?

**(Lead Clinician) Do you have a system to assess ongoing staff training needs?*** **Please describe any training needs that your staff currently has.**
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| **How does the program, including foster parents, handle UACs’ behavioral challenges? How effective do you think the behavior management system is?*** Do you think foster parents are prepared to handle behavioral challenges in the home?
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| **Do you have any concerns about the treatment of UACs in care?****Do you have concerns about any particular staff members or foster parents (any staff members or foster parents you think should NOT be working with UAC)?** |  |
| **Describe the procedures when there is an allegation of child abuse or maltreatment in the foster home.** |  |
| **If a UAC in care is presenting with mental health concerns that warrant additional services, how does the program respond?** |  |
| **How is risk of runaway evaluated? What happens once a UAC is identified as being at risk of running away? What procedures/safeguards are implemented?** |  |
| **How does the clinical team collaborate and communicate with other departments?** * How are minors given appropriate accommodations for special mental health concerns or needs?
* What recommendations do you have to strengthen the collaboration and communication with other departments?
* How are you notified if other staff have a concern about a minor’s mental health needs?
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| **What is the program’s plan for dealing with a mental health emergency?*** **Have you had a mental health emergency at the program since you began working here? If so, please describe the situation.**
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| **Please describe your relationship with your supervisor.*** How often do you have individual and/or group supervision?
* How often do you participate in other staff meetings?
* Do you feel that you have adequate support from you supervisor?
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| **(Lead Clinician) Do you have enough input and resources to make changes to improve mental health services at the program?** * Do you think the current system is effective for meeting the mental health needs of UACs in care?
* What are the strengths and things that could be improved to the current system?
* **How do you help your assigned clinicians deal with secondary UAC trauma exposure and the other stressors of the clinician job? (Reflective Supervision?)**
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| **What general recommendations do you have to strengthen the program? What improvements would you put in place?*** Have you shared these ideas with your supervisor or any other program staff?
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| **What recommendations do you have for ORR that I can take back to share with our headquarter teams?** |  |

## Additional Notes

Enter Additional Notes.