

PURPOSE: The Demographic Survey is used to collect information to gain a better understanding of the status of a tribal child welfare program, including funding sources, demographics of the Tribal population, child welfare services offered, and how the program tracks and manages data. The Demographic Survey would be completed by any Tribal program receiving Tailored Services from the Center for Tribes.

OMB #: 0970-0XXXX
Expiration Date: XX/XX/XXXX

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: This form will be used to collect information on services requested by tribal child welfare programs. Public reporting burden for this collection of information is estimated to average 105 minutes including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-XXXX, Exp: XX/XX/XXXX. If you have any comments on this collection of information, please contact Roshanda Shoulders, ACF, Administration on Children, Youth and Families by e-mail at Roshanda.Shoulders@ACF.hhs.gov.

Capacity Building Center for Tribes	Tribal Demographic Survey
--	----------------------------------

Official Tribe Name:

Date:

Contact Information
Program Name _____
Contact _____
Title _____
Address _____ _____
Phone _____
Email _____
Website _____

Child Welfare Program Services		
	Yes	No
Title IV-B funding, Part I		
Tribal IV-B funding, Part 2		
Tribal/state IV-E agreement in place		
If yes, Administrative reimbursement funds		
If yes, Maintenance reimbursement payments		
If yes, Training reimbursement funds		
Tribal Title IV-E development grant completed and Title IV-E plan approved		

If Tribe has a federal IV-E planning grant:

Tribal Title IV-E Development Grant & IV-E Plan Information	
Year grant was received: 20_____	
Did the tribe have a child welfare program in operation prior to receiving the IV-E Plan Development Grant? <input type="checkbox"/> Y <input type="checkbox"/> N	
Did the tribe have a foster care program in operation prior to receiving the IV-E Plan Development Grant? <input type="checkbox"/> Y <input type="checkbox"/> N	
Did the tribe have an adoption program in operation prior to receiving the IV-E Plan Development Grant? <input type="checkbox"/> Y <input type="checkbox"/> N	
Is the tribe using an outside consultant to develop its IV-E Plan? <input type="checkbox"/> Y <input type="checkbox"/> N	
Date grant activities began: _____/_____ month year	
Has the tribe received a no-cost extension to complete grant activities? <input type="checkbox"/> Y <input type="checkbox"/> N	
Date pre-print was submitted: _____/_____ month year OR <input type="checkbox"/> currently in progress	
Date IV-E plan was approved: _____/_____ month year OR <input type="checkbox"/> plan awaiting approval	
Date IV-E program began operations: _____/_____	

month	year
Does the tribe have a current tribal-state IV-E agreement?	
<input type="checkbox"/> Y <input type="checkbox"/> N	
If Yes, with which state(s) _____	

Tribal Population and Location						
# enrolled tribal members						
# or % of enrolled tribal members living on-reservation or within tribal boundaries						
# or % of tribal population under age 18						
Approximate size (e.g., acres) of reservation or tribal communities						
State(s) in which reservation/tribal communities are located						
Children's Bureau Region						
BIA Region						
Law Enforcement, Tribal Court, and Judiciary						
Which agencies provide law enforcement for the tribe? (circle all that apply)	Tribe	BIA	State	County	FBI	Other (name):
Which law enforcement agency/agencies most often assists with child welfare matters? (circle all that apply)	Tribe	BIA	State	County	FBI	Other (name):
Does the tribe have an independent judiciary?			Yes	No		
Does the tribe have its own court that makes determinations in child welfare cases?			Yes	No	Part of an intertribal court	

Additional Comments:

Child Welfare Program Services			
	Yes	No	
Does the tribe currently operate a child welfare program? <i>If the tribe does not currently operate a child welfare program, please skip to Page 5-Child Welfare Staffing.</i>			
<i>If the tribe operates a child welfare program, please check Yes or No for each service area below. If yes, also indicate whether policies and procedures are in place for that service.</i>			
	Yes	No	If yes, check if policies & procedures for this service are in place
Child protection investigations			
Permanency planning			
Case management			
Family preservation			
Child abuse & neglect prevention			
ICWA			
Foster/kinship care/resource family recruitment			
Foster/kinship care/resource family placements			
Foster care/resource family licensing by tribe			
Transitional or independent living services for youth			
Other services for youth (please indicate) _____ _____ _____			
Kinship guardianships			
Adoptions			
Customary adoptions			
Cultural programs			
Other: _____			
Other: _____			
Other: _____			

	Yes	No		
In addition to the tribal program, do any outside/non-tribal agencies provide child welfare services for the tribe?				
If yes, which agencies provide child welfare services for the tribe (circle all that apply)	BIA	State	County	Other (name)
Service(s) provided by other agencies: _____ _____ _____ _____				

Additional Comments:

Child Welfare Staffing

Instructions for this section: Please write in the staff positions of the child welfare program and indicate the number of staff currently working in each position, the number of position vacancies, and the required educational level for the position (if any).

Staff Position	# staff currently in position	# positions vacant	Required educational level

Additional Comments:

Data Management & Child Welfare Program Statistics

	Yes	No
--	------------	-----------

Does the child welfare program have an electronic data management system?		
If yes, what is the name of this system? _____		
If No, how does the program track and manage data? _____ _____ _____		
	Yes	No
If the program <i>does not</i> currently have an electronic data management system, is it considering obtaining one in the near future?		
If yes, name of system(s) under consideration: _____ _____ _____		
Estimated number of children currently served by the tribal child welfare program _____		
Estimated number of children currently in out-of-home placements _____	_____ Tribal	_____ State or other
Current number of tribal foster/kinship/resource homes _____	Of these: # licensed by tribe _____ # licensed by state _____	
Estimated number of ICWA cases in which the tribal child welfare program is actively involved _____		
Estimated number of ICWA notifications received monthly _____		

Additional Comments: