

## Staff Questionnaire - Youth Care Worker/Lead Youth Care Worker

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

\*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.

	NOTES
<b>Tell me about your role and main responsibilities as a Youth Care Worker.</b>	
<b>What are the things that you love/enjoy about your job? What are the challenges you face in your job?</b>	
<b>Do you have access to the UAC Portal?</b> <ul style="list-style-type: none"> <li>▪ <b>If yes, are you aware of ORR tools, such as the UAC MAP, and where updates are located on the homepage?</b></li> <li>▪ <b>Ask YCW to describe where/how they would access the tools in the UAC Portal.</b></li> </ul>	

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<p><b>What formal/informal trainings have you received?</b></p> <ul style="list-style-type: none"> <li>▪ <b>What additional training do you think a person in your position could benefit from?</b></li> </ul> <p><b>(Lead Youth Care Worker) Do you have a system to assess ongoing staff training needs?</b></p> <ul style="list-style-type: none"> <li>▪ <b>Please describe any training needs that your staff currently have.</b></li> </ul>	
<p><b>Tell me about how you usually handle behavioral challenges among UACs?</b></p> <ul style="list-style-type: none"> <li>▪ <b>How effective do you think the behavior management system is?</b></li> </ul> <p><b>Have you received trainings on Behavior Management?</b></p> <ul style="list-style-type: none"> <li>▪ <b>If yes, what did you learn in the training?</b></li> <li>▪ <b>Are you allowed to use restraints? Please elaborate.</b></li> </ul>	
<p><b>What does <i>trauma-informed care</i> mean to you?</b></p> <ul style="list-style-type: none"> <li>o <b>How do you deliver trauma-informed care as part of the YCW team?</b></li> </ul>	
<p><b>How do you usually handle mental health concerns among UACs in the program?</b></p> <ul style="list-style-type: none"> <li>▪ With whom would you talk to and how would you respond to the concern?</li> <li>▪ Do you feel confident in your ability to appropriately</li> </ul>	

handle a mental health emergency or crisis situation?	
<b>What are the required UAC to staff ratios?</b> <ul style="list-style-type: none"><li>▪ Daytime:</li><li>▪ Evenings</li><li>▪ During transportation:</li></ul>	
<b>What does line of sight supervision mean to you? How do you ensure line of sight supervision during the following periods?</b> <ul style="list-style-type: none"><li>▪ Daytime:</li><li>▪ Nighttime:</li><li>▪ Weekends:</li><li>▪ During transportation:</li><li>▪ Legal Orientation:</li></ul>	
<b>What activities are provided to UAC every day?</b> <ul style="list-style-type: none"><li>▪ Outdoor:</li><li>▪ Indoor:</li><li>▪ Weekends:</li></ul>	
<b>How often are youth required to be outside?</b> <ul style="list-style-type: none"><li>▪ Weekdays:</li><li>▪ Weekends:</li></ul>	
<b>How often do you have staff meetings?</b> <ul style="list-style-type: none"><li>▪ <b>Team Meetings</b></li><li>▪ <b>All Staff Meetings</b></li></ul>	

<p><b>(Lead Youth Care Worker) How often do you have meetings with department leads?</b></p>	
<p><b>Tell me about your relationship with your supervisor.</b></p> <ul style="list-style-type: none"> <li>▪ <b>How often do you have meetings with your supervisor?</b></li> <li>▪ <b>Do you feel that your supervisor provides appropriate support, supervision, constructive criticism, and feedback?</b></li> </ul>	
<p><b>When YCWs come on shift, how are updates/lingering issues communicated between shifts?</b></p> <ul style="list-style-type: none"> <li>▪ How are YCWs informed about the following: <ul style="list-style-type: none"> <li>▪ UAC with special conditions:</li> <li>▪ Disabilities:</li> <li>▪ Allergies:</li> </ul> </li> </ul>	
<p><b>Describe the procedures for the following situations:</b>  <i>(Please note: any/multiple example(s) can be used for this question)</i></p> <ul style="list-style-type: none"> <li>▪ An allegation of child abuse or maltreatment: <i>(Example: UAC reports that a staff has made sexually inappropriate comments to youth)</i></li> <li>▪ Runaway:</li> <li>▪ Fire drill:</li> <li>▪ Grievances:</li> </ul>	
<p><b>What are some of the topics covered by the Code of Conduct?</b></p> <ul style="list-style-type: none"> <li>▪ <b>What happens if you violate the Code of Conduct?</b>  <i>(Ask YCW to answer the question with an example.)</i></li> </ul>	

<p><b>Do you have any concerns with the treatment of UAC in care?</b></p> <p><b>Do you have concerns about any particular staff members (any staff members you think should NOT be working with UAC)?</b></p>	
<p><b>What would you do to improve or strengthen the program here?</b></p>	
<p><b>What recommendations do you have for ORR that I can take back to share with our headquarter teams?</b></p>	

**Additional Notes**

Enter Additional Notes.