Parent-Child Assistance Program (PCAP) FETAL ALCOHOL & DRUG UNIT, BOX 359112

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PCAP Fidelity Assessment

Overview:

The Parent Child Assistance Program (PCAP) Fidelity Assessment is a quality assurance tool that helps to assess the degree of adherence of the PCAP model in a new agency or community context. The tool reviews the core characteristics of the PCAP model and provides information on how well the local agency or community is implementing PCAP. The PCAP Fidelity Assessment can be used in several ways:

- To review the core characteristics necessary in the planning and implementation phases of developing a PCAP replication site.
- To help inform agencies on the extent their PCAP program meets the original, evidence-based model. Using this information, the agency and community partners can make changes and track improvements over time.

1

• To help outside or formal evaluators understand the model elements for PCAP.

In general, the information provided on the PCAP Fidelity Assessment can be used to improve implementation of community-based services for children and families.

Instructions:

The PCAP Fidelity Assessment is organized into ten components, with two to seven characteristics per component. Each characteristic has one "anchor" statement that describes what **the ideal replication of the PCAP model** would look like relevant to that characteristic, and another anchor statement that describes what **a poor replication of the PCAP model**, or **a model at the beginning of its implementation/installation** might look like related to that characteristic.

For *each characteristic*, consider the elements of the PCAP site in question relevant to that characteristic. Next, select a rating on the five-point scale [5, 4, 3, 2, 1] that is provided.

- A score of 5 is the highest and indicates a PCAP site fully meets the characteristics of ideal replication of the PCAP model. In other words, the site shows the faithful replication of PCAP.
- A 4 means a PCAP site is **fairly close** to meeting the characteristics of a faithful replication of the PCAP model, but the site cannot be ranked as 100% faithful to the characteristic.
- A 3 means **midway between the two extremes**, indicating that you believe your site is about midway between being "fully faithful" and not meeting the PCAP Model core characteristic
- A 2 means there is a **small amount of similarity** between the site and the PCAP model characteristic, but that your site still only minimally matches with the PCAP model characteristic.
- On the other end of the scale, a score of 1 is the lowest and would indicate a PCAP site does not meet the core characteristics of the PCAP model.
- 'DK' stands for 'don't know' and indicates the characteristic cannot be scored for your site.

Characteristics of person filling out PCAP Fidelity Assessment

How many total years have you been involved in PCAP?

- Less than one year
- One to less than two years
- Two to less than four years
- Four to less than seven years
- Seven to less than ten years
- Ten to less than 12 years
- \Box 12 to less than 15 years
- 15 years or more

What is the location of your PCAP site (city/State):

Describe your primary role within the PCAP:

- Case manager or client advocate
- Clinical Supervisor
- PCAP Host Agency Director/Supervisor
- Office Assistant
- Other (Please specify)

Component 1: Client Characteristics

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|---|---|--|---|--|----------|
| 1.1 Client eligibility | Referrals meet all 3 eligibility criteria to be enrolled in PCAP. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Referrals do not have to meet the 3 eligibility criteria to be enrolled in PCAP. | | |
| 1.2 Client enrollment | Clients give signed consent to participate. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Clients do not give signed consent to participate. | | |
| 1.3 Relapse or set backs among clients | Clients are not asked to leave the program because of relapse of set backs. | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | Clients are asked to leave the program because of relapse or set backs. | | |

Component 2: Client Intervention Setting

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|--|--|--|---|--|----------|
| 2.1 Structure of relationship with clients | Case managers work with clients one-to-one. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Case managers <i>do not</i> work with clients one-on-one. | | |
| 2.2 Program length | Case managers work with clients for three years beginning at enrollment. | $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$ | Case managers work with clients for <i>less than</i> three years. | | |
| 2.3 Frequency of interaction with clients | Case managers meet with clients face to face a minimum of twice monthly. | 5 4 3 2 1 | Case managers visit with clients face to face <i>less</i> than twice monthly. | | |
| 2.4 Case Manager – Client Ratio | Case managers work with 16 active clients or less. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Case managers work with <i>more than</i> 16 active clients. | | |
| 2.5 Case manager accompaniment | Case managers regularly accompany clients to service provider agencies <u>and</u> case consultations. | 5 4 3 2 1 | Case managers <i>do not</i> accompany clients to service provider agencies <u>or</u> case consultations. | | |

Component 3: Characteristics of Staff

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|---|---|--|---|--|----------|
| 3.1 Case Manager professional qualifications | Case managers have a minimum of a BA/BS degree and two years of community based experience working with high-risk populations. | $5 4 3 2 1$ $\Box \Box \Box \Box$ $\Box -DK$ | Case managers do not have a minimum of a two year degree <u>or</u> have less than 4 years of community based experience working with high-risk populations. | | |
| 3.2 Case Manager personal background | Case managers have experienced similar life circumstances as clients, have surmounted these difficulties, and demonstrate continued success. | 5 4 3 2 1 DK | Case managers do not have similar life circumstances as clients. | | |
| 3.3 Clinical Supervisor professional qualifications | Supervisors have a minimum of a BA degree in a mental health or social work field, have a minimum of four years of experience working with high risk populations, <u>and</u> administrative and supervisory experience. | 5 4 3 2 1 | Supervisors do not have a minimum of a BA degree in related field, have <4 years of experience work with high risk populations, <u>or</u> have no administrative and supervisory experience. | | |

Component 4: Training

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|--|---|--|---|--|----------|
| 4.1 Initial staff training & orientation | Case managers and supervisors complete PCAP Intervention and Evaluation Training requirements. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Case managers and supervisors do not complete the PCAP Intervention and Evaluation Training requirements. | | |
| 4.2 Motivational Interviewing | Case managers and supervisors complete training on motivational interviewing. | 5 4 3 2 1 | Case managers and supervisors do not complete training on motivational interviewing. | | |
| 4.3 Ongoing training | Case managers and supervisors regularly participate in ongoing trainings on topics relevant to work with high risk populations as available. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Case managers and supervisors do not regularly participate in ongoing trainings on topics relevant to work with high risk populations as available. | | |

Component 5: Conducting the Intervention

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|---|---|--|---|--|----------|
| 5.1 Theoretical Practice— Relationship Theory | Case managers and supervisors understand the concepts of Relationship Theory <u>and</u> use it in daily practice with clients. | $5 4 3 2 1$ $\Box \Box \Box \Box$ $\Box -DK$ | Case managers and supervisors <i>do not</i> understand the concepts of Relationship Theory <u>or</u> use it in daily practice with clients. | | |
| 5.2 Theoretical Practice— Stages of Change & Motivational Interviewing | Case managers and supervisors understand the concepts of Stages of Change and Motivational Interviewing; <u>and</u> use it in daily practice with clients. | 5 4 3 2 1 | Case managers and supervisors <i>do not</i> understand the concepts of Stages of Change and Motivational Interviewing; <u>or</u> use it in daily practice with clients. | | |
| 5.3 Theoretical Practice— Harm Reduction | Case managers and supervisors understand the concepts of Harm Reduction; <u>and</u> use it in daily practice with clients. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Case managers and supervisors <i>do not</i> understand the concepts of Harm Reduction; <u>or</u> use it in daily practice with clients. | | |

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|---|--|---|--|--|----------|
| 5.4 Core protocols on boundaries and standards | Staff are familiar with <u>and</u> understand the PCAP protocols on boundaries and standards. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Staff <i>are not</i> familiar with <u>or</u> understand the PCAP protocols on boundaries and standards. | | |
| 5.5 Core protocols on boundaries and standards | Staff follow the identified PCAP protocols on boundaries and standards. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Staff <i>do not</i> follow identified PCAP protocols on boundaries and standards. | | |
| 5.6 Continual assessment of client strengths and problems | Case managers and supervisors conduct initial and ongoing comprehensive assessments to determine client strengths and problem areas. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box \Box -DK | Comprehensive assessments of client strengths and problem areas <i>are not</i> conducted at baseline <u>or <i>are not</i></u> conducted on an ongoing basis. | | |
| 5.7 Interactive assessment and planning of client goals | Case managers work continually with clients to identify individual goals and incremental steps required to meet those goals | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Case managers <i>do not</i> use goal setting techniques with clients. | | |

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|--|---|---|---|--|----------|
| 5.8 Continuity between program goals and client goals | Case managers coordinate program goals with client goals to create individualized intervention plans for each client. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Client intervention plans <i>are not</i> individualized. | | |
| 5.9 Inclusion of client social and family network | Case managers develop a network of contacts with family and friends involved in a client's life. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Case managers <i>do not</i> engage with family and friends involved in the client's life. | | |
| 5.10 Case manager operates within a network of service providers | Case managers develop and maintain professional relationships with community service providers and help clients utilize appropriate and available services. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box \Box -DK | Case managers <i>do not</i> help clients access wider network of available services. | | |
| 5.11 Integrity of Client File | Case managers maintain a client file according to PCAP client file protocols. | $ \begin{array}{cccccccccccccccccccccccccccccccccccc$ | Case managers <i>do not</i> maintain client files according to PCAP client file protocols. | | |

Component 6: Clinical Supervision to Case Managers

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|--|--|---|---|--|----------|
| 6.1 Supervisor-Case Manager Ratio | Clinical supervisors provide supervision to a maximum of 9 case managers. | $5 4 3 2 1$ $\Box \Box \Box \Box$ $\Box -DK$ | Clinical supervisors provide supervision to <i>more than</i> 9 case managers. | | |
| 6.2 Quality of relationships between Clinical Supervisors and Case Managers | The relationship between clinical supervisors and case mangers elicits from the case manager honest observations and personal responses to interactions with clients. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box \Box -DK | All case managers <i>do not</i> share honest observations on clients with supervisors. | | |
| 6.3 Frequency of supervision | Clinical supervisors meet individually with each case manager a minimum of every other week. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Clinical supervisors meet with case managers individually <i>less than</i> every other week. | | |
| 6.4 Content of supervision | During supervision, clinical supervisors work with case managers to monitor paperwork due, discuss and review each case, assess progress toward goals, determine next steps, and identify accomplishments and challenges. | 5 4 3 2 1 | Clinical supervisors <i>do not do any</i> of the following during supervision: discuss paperwork due; review each case; or determine service barriers. | | |

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Comments |
|--|---|---|--|----------|
| 6.5 Accessibility of Clinical Supervisors | Clinical supervisors are accessible to case managers for consultation and may accompany case manager in the field as the need arises. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box \Box -DK | Clinical supervisors are not accessible to case managers outside of pre- scheduled individual supervision. | |
| 6.6 Frequency of staff meetings | Clinical supervisors facilitate staff meetings on a weekly basis. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | Staff meetings occur <i>less</i> than weekly. | |
| 6.7 Content of staff meetings | During staff meetings, case managers offer peer- feedback on selected cases and clinical supervisors periodically invite community service providers for discussion on topics relevant to the service population. | $5 4 3 2 1$ $\Box \Box \Box \Box$ \Box -DK | During staff meetings, selected cases are <i>not</i> discussed and community services providers do <i>not</i> periodically attend. | |

Component 7: Clinical Supervisor in the Community

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|--|---|--|---|--|----------|
| 7.1 Clinical supervisor as intervention gatekeeper | Clinical supervisor oversees the screening of community referrals, determines eligibility, and offers enrollment to potential clients. | $5 4 3 2 1$ $\Box \Box \Box \Box$ $\Box -DK$ | Clinical supervisor <i>does</i> <i>not</i> oversee screening of community referrals, determine eligibility, or offer enrollment to potential clients. | | |
| 7.2 Community integration of clinical supervisor | The clinical supervisor is involved in the community in order to: identify services available, prevent service barriers by understanding various agency operations, and address service barriers as they arise. | 5 4 3 2 1 | The clinical supervisor does not have the community knowledge in order to identify services, prevent service barriers, or address service barriers as they arise. | | |
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Component 8: Program Evaluation

| Key Characteristics of PCAP Model | Full correspondence to PCAP Model | 5 4 3 2 1 | No correspondence to PCAP Model | Source of Documentation (when applicable) | Comments |
|---|--|---------------|--|--|----------|
| 8.1 Data collection | All case managers and supervisors collect data in accordance with PCAP protocols. | 5 4 3 2 1 | All case managers and supervisors <i>do not</i> collect data in accordance with PCAP protocols. | | |
| 8.2 Dissemination of evaluation data to staff | PCAP data are distributed to staff (clinical supervisors and case managers), used to improve the quality of intervention practices, and to assess the outcomes among clients. | 5 4 3 2 1 | Clinical supervisors and case managers do not see PCAP evaluation data. | | |
| 8.3 Dissemination of evaluation data to community | Data generated on the PCAP model are conveyed to a wider audience on a regular basis, e.g. presentations to the community and at relevant conferences and meetings, articles in newsletters and peer reviewed publications. | 5 4 3 2 1 | PCAP evaluation data are not disseminated to a wider audience on a regular basis. | | |