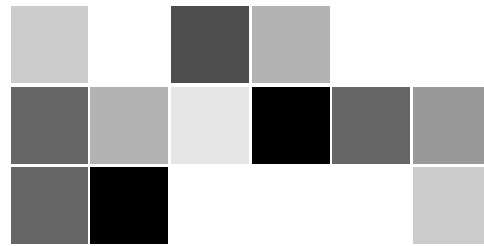
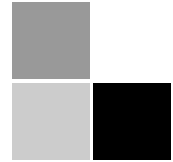


Evaluating Interprofessional Education Programs



Volume II of a Series Created by
The Interprofessional Education Consortium
with funding from the Stuart Foundation

DECEMBER, 2001



Evaluating Interprofessional Education Programs
By the Interprofessional Education Consortium
Supported by the Stuart Foundation, San Francisco, CA

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Preface

This manual was created by the Interprofessional Education Consortium (IPEC), a group of educators, administrators, and evaluators, funded by the Stuart Foundation. The purpose of this Consortium is to define, promote, and sustain interprofessional practice in universities, communities, agencies and schools by supporting interprofessional education (IPE) programs and by serving as a leader in interprofessional education.

The IPEC meets in a colloquium almost monthly to work on issues and products relevant to interprofessional education. This volume represents their second product intended to assist IPE programs to describe and evaluate their work. The members of the group that worked collectively to prepare these evaluation materials are as follows:

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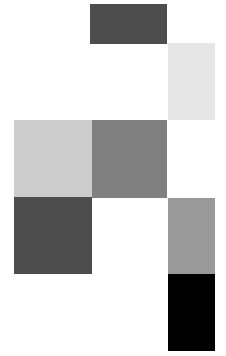
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Introduction

This manual and its companion pieces have been created for college and university educators interested in interprofessional education. The story behind these publications is one of collaboration among representatives of many diverse institutions and programs. Some history of that collaboration will put its development into perspective, and an understanding of how the manual came into being can help give a sense of how it can be used.

The Beginning

Funding from the Stuart Foundation of San Francisco brought together five college and university programs, all involved in interprofessional education. Collectively, directors and administrators of these five programs and their supporting consultants named themselves the Interprofessional Education Consortium (IPEC). Generous grants from the Foundation provided support for members of the Consortium over a four-year period, enabling them to meet together, to learn from one another, and to collaboratively produce these practical manuals for educators in the emerging field of Interprofessional Education (IPE). The first manual, *Defining the Knowledge Base for Interprofessional Education*, outlines the knowledge, skills, and values of the field. This second companion manual, *Evaluating Interprofessional Education Programs*, provides a set of evaluation tools to measure the attainment of IPE knowledge and skills, and also to evaluate programs. A third volume, *Creating, Implementing, and Sustaining Interprofessional Education*, will offer additional information relevant to successful IPE program development. It will cover the creation of an IPE program and curriculum, the cultivation and maintenance of community partners, descriptions of model programs, and program sustainability. The Stuart Foundation hopes that with the help of these three manuals, improvements in IPE training will have a positive impact on the communities the Foundation is dedicated to serving.





Participating Programs

The five university programs contributing to this venture are unique. They evolved on different campuses at different times and for different reasons, each taking its own approach to the development of an educational program. Each can serve as a model for others looking either to start up a program or to modify one that may already exist. The fact that they brought different perspectives to the work of the IPEC made the collaboration richer. Briefly, the five programs are as follows.

Center for Family and Community Partnerships

Western Washington University, Bellingham, WA

Housed in the Woodring College of Education, Department of Human Services, this undergraduate program provides interdisciplinary education and interprofessional collaborative experiences so that children served by its graduates may succeed academically. The curriculum in both education and human services is offered through the Human Services Department, and the Human Services degree requires a two-year internship experience in addition to the coursework. Driven in part by this internship requirement, the Center provides extensive technical assistance to schools in the Western Washington University area, supporting family resource center design, group facilitation, community development, assessment and evaluation, and internship development.

Child and Adolescent Development Program

San Francisco State University

The Child and Adolescent Development undergraduate degree was established in 1998, designed as an interdisciplinary, cross-professional program for students interested in studying and working with children, adolescents, and families. It is designed for breadth of knowledge about child and adolescent development and its applications to services for children and families, research, and policy development. All concentrations include research, observation of children and adolescents, and an internship. While the program is academically housed in the Marian Wright Edelman Institute, faculty from over 20 departments across the University teach courses within its framework.





The Rancho Cordova University-Community Partnership

California State University, Sacramento

This University/Community partnership offers undergraduate and graduate students the opportunity to develop interprofessional service knowledge, beliefs, and values while working in interdisciplinary teams with high risk children, youth, and families in a community near the Sacramento campus. The students represent a variety of degree programs housed in the College of Health and Human Services. University faculty and students alike provide services and simultaneously learn interdisciplinary skills through a community collaborative network that includes human service agencies, schools, and community residents.

The Institute for Community Collaborative Studies

California State University, Monterey Bay

Unique and innovative, this undergraduate program teaches and promotes integrative, multidisciplinary, interprofessional, and collaborative approaches to the design and delivery of health and human services. Organized into three parts, the Institute's program involves (1) a collaborative Health and Human Services bachelor's degree; (2) 400 hours of student work in the field in an interprofessional setting; and (3) community programs in interprofessional education and training in partnership with community colleges and agency staff development. In addition, the Institute is involved in family and community measurement and statewide policy development for healthy children and families.

Integrated Specialist Services Program

San Francisco State University

The only post baccalaureate program of the five participants, this is a 19-unit certificate program designed to train professionals from the fields of general and special education, social work psychology, mental health, and other human services to collaborate successfully in serving vulnerable children, youth, and families. The program also serves as a concentration for study in graduate degrees in Public Administration and Education. It explores how people from diverse professional backgrounds can more effectively serve communities and families by working together, and how they can be effective participants and leaders in the emerging integrated services field.





How The Manuals Were Developed

While the Stuart Foundation gave funding to each of the five programs to support the interprofessional education effort on its own campus, the Foundation asked each program to become part of a larger team whose aim was to determine the effectiveness of the educational efforts in the real world. Did training students to work collaboratively in and with communities really make a difference there? Or was it simply another good idea that could not produce measurable progress?

The original team consisted of four program directors and two co-directors, plus a dean. In addition, three consultants were invited from other universities that had experience in offering interprofessional education programs. Also included were an evaluator, a meetings facilitator, and Stuart Foundation staff. Membership changed over the years during which the group met almost monthly; all participants are listed in the preface.

The IPEC group began by crafting a working definition of Interprofessional Education since, as an emerging field, even that basic term lacked common recognition and mutual understanding. After that, the first order of business was to decide what outcomes needed to be measured in order to determine the extent to which IPE training makes a difference in students' performance in the field, and how any such difference is achieved. The questions involved were far more challenging than had been originally expected. What was each program actually training students to think, to value, and to do? Were there any commonalities among the five programs? If yes, then what were they? How were they commonly defined? And how were they to be measured? Thus the work began.

Members of the group agreed that, as educators, their primary focus should be on what they could affect: the outcomes of their educational programs. While community outcomes would be measured by the individual programs, the IPEC group itself could be most truly accountable for classroom and field work results. Thus, they decided to define the basic essentials that might guide the development of any IPE program. It quickly became apparent that all of the IPEC members' programs valued cross-disciplinary, cross-cultural, and strength-based work with communities and families. Beyond this agreement however, defining the essentials of an IPE program was not simple. It required a laborious journey towards consensus, as each member of the team brought his or her knowledge, background, experience, perspective, and curriculum to the process of negotiation and compromise, review and revision. The result was the delineation of a set of seven Core Competencies, and the Abilities associated with each core element. The Knowledge Base presented in Volume I of this series outlined the body of knowledge for each competency area. Since 1999 the Evaluation System included in this volume has been piloted and revised by the five university programs in the IPE Consortium.





Definition of Key Terms

Here are the four key terms, and the way that they are presented and illustrated in this manual:

Interprofessional Education – As defined by this group, interprofessional education (IPE) is a learning process that prepares professionals through interdisciplinary education and diverse fieldwork experiences to work collaboratively with communities to meet the multifaceted needs of children, youth, and families. It provides the knowledge, skills, and values for individuals to collaborate effectively with others as they serve communities and families in the field. IPE offers a holistic conception of human needs, one that transcends the traditional boundaries and distinctions of the traditional social service fields; it exposes learners to the frameworks and techniques of more than one social service profession; and it builds respect for, and the ability to collaborate with, individuals and groups who bring different perspectives to the solution of human problems (*Knapp, M. et al., 1998*). IPE is a relatively new field, intended to equip graduates to work across disciplines as they deliver services to families and children in an integrated and thus more efficient and effective way.

Core competencies – These are concepts essential to an integrated service delivery system and to interprofessional education. They are the basic standards for a program in this field. As defined by the IPEC group, there are a total of seven core competencies presented in this manual. However, it is likely these competencies will be modified, interpreted, and/or embellished by individual programs as well as by the changing new field of interprofessional education itself. A summary of core competencies is presented on pages 9-12.

Abilities – Mastery of each of the competencies can be demonstrated by certain skills or abilities. In this manual, these are listed immediately after the general definition of each competency.

Knowledge base – Following the broad definition of each core competency, a longer section discusses components of the competency in more specific terms. This is what IPEC has termed the “knowledge base” for this competency. It is found in Volume I of this series and provides a more detailed description of the knowledge, skills, and values associated with a particular competency. In addition, it references literature relevant to the IPE field.





The Audience for This Manual

Primary audiences for these volumes include college and university educators in the fields of education, health, and human services. Secondary audiences include professionals providing training and technical assistance to community partners and community organizations. The volumes are designed for use in describing IPE programs and evaluating their impacts on academic institutions, students, and communities. The knowledge exam included here can be used by any group interested in measuring IPE competencies.

Comprehensive evaluation efforts will help to highlight the nature and effectiveness of IPE. Process and outcome evaluation efforts will help others design better programs, track student knowledge and progress, assist in the development of new programs, and sustain existing ones. This volume is offered to assist with these types of evaluation.

Since IPE programs are so varied across the nation, any single evaluation system cannot hope to serve the needs of them all. Therefore this volume is intended as a resource guide that can expand and change to fit both the needs of a changing field and the emphases of particular programs in the areas of education, health, and human services. Forms have been designed so program administrators and educators can choose the kinds of student and program-related information they would like to track. The various surveys can be used to measure progress on program outcomes if they are completed at the time of students' program entry and at one or more follow-up points. Annual data collection with one-year follow-up surveys is recommended to provide enough information to monitor and assess program and student outcomes.

The evaluation system includes two major parts:

A Process Evaluation System

This system collects data from students, faculty, program administrators, and collaborating partners of an IPE program to describe:

- who is enrolled and their career goals;
- the characteristics of faculty and their courses;
- the views of program administrators about the place of IPE in their schools; and
- the characteristics and roles of community partners collaborating with an IPE program.

An Outcome Evaluation System

This system focuses on outcomes among students, their employers, the university or college that hosts an IPE program, and the community in which the program exists. Users can measure:

- students' evaluations of their field placement experiences;
- a field placement supervisor's evaluation of student competencies;
- the knowledge and skills of students on key competencies;
- the work experiences of students after they leave the program;
- impressions about those students among their employers;
- outcomes of having an IPE program in a college or university; and
- outcomes in the community among agencies, families, and children.





The table below gives a general overview of the forms to be used and what types of information they collect, when they should be completed, and by whom.

Form to Use	Information Collected	When Collected	Who Completes
Student Intake Form	Who is enrolled and their career goals	Within four weeks from the beginning of the term for new students	Students new to the program
Student Location Form	How to find students in the future	Within four weeks from the beginning of the term for new students	Students new to the program
Program Information Sheet	The characteristics of faculty and their courses	Annually, within four weeks from the beginning of the term for new faculty	Initially all faculty, then new faculty only
Faculty Information Form	Course requirements and competencies	Annually, within four weeks from the beginning of the term for new faculty	Initially all faculty, then new faculty only or new courses
Administrator's Questionnaire	The views of program administrators about the place of IPE in their schools	Annually, within four weeks from the beginning of the term for new administrators	Initially all administrators, then new administrators only
Community Collaborating Partner Information Form	The characteristics and roles of collaborating community partners to an IPE program	Within four weeks from the beginning of the term for new partners	Community partners
Student Evaluation of Field Placement Experience	Students' evaluation of their field placement experience	Within four weeks from the beginning of the placement and at end of placement	Students enrolled in a field placement
Evaluation of the Student by the Field Placement Supervisor	Field placement supervisors' evaluation of students' progress at field placement	Within four weeks from the beginning of the placement and at end of placement	Students' field placement supervisor
Student Exit Form	Students' knowledge of core competency areas at program exit	At time of students' completion of program	Graduating students
Student Post-Graduation Form	Students' use and knowledge of core competencies one year after program completion	One year after students' completion of the program	Program alumni
Letter to Employers	Explanation to employers	One year after students' completion of the program	Employers of program alumni
Employer Form	Employers' evaluation of students' use and knowledge of core competencies	One year after students' completion of the program	Employers of program alumni





Conclusion

Members of the Stuart Foundation's IPE Consortium recognize that dozens of IPE programs now exist in the United States. They are large and small, undergraduate and graduate, and in various host schools at their universities and colleges. Some of them grant degrees, and others offer a specialization or certificate. In many settings, these programs are outside the regular budgets and majors of their colleges and universities, existing on grants from private foundations or other donors. As these diverse programs become more mainstream, many will need to define the content of their curricula – perhaps modifying their program components – and to measure their success in transmitting interprofessional competencies to students. This volume is offered as a foundation for initiating the second of these tasks.

The Stuart Consortium members hope that readers find these materials useful and that they make a genuine contribution to the emerging interprofessional education field.





Core Competencies in IPE Programs

Any attempt to offer an IPE program must soon struggle with defining the core competencies of the field. What is it that these programs try to provide for students? What skills should employers expect? This Consortium has defined the seven core competencies that are central to an IPE program. They are as follows:

I. Family-Centered Practice

The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members. This includes the abilities to:

- Understand the ecological/systems views of family development;
- Articulate the history and philosophy of family-centered practice;
- Recognize models of school-based and school-linked services;
- Understand wraparound services and their application to family-centered practice;
- Distinguish between prevention, intervention, and promotion theories; and
- Understand the concept of Family Resource Centers.

II. Integrated Services

The ability to integrate services for children, youth, families, and communities in diverse settings. This includes the abilities to:

- Identify different models and types of integrated services;
- Identify barriers and strategies to overcome challenges to integrated service delivery;
- Establish and maintain governance structures that support collaborative, integrated services for children, youth, families, and communities;
- Identify short and long-term funding strategies and sources of support for integrated services for children, youth, families, and communities; and
- Develop strategies for sustainability of integrated services programs.



III. Collaboration/Group Process

The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes, including the abilities to:

- Share resources, expertise, and responsibility to achieve common goals in a collaborative setting;
- Build consensus and sustain participation within an interprofessional group;
- Recognize when it is and is not appropriate to work in a collaborative setting;
- Resolve problems and conflicts, using conflict resolution techniques; and
- Use decision-making processes that are relevant for collaborative groups.

IV. Leadership

The ability to implement and sustain change in interprofessional settings and diverse communities, including the abilities to:

- Develop, articulate, and sustain a vision for collaborative success;
- Ask hard questions about the status quo of the “systems” serving children, youth, families, and communities;
- Involve key stakeholders and key decision-makers in collaborative efforts;
- Recognize and support the emergence of leaders among collaborative participants; and
- Encourage and engage in appropriate risk taking as part of the process of change.





V. Communication

The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds, including the abilities to:

- Clarify and interpret jargon and technical terms for collaborating professionals, individuals, families, and communities;
- Seek out and accept feedback;
- Express ideas clearly in both oral and written forms;
- Use voice and word choice to help others hear and understand the message;
- Use public speaking and visual materials to inform, persuade, and motivate others;
- Produce written documents and make oral presentations that are understood by community members and professionals across disciplines;
- Listen actively to facilitate understanding; and
- Facilitate communication across multiple language and cultural groups.

VI. Assessment and Outcomes

The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services, including the abilities to:

- Determine the strengths, weaknesses, and needs of a targeted program or community;
- Articulate achievable, measurable, realistic outcomes for children, youth, families, and communities;
- Distinguish between process and outcome evaluations;
- Access and use process, outcome, and other data to improve collaborative outcomes and services for children, youth, families, and communities;
- Interpret data in a manner that is comprehensible and useful to members of the collaborative endeavor and the community;
- Assess the functioning of a collaborative endeavor; and
- Analyze and present process and outcome data to develop, monitor, and assess program outcomes and client progress.





VII. Social Policy Issues

The ability to recognize and acquire the knowledge and skills necessary to understand and/or change social policies across multiple systems that affect children, youth, families, and communities, including the abilities to:

- Articulate the history and trends leading to the present integrated services movement;
- Articulate how social contexts and policy affect practice and outcomes for children, youth, families, and communities;
- Maintain awareness of significant changes now pending and their potential impact and ability to generate alternative scenarios for change; and
- Understand how to effectively influence social policy.





I. The Process Evaluation System

Process evaluations enable any program to describe whom it serves and what services or interventions it provides. For IPE, this means knowing something about students, faculty, administration, and community collaborating partners. The system developed here includes several different forms to collect this information. All of these forms have been created in a generic format so that users can add their own program names or other local identifiers to the forms.

Describing Program Students

IPE programs vary in the students they attract, their backgrounds, disciplines, and hopes for the future. These forms enable an IPE program to create a profile of its students and, if used over time, to track how the characteristics of its enrolled students may change.

The Student Intake Form

This form enables a program to collect information on the following:

- Date of program enrollment;
- Enrollment status (full or part-time);
- Student demographics (gender, race/ethnicity, age, languages spoken);
- Highest degree currently held;
- Previous areas of study;
- Current employment status;
- Previous fields of employment;
- Length of time at current job;
- Level of collaborative work;
- Plans for immediate and long term employment plans; and
- Expected employment and schooling outcomes.



The Student Location Form

This form is designed to facilitate later follow-up of students. Students are asked to list three people who can help locate them in the future. The form identifies:

- Names;
- Addresses;
- Telephone numbers; and
- Relationship to student.

Describing Program Elements

IPE programs vary in the characteristics of their faculty, the administrative structures in which they are housed, and in the numbers and kinds of collaborative partners they may have. These forms enable an IPE program to create profiles of these program elements.

The Program Information Sheet

This form collects the following information:

- Program level (undergraduate, graduate, both, or post-graduate);
- Number of students accepted;
- Number of full and part-time faculty;
- Number of hours needed for program completion;
- Additional requirements needed for program completion;
- Type of degree students receive at program completion;
- Percentage of funding from university/colleges monies;
- Total annual budget;
- Number of external funders contributing to the program's budget;
- Number of courses in the IPE curriculum;
- Number of departments that are part of the program;
- Program location (i.e., academic department or division);
- School or college affiliation;
- Number of collaborating community partners;
- Type of collaborating partners;
- Number of partners who receive funds to support their participation;
- Number of students who have graduated from the program since a selected date;
- Number of new faculty teaching in the program; and
- Description of top administrative position.





The Administrator's Questionnaire

Data collected on this form enable an IPE program to assess potential barriers to program development and implementation from the point of view of administrators. It collects information on:

- How well informed administrators are about the IPE program;
- The strength of potential barriers to IPE program implementation and development;
- Specific challenges that the IPE program has faced on the campus; and
- Advice administrators would give to other universities interested in creating IPE programs about overcoming barriers and challenges.

The Faculty Information Form

This form enables an IPE program to profile:

- Faculty demographics (gender, race/ethnicity, age);
- Level of employment (full or part-time);
- Length of employment at the university/college;
- Highest degree currently held;
- Year highest degree obtained;
- Tenure status;
- Primary area of study for highest degree;
- Previous fields of employment;
- Reasons for involvement in the IPE program;
- Title of courses taught as part of IPE program;
- Number of student enrolled in their IPE courses;
- Type of course (lecture, seminar, field work);
- Course curriculum placement (IPE or general university offering);
- Skills or competencies dealt within their courses;
- Involvement in non-teaching activities (field placement supervision, publishing, conference presentations, consulting);
- Current faculty rank; and
- Administrative positions held.







II. The Outcome Evaluation System

Outcome evaluation systems help programs examine the results of their efforts, either in the short- or longer-term. In IPE programs, outcomes can occur among students, their employers, in the university or college of which the program is a part, or in the community.

Outcomes Among Students

To capture outcomes among this group, this system enables the user to collect data while a student is enrolled, when a student leaves the program, and at later intervals after graduation.

Student Evaluation of the Field Placement Experience

Most IPE programs have a field placement experience. To make sure that these placements are optimal, program coordinators and their agency partners should have feedback from students about the success of this experience. This form gathers both qualitative and quantitative data to measure:

- How much students believed they learned at their field placements about each of the IPE competencies;
- How much time and attention they were given by staff; and
- The strongest features and needs for change at these field placements.



Evaluation of the Student by the Field Placement Supervisor

In turn, to create an ongoing portrait of student competencies, field placement supervisors can rate student competencies as the students enter and leave their field placement experiences. This form measures:

- Perceived competencies at entry into the field placement and perceived competencies at its completion;
- Evaluations of the student's general work habits; and
- Suggestions by the field placement supervisor about how to improve the match of students to their particular agency needs.

The Student Exit Form

At the end of his or her program, each student completes this form which repeats some of the measures on the Student Intake Form. Specifically, it collects information on:

- Demographic characteristics;
- Highest degree completed;
- Student career plans; and
- Students' ratings of their proficiency in the seven core competency areas.

The Student Post-Graduation Form

One and two years after graduation from an IPE program, students can be contacted by mail or telephone to once again follow up on some of the areas initially investigated on the intake form, including:

- Date of program completion;
- Student demographics (gender, race/ethnicity, age);
- Highest degree held at IPE program entry;
- Highest degree currently held;
- Additional certifications received since graduation;
- Membership in professional organizations;
- Membership in community organizations;
- Involvement in community service projects or programs;
- Current employment status;
- Length of time at current job;
- Level of collaborative work; and
- Perceived level of proficiency in each of the seven competency areas.





The Knowledge and Skills Exam

This exam helps IPE programs measure how well their students have mastered the core knowledge necessary for effective collaborative practice. Potential test questions and their answers are outlined for each of the seven core competency areas: family-centered practice, integrated services, collaboration/group process, leadership, communication, assessment and outcomes, and social policy issues.

Programs should choose measures that:

- Best match the content of their own programs;
- Are appropriate in terms of the level of their programs (graduate or undergraduate);
- Are appropriate for career stage (entering student, recent graduate, or seasoned professional); and
- Create a measure of appropriate length and breadth for their own purposes.

Outcomes Among Employers

A central task for IPE programs is to produce workers who have excellent skills to work across disciplines in creating integrated services. Certainly the perspective of the employer is important in assessing the degree to which a program has succeeded.

The Employer Form

This form is used with permission of the student, who is asked to provide the name of a supervisor who might be contacted to collect this information. It asks:

- The length of time the program student has been employed with the company or organization; and
- The employer's ratings of the student's capabilities in the seven core competency areas.





Outcomes at the College or University

Colleges and universities often are structured along traditional academic disciplines. Crossing these traditional disciplines, the appearance of an IPE program on campus can have a variety of impacts. Faculty may become more sensitized to opportunities to work across disciplines and may participate in the actual coursework of the new program. Others may forge collaborations beyond their immediate responsibilities in the IPE program as they get to know colleagues in other disciplines. Faculty may also venture off campus and into the community more often as a result of this heightened emphasis on cross-disciplinary work.

Collection of data from faculty and administrators could be broadened from just those involved in an IPE program to any faculty or administrator on campus. Then data could be collected about perceived opportunities for, importance of, and participation in interdisciplinary activity.

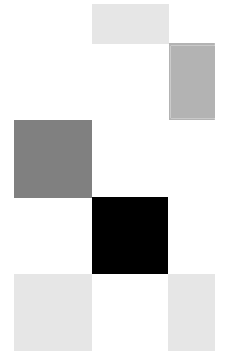
Outcomes in the Community

The ultimate goal of IPE programs is to improve outcomes for children, youth, and families by improving the systems of service delivery. As an IPE program creates more graduates who know how to integrate services, and if those new workers stay in the communities where they were educated, the system should begin to change. Even the process of sending students into community agencies for internships as part of their programs should begin to impact the way agencies deliver services.

The Community Collaborating Partner Information Form, included here, can be modified slightly to make it suitable for any community agency, whether or not that agency is an active participant in an IPE program. Question 7 on that form begins to measure the degree to which an agency participates in collaborative activities. Over time, the number of agencies who report engaging in these activities should increase.

To track outcomes for children, youth, and families in the community, the IPE program itself might include a curriculum module where students retrieve data on such outcomes. This module would teach students about the sources of such information, how to retrieve it, and how to present it in a community-friendly format. If these data were updated annually, an IPE program could monitor the degree to which outcomes for children, youth, and families are indeed improving. Stuart Foundation's IPE Consortium is in the process of developing a set of site visit protocols and surveys to investigate community outcomes related to successful program level outcomes.





III. Sample Forms

The following pages provide sample information forms which IPE programs can use to assemble data about their programs, their students, and their educational outcomes. The forms are generic so that programs can modify them to suit their own needs. They can be downloaded from www.philliberresearch.com. The authors encourage their liberal use.





(Name of Program)
(College or University)

Student Intake Form

Welcome to our program! We would like to have a little information about you as you begin your work with us. Please be assured that this information is confidential.

Today's Date ____/____/____

Date of Enrollment: Fall _____ Year
 Winter
 Spring

Name _____ Telephone _____

Address _____
Street Apt.

City _____ State _____ Zip _____

1. Are you...

- male
- female

2. What is your age?

- less than 20 years old
- 20 to 25
- 26 to 30
- 31 to 40
- 41 to 50
- older than 50 years old

3. What is your race/ethnicity?

- American Indian
- African American
- Other white (not Hispanic or Latino)

Pacific Islander

- Filipino
- Other Pacific Islander

Asian

- Asian Indian
- Cambodian
- Chinese
- Japanese
- Korean
- Laotian
- Thai
- Vietnamese
- Other Asian

Hispanic/Latino

- Chicano
- Mexican
- Central American
- South American

Other or interracial:
Specify: _____

4. Are you fluent in any language other than English?

- no
- yes: What language is that?
 - Spanish
 - Japanese
 - Something else: What? _____
 - French
 - Cambodian
- Sign Language
- Vietnamese
- Chinese
- Korean

5. What is the highest degree you hold now?

- High school diploma or GED
- AA degree
- BA or BS degree
- MA, MS, MSW, MEd degree
- PhD or some other doctoral level degree

Student Intake Form

(continued)

6. Are you currently enrolled at the University full time or part time?

- full time
- part time

7. Are you currently enrolled in...

- a graduate program, or
- an undergraduate program

8. In what month and year do you expect to finish your degree or certificate?

_____/_____
month year

9. If you hold an AA degree or higher, what was your primary area of study in your last degree?

- sociology or anthropology
- psychology
- English or languages
- history or political science
- nursing, medicine, or public health
- social work or counseling
- recreation or leisure studies
- business
- economics or math
- biology, chemistry, or other science
- fine arts
- education
- child development
- something else: What? _____

10. What is your employment status now?

- I am employed full time
- I am employed part time
- I am unemployed, looking for work
- I am unemployed, not looking for work
- I am unemployed, retired

11. If you are employed now, how many years or months have you held your current job?

_____ months or _____ years

12. If you are employed now, please tell us where you are employed and your position:

Place of Employment

Position

Briefly describe what your job entails: _____

13. In your job now, to what extent are you required to work collaboratively with people from other disciplines?

- I do this a lot
- I do this some
- I do this hardly at all

Student Intake Form

(continued)

14. Please check below all of the fields in which you have ever been employed.

- K-12 education
- higher education
- medical care
- criminal justice
- social services
- family service or counseling
- mental health
- other human service field: What? _____

15. When you finish your degree, which of the following do you believe will happen? Please check one response from each set.

Will you...

- keep the job you have now
- seek a new job
- not be employed

Will you...

- get more education immediately
- get more education later
- be finished with going to school

Will you...

- stay at the same position in your job
- try to get a different position
- not be employed

Will you...

- work in education, health, or human services
- work in some other field
- not be employed

16. Are there other employment or schooling outcomes that you expect?

- no
- yes: What are those? _____

17. Ten years after you complete your education, what do you hope to be doing?

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Student Exit Form

Congratulations on your graduation from our program! We would like to have a little information about you as you complete your work with us. Please be assured that this information is confidential.

Today's Date ____/____/____

Date of Enrollment: Fall _____ Year
 Winter
 Spring

Name _____ Telephone _____

Forwarding Address _____
Street Apt.

City State Zip

1. Are you...

- male
- female

2. What is your age?

- less than 20 years old
- 20 to 25
- 26 to 30
- 31 to 40
- 41 to 50
- older than 50 years old

3. What is your race/ethnicity?

- American Indian
- African American
- Other white (not Hispanic or Latino)

Pacific Islander

- Filipino
- Other Pacific Islander

Asian

- Asian Indian
- Cambodian
- Chinese
- Japanese
- Korean
- Laotian
- Thai
- Vietnamese
- Other Asian

Hispanic/Latino

- Chicano
- Mexican
- Central American
- South American

Other or interracial:

Specify: _____

4. What was the highest degree you held before entering the program?

- High school diploma or GED
- AA degree
- BA or BS degree
- MA, MS, MSW, MEd degree
- PhD or some other doctoral level degree

Student Exit Form

(continued)

5. For each one of the following competencies, please give us the following information:

Core Competency	Please report either the number of courses or credit hours in which you enrolled that dealt with this competency	Please rate how much the program has helped you develop proficiencies in each of the following competencies below: 4 = extensively 3 = some 2 = little 1 = not at all 0 = don't understand what is meant by this competency
Family-Centered Practice	_____ # of courses or _____ # of credit hours	_____ The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members.
Integrated Services	_____ # of courses or _____ # of credit hours	_____ The ability to integrate services for children, youth, families, and communities in diverse settings.
Collaboration/ Group Process	_____ # of courses or _____ # of credit hours	_____ The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes.
Leadership	_____ # of courses or _____ # of credit hours	_____ The ability to implement and sustain change in interprofessional settings and diverse communities.
Communication	_____ # of courses or _____ # of credit hours	_____ The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds.
Assessment and Outcomes	_____ # of courses or _____ # of credit hours	_____ The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services.
Social Policy Issues	_____ # of courses or _____ # of credit hours	_____ The ability to recognize and acquire the knowledge and skills necessary to understand, and/or change social policies across multiple systems that affect children, youth, families, and communities.

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Student Post-Graduation Form

As part of the evaluation of the (Name of Program), we are collecting one- and two- year follow-up information from our graduates. By completing this form you will assist us with curriculum and program development. Please be assured that this information is confidential.

Today's Date ____/____/____

Date of Enrollment: Fall _____ Year
 Winter
 Spring

Name _____ Telephone _____

Forwarding Address _____
Street Apt.

City State Zip

1. Are you...

- male
- female

2. What is your age?

- less than 20 years old
- 20 to 25
- 26 to 30
- 31 to 40
- 41 to 50
- older than 50 years old

3. What is your race/ethnicity?

- American Indian
- African American
- Other white (not Hispanic or Latino)
- Pacific Islander
 - Filipino
 - Other Pacific Islander

Asian

- Asian Indian
- Cambodian
- Chinese
- Japanese
- Korean
- Laotian
- Thai
- Vietnamese
- Other Asian

Hispanic/Latino

- Chicano
- Mexican
- Central American
- South American

Other or interracial:

Specify: _____

4. What was the highest degree you held before entering the program?

- High school diploma or GED
- AA degree
- BA or BS degree
- MA, MS, MSW, MEd degree
- PhD or some other doctoral level degree

Student Post-Graduation Form

(continued)

5. What is the highest degree you hold now?

- BA or BS degree
- MA, MS, MSW, MEd degree
- PhD or some other doctoral level degree

6. Have you achieved any additional certifications since you graduated?

- no
- yes If yes, what kinds? _____

7. Are you currently enrolled in a graduate program?

- no
- yes If yes, which one? _____

8. Are you a member of any professional organizations?

- no
- yes If yes, what kinds? _____

9. Are you a member of any community organizations?

- no
- yes If yes, what kinds? _____

10. Are you involved in any community service projects or programs?

- no
 - yes If yes, which projects or programs? _____

- | | |
|-------|---|
| _____ | Is your time... |
| _____ | <input type="checkbox"/> paid or <input type="checkbox"/> volunteer |
| _____ | <input type="checkbox"/> paid or <input type="checkbox"/> volunteer |
| _____ | <input type="checkbox"/> paid or <input type="checkbox"/> volunteer |
| _____ | <input type="checkbox"/> paid or <input type="checkbox"/> volunteer |

11. What is your employment status now?

- I am employed full time
- I am employed part time
- I am unemployed, looking for work
- I am unemployed, not looking for work
- I am unemployed, retired

12. If you are employed now, how many years or months have you held your current job?

_____ months or _____ years

Student Post-Graduation Form

(continued)

13. If you are employed now, please tell us where you are employed and your position:

Place of Employment _____

Position _____

Briefly describe what your job entails: _____

14. In your job now, to what extent are you required to work collaboratively with people from other disciplines?

- I do this a lot I do this some I do this hardly at all

15. For each one of the core competencies below please give us the following information:

Core Competency	Please rate how much the program has helped you develop proficiencies in each of the following competencies below: 4 = extensively 3 = some 2 = little 1 = not at all
Family-Centered Practice	_____ The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members.
Integrated Services	_____ The ability to integrate services for children, youth, families, and communities in diverse settings.
Collaboration/ Group Process	_____ The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes.
Leadership	_____ The ability to implement and sustain change in interprofessional settings and diverse communities.
Communication	_____ The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds.
Assessment and Outcomes	_____ The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services.
Social Policy Issues	_____ The ability to recognize and acquire the knowledge and skills necessary to understand, and/or change social policies across multiple systems that affect children, youth, families, and communities.

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Program Information Sheet

Name of University or College _____

Name of Program _____

Name of Program Director or Coordinator _____

Address _____ Telephone _____

Please give us a few basic facts about the program:

1. It is...
 - undergraduate
 - graduate
 - both, or
 - post graduate
2. How many students...
 - _____ applied to participate this year
 - _____ were accepted for participation
 - _____ actually participated this year
3. How many faculty teach or work in the program full time or part time?
 - _____ full time faculty or staff
 - _____ part time faculty or staff
4. How many units of coursework are required for completion of the program?
 - _____ units: These are...
 - trimester
 - quarter
 - semester
5. Please check any other requirements for program participation:
 - a thesis or research paper
 - an internship or agency placement
 - This placement does does not emphasize collaborative experiences.
 - a comprehensive exam
 - a portfolio
 - a summary or culminating project
 - something else: What? _____
6. What degree(s) do participating students receive when they complete their coursework?
 - no degree per se; they receive a certificate or equivalent for program participation
 - an AA degree
 - a BA or BS degree
 - an MS or MA degree
 - an MSW, MPH, or MEd degree
 - some other degree: What? _____
7. What percentage of the funding for your interprofessional education program comes from the regular college or university budget and can be thought of as "hard money"? _____ %
8. What is the total annual budget for this program? \$ _____
9. How many external funders contribute to this budget? _____ # of funders

Program Information Sheet

(continued)

10. How many units of coursework address interprofessional education? ____ units
11. How many college or university divisions/departments are part of the program? ____
12. Is the program housed in an academic department or division?
 No
 Yes: Which one? _____
13. What school or university college is associated with your program?

14. How many collaborating community partners are part of your overall program?
____ # of collaborative partners
15. What types of collaborative partners participate in your program? Check all that apply.
 social service organizations
 health care organizations
 educational organizations
 law enforcement organizations
 court/probation organizations
 family service/counseling organizations
 mental health organizations
 community organization or advocacy groups
 something else: What? _____
16. How many of these partners receive funds from your program budget to support their participation?
____ # of partners who receive funds
17. As of (*reference date*) how many students have graduated from the (*Name of Program*)
____ # of graduates
18. How many of the faculty teaching in your program are new this year? ____ # of new faculty
19. How many of these are replacements for previous faculty? ____
20. Which of the following best describes the top administrative position for your interprofessional education program?
 it is a full time position
 it is a part time position
21. The person in the position is:
 full time at the university
 part time at the university

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Administrator's Questionnaire

Name _____ Telephone _____

Title _____ Today's Date _____

1. How well informed would you say you are about the *(Name of Program)* here at *(University/College)*?

- very well informed
- pretty well informed
- not very informed, or
- not informed at all

2. In any university or college, interdisciplinary programs often encounter barriers. For each potential barrier listed below, please indicate how problematic this has been for the *(Name of Program)* at *(University/College)*:

Potential Barrier	A big problem	Something of a problem	A minor problem	Not a problem at all	I don't know
Finding funds to support the program					
Helping faculty understand the program					
Helping administrators understand the program					
Recruiting students to the program					
Enlisting faculty to teach in the program					
Establishing collaborative relationships with community groups					
Finding ways to reward faculty who participate					
Resistance of the academic community to anything outside of traditional departmental structures					

Administrator's Questionnaire

(continued)

3. Are there other specific challenges that this program has faced on your campus?

not that I know of

yes: What?

4. If someone in your position at another campus were to ask for your help in creating a project similar to the *(Name of Program)*, what advice would you give them about overcoming barriers or things to anticipate?

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Faculty Information Form

As part of our efforts to document the (Name of Program) here at (Name of University or College), we are collecting some information from the faculty who are part of the program. We need to provide our funders with profiles of both our students and our faculty. Please take a few minutes to complete this form for us. Thank you very much for your help!

Today's Date ____/____/____

Name _____ Telephone _____

Department/Division _____

1. Are you...

- male
- female

2. Do you work full time or part time here at (Name of University or College)?

- I work here full time
- I work here part time

3. Are you...

- less than 30 years old
- 30 to 39
- 40 to 49
- 50 to 59
- older than 59

4. What is your race/ethnicity?

- American Indian
- African American
- Other white (not Hispanic or Latino)

Pacific Islander

- Filipino
- Other Pacific Islander

Asian

- Asian Indian
- Cambodian
- Chinese
- Japanese
- Korean
- Laotian
- Thai
- Vietnamese
- Other Asian

Hispanic/Latino

- Chicano
- Mexican
- Central American
- South American

Other or interracial:

Specify: _____

5. What is the highest degree you hold now?

- AA degree
- BA or BS degree
- MA, MSW, MEd, MS or other master's degree
- PhD or some other doctoral level degree

6. Are you tenured now?

- Yes
- No

Faculty Information Form

(continued)

7. In what year did you receive your highest degree? _____ year
8. Are you in a tenure track position?
- yes
 - no
9. For how many years have you been employed at (*Name of University or College*)? _____ years
10. What was your primary area of study for your highest degree?
- biology, chemistry, or other science
 - business
 - economics or math
 - education
 - English or languages
 - fine arts
 - history or political science
 - nursing, medicine, or public health
 - psychology
 - social work or counseling
 - sociology or anthropology
 - something else: What? _____
11. Have you ever been employed in a human services program other than higher education?
- No
 - Yes: Please check all of the fields in which you have ever been employed
 - K-12 education
 - higher education
 - medical care
 - criminal justice
 - social services
 - family service or counseling
 - mental health
 - other human service field: What? _____
12. Faculty have many different reasons for becoming involved in a program like this. Please check below all the reasons why you became involved in (*Name of Program*).
- I was teaching the course(s) anyway
 - My dean or chairman asked me
 - The program director asked me
 - This is my area of expertise
 - Some other reason: What? _____
 - I believe the program is needed
 - This pays part of my salary
 - An interdisciplinary approach to this field is very important
-

Faculty Information Form

(continued)

13. For each course you teach as part of the *(Name of Program)* please give us the following information:

Title of the Course (Include the prefix and course number)	Usual Enrollment per class or section	Please check all that are true:	Was the course developed for this program or was it already part of the curriculum?	Please rate how much the course deals with each dimension defined below: 4 = extensively 3 = some 2 = little 1 = not at all
	____ # of students	<input type="checkbox"/> this is mostly lecture <input type="checkbox"/> this is a seminar <input type="checkbox"/> there is field work <input type="checkbox"/> a paper is required <input type="checkbox"/> exams are given <input type="checkbox"/> there are small group projects <input type="checkbox"/> there are oral presentations	<input type="checkbox"/> this is a new course <input type="checkbox"/> already in curriculum	<input type="checkbox"/> family-centered practice <input type="checkbox"/> integrated services <input type="checkbox"/> collaboration/group process <input type="checkbox"/> leadership <input type="checkbox"/> communication <input type="checkbox"/> assessment and outcomes <input type="checkbox"/> social policy issues
	____ # of students	<input type="checkbox"/> this is mostly lecture <input type="checkbox"/> this is a seminar <input type="checkbox"/> there is field work <input type="checkbox"/> a paper is required <input type="checkbox"/> exams are given <input type="checkbox"/> there are small group projects <input type="checkbox"/> there are oral presentations	<input type="checkbox"/> this is a new course <input type="checkbox"/> already in curriculum	<input type="checkbox"/> family-centered practice <input type="checkbox"/> integrated services <input type="checkbox"/> collaboration/group process <input type="checkbox"/> leadership <input type="checkbox"/> communication <input type="checkbox"/> assessment and outcomes <input type="checkbox"/> social policy issues
	____ # of students	<input type="checkbox"/> this is mostly lecture <input type="checkbox"/> this is a seminar <input type="checkbox"/> there is field work <input type="checkbox"/> a paper is required <input type="checkbox"/> exams are given <input type="checkbox"/> there are small group projects <input type="checkbox"/> there are oral presentations	<input type="checkbox"/> this is a new course <input type="checkbox"/> already in curriculum	<input type="checkbox"/> family-centered practice <input type="checkbox"/> integrated services <input type="checkbox"/> collaboration/group process <input type="checkbox"/> leadership <input type="checkbox"/> communication <input type="checkbox"/> assessment and outcomes <input type="checkbox"/> social policy issues

Family-Centered Practice: The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members.

Integrated Services: The ability to integrate services for children, youth, families, and communities in diverse settings.

Collaboration/Group Process: The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes.

Leadership: The ability to implement and sustain change in interprofessional settings and diverse communities.

Communication: The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds.

Assessment and Outcomes: The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services.

Social Policy Issues: The ability to recognize and acquire the knowledge and skills necessary to understand and/or change social policies across multiple systems that affect children, youth, families, and communities.

Faculty Information Form

(continued)

14. Please check any of the following that you have done in the past year.

- | | |
|---|--|
| <input type="checkbox"/> supervised students in a field placement | <input type="checkbox"/> presented at a professional meeting |
| <input type="checkbox"/> received a grant or contract | <input type="checkbox"/> consulted with a community program |
| <input type="checkbox"/> published an article in a journal | <input type="checkbox"/> published a book |
| <input type="checkbox"/> held an elected office in a professional association | <input type="checkbox"/> held a leadership position in any community group |

15. What is your current faculty rank?

- lecturer
- adjunct
- assistant professor
- associate professor
- professor
- something else: What? _____

16. Do you hold any administrative positions at the (*University/College*)?

- no
- yes: Please check all that apply:
 - department head
 - program director
 - assistant dean, associate dean, or dean
 - something else: What? _____

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Student Evaluation of Field Placement Experience*

The (Name of Program) is interested in receiving formal feedback from students about their field practice experience. Please be open and honest, as this information will help future students to determine the appropriate use of the site. It will also provide valuable input for changes in the Field Practice Program. This information will not be shared with the agency or other students without your permission (see next page). Attach additional sheets if necessary.

1. Please rank how well your experiences at this agency helped improve your competencies in each of the following:

	A lot				None
Family-Centered Practice: The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members.	5	4	3	2	1
Integrated Services: The ability to integrate services for children, youth, families, and communities in diverse settings.	5	4	3	2	1
Collaboration/Group Process: The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes.	5	4	3	2	1
Leadership: The ability to implement and sustain change in interprofessional settings and diverse communities.	5	4	3	2	1
Communication: The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds.	5	4	3	2	1
Assessment and Outcomes: The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services.	5	4	3	2	1
Social Policy Issues: The ability to recognize and acquire the knowledge and skills necessary to understand and/or change social policies across multiple systems that affect children, youth, families, and communities.	5	4	3	2	1

Comments: _____

* Adapted from materials developed by California State University, Monterey Bay, Institute for Community Collaborative Studies.

Student Evaluation of Field Placement Experience

(continued)

2. What is your evaluation of those who supervised your placement at the agency?

	A lot				None
How welcome they made you feel	5	4	3	2	1
Amount of time spent with you	5	4	3	2	1
Performance expectations and feedback	5	4	3	2	1
Interest and willingness to share philosophy and leadership style	5	4	3	2	1
Ability and willingness to provide learning opportunities	5	4	3	2	1
Meaningfulness of the tasks you were given	5	4	3	2	1

Comments: _____

3. What were the best things about your field placement experience? _____

4. What would have improved your field placement experience? _____

Use of This Evaluation

I give my permission for the use of this evaluation in all of the ways checked below:

- To be shown only to students interested in the agency
- To be shown to agency/supervisor
- To be placed in the agency folder for general student use
- Students who are interested in this agency may contact me

Telephone Number: _____

Your Name: _____

(Please PRINT)

Your Signature: _____ Date: ____/____/____

(Name of Program)
(College or University)

Evaluation of the Student by the Field Placement Supervisor*

Student Name: _____ Date: ____/____/____

Evaluation Period: _____ Hours Worked: _____

Placement Site: _____

Supervisor Name: _____ Phone: _____

(Name of Program) must receive this performance evaluation for the student to receive credit for the field practice experience. Your thoughtful and honest evaluation will be helpful in our assessment of the student's professional development. Please attach additional sheets if necessary.

1. Rank the student's performance in the following areas of professional development by circling the appropriate number:

	Outstanding	Excellent	Satisfactory	Adequate	Unsatisfactory
Maturity/professionalism in relation to staff and clients	5	4	3	2	1
Punctuality	5	4	3	2	1
Initiative	5	4	3	2	1
Flexibility	5	4	3	2	1
Sensitivity to confidential issues	5	4	3	2	1
Awareness of agency's mission and role in the community	5	4	3	2	1
Motivation and interest in assigned responsibilities	5	4	3	2	1
Overall performance of field practice activities	5	4	3	2	1

* Adapted from materials developed by California State University, Monterey Bay, Institute for Community Collaborative Studies.

Evaluation of the Student by the Field Placement Supervisor

(continued)

2. What development have you observed in the student's skills, knowledge, personal, and/or professional performance?

3. In what specific areas can the student work toward improvement of performance, knowledge, and/or skill development?

Evaluation of the Student by the Field Placement Supervisor

(continued)

4. Please rate your student's skills in each of the following:

I. Family-Centered Practice

The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Understand the ecological/systems views of family development	1	2	3	4	5	0
Articulate the history and philosophy of family-centered practice	1	2	3	4	5	0
Recognize models of school-based and school-linked services	1	2	3	4	5	0
Understand wraparound services and their application to family-centered practice	1	2	3	4	5	0
Distinguish between prevention, intervention, and promotion theories	1	2	3	4	5	0
Understand the concept of Family Resource Centers	1	2	3	4	5	0

II. Integrated Services

The ability to integrate services for children, youth, families, and communities in diverse settings. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Identify different models and types of integrated services	1	2	3	4	5	0
Identify barriers and strategies to overcome challenges to integrated service delivery	1	2	3	4	5	0
Establish and maintain governance structures that support collaborative, integrated services for children, youth, families, and communities	1	2	3	4	5	0
Identify short- and long-term funding strategies and sources of support for integrated services for children, youth, families, and communities	1	2	3	4	5	0
Develop strategies for sustainability of integrated services programs	1	2	3	4	5	0

Evaluation of the Student by the Field Placement Supervisor

(continued)

III. Collaboration/Group Process

The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Share resources, expertise, and responsibility to achieve common goals in a collaborative setting	1	2	3	4	5	0
Build consensus and sustain participation within an interprofessional group	1	2	3	4	5	0
Recognize when it is and is not appropriate to work in a collaborative setting	1	2	3	4	5	0
Resolve problems and conflicts, using conflict resolution techniques	1	2	3	4	5	0
Use decision-making processes that are relevant for collaborative groups	1	2	3	4	5	0

IV. Leadership

The ability to implement and sustain change in interprofessional settings and diverse communities. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Develop, articulate, and sustain a vision for collaborative success	1	2	3	4	5	0
Ask hard questions about the status quo of the "systems" serving children, youth, families, and communities	1	2	3	4	5	0
Involve key stakeholders and key decision-makers in collaborative efforts	1	2	3	4	5	0
Recognize and support the emergence of leaders among collaborative participants	1	2	3	4	5	0
Encourage and engage in appropriate risk taking as part of the process of change	1	2	3	4	5	0

Evaluation of the Student by the Field Placement Supervisor

(continued)

V. Communication

The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Clarify and interpret jargon and technical terms for collaborating professionals, individuals, families, and communities	1	2	3	4	5	0
Seek out and accept feedback	1	2	3	4	5	0
Express ideas clearly in both oral and written forms	1	2	3	4	5	0
Use voice and word choice to help others hear and understand the message	1	2	3	4	5	0
Use public speaking and visual materials to inform, persuade, and motivate others	1	2	3	4	5	0
Produce written documents and make oral presentations that are understood by community members and professionals across disciplines	1	2	3	4	5	0
Listen actively to facilitate understanding	1	2	3	4	5	0
Facilitate communication across multiple language and cultural groups	1	2	3	4	5	0

VI. Assessment and Outcomes

The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services. This includes the abilities to:

Abilities	None	Low	Med.	High	Very High	Not Observed
Determine the strengths, weaknesses, and needs of a targeted program or community	1	2	3	4	5	0
Articulate achievable, measurable, realistic outcomes for children, youth, families, and communities	1	2	3	4	5	0
Distinguish between process and outcome evaluation	1	2	3	4	5	0
Access and use process, outcome, and other data to improve collaborative outcomes and services for children, youth, families, and communities	1	2	3	4	5	0
Interpret data in a manner that is comprehensible and useful to members of the collaborative endeavor and community	1	2	3	4	5	0
Assess the functioning of the collaborative endeavor	1	2	3	4	5	0
Analyze and present process and outcome data to develop, monitor, and assess program and client progress	1	2	3	4	5	0

(Name of Program)
(College or University)

Community Collaborating Partner Information Form

As part of our efforts to document the (Name of Program) here at (Name of University or College), we are collecting some information from our collaborators. We need to provide our funders with profiles of our students, our faculty, and our community partners. Please take a few minutes to complete this form for us. Thank you very much for your help!

Name of Collaborating Group _____ Telephone _____

Name of Person Completing This Form _____

Your Title or Position _____

1. What part does your collaborating project play in this project? Please check all that apply:

- we are part of the advisory board
- we are part of a committee or other working group for the project
- we serve as consultants to the project
- some of our staff are guest lecturers in the project
- some of our staff teach in the project
- we take students as interns or on field placements
- something else: What? _____

2. How many full time equivalent staff are there in your group or project? _____ # of staff

3. How many volunteers do you have? _____ # of volunteers

4. Which of the following best describes your group?

- a school or other educational group
- medical or health care group
- part of the criminal justice system
- social services provider
- community collaborative
- family service or counseling agency
- mental health agency
- something else: What? _____

Community Collaborating Partner Information Form

(continued)

5. What are the benefits to your group of participating in (*Name of Program*)?
- we get some grant money
 - we get a supply of student interns
 - the program produces graduates we can more readily employ
 - we get an opportunity to teach at the university
 - we get good consulting help from other partners to the program
 - something else: What? _____
- _____
6. About how many total hours per month are required from anyone in your group to support this program?
- _____ # of hours
7. Is your group involved in any other collaborative efforts in the community?
- no
 - yes: In any of these other collaborative efforts have you...
 - shared intake and/or referral procedures
 - shared the management of common clients
 - applied for joint funding
 - shared data with each other about clients
 - shared staff
 - outstationed staff at other agencies
 - shared space and/or other physical resources
 - some other collaborative arrangement: What? _____
- _____

THANK YOU FOR YOUR HELP!

(Name of Program)
(College or University)

Letter to Employers

Dear Supervisor:

As you may know, the employee who gave you this form attended the *(Name of Program)* here at *(Name of University or College)*. We are surveying the employers of our graduates as part of our ongoing attempts to produce the best and most useful program possible.

Please understand that your comments will be absolutely confidential and will not in any way be associated with your name. We are interested in your candid comments so that we can identify areas where we need to improve our program with the help of responses from many employers like you.

Please return the form in the enclosed, stamped envelope. The form goes directly to the research firm that is processing these data for us and not to the employee who gave you the form. We thank you for your time.

Sincerely yours,

Director/Coordinator of Program

(Name of Program)
(College or University)

Employer Form

As part of the evaluation for the (Name of Program), we are surveying the employers of our former students. This information will be used to assist in further curriculum and program development. Please be assured that this information is confidential.

Today's Date ____/____/____

Name of Graduate _____

Position of Graduate _____

Position of Employer _____

1. How long has this employee been with your company or organization? _____ months or _____ years
2. Please rate this employee's abilities in the following areas compared to others you have hired of similar age and experience:

Core Competency	5 = much more capable than others of similar age and experience 4 = somewhat more capable than others 3 = about the same as others of similar age and experience 2 = somewhat less capable than others 1 = much less capable than others of similar age and experience NA = this is not something that this employee does in this job
Family-Centered Practice	_____ The ability to understand the philosophy and process of family-centered practice and apply skills necessary to facilitate integrated services provision in collaboration with families, professionals, and community members.
Integrated Services	_____ The ability to integrate services for children, youth, families, and communities in diverse settings.
Collaboration/ Group Process	_____ The ability to work in teams in interprofessional settings across traditional lines of programs, agencies, disciplines, and diverse communities to establish common missions and purposes.
Leadership	_____ The ability to implement and sustain change in interprofessional settings and diverse communities.
Communication	_____ The ability to communicate effectively in interprofessional settings with people from different cultural, social, professional, and organizational backgrounds.
Assessment and Outcomes	_____ The ability to understand and implement outcome-based accountability as it pertains to integrated and collaborative services.
Social Policy Issues	_____ The ability to recognize and acquire the knowledge and skills necessary to understand, and/or change social policies across multiple systems that affect children, youth, families, and communities.

Employer Form

(continued)

3. In his/her current position, to what extent is he/she required to work collaboratively with people from other disciplines or professional fields?
- never
 - occasionally
 - some of the time
 - all of the time

THANK YOU FOR YOUR HELP!



IV. Measuring Student Knowledge and Skills in IPE Programs

In this section, a number of different questions along with their possible answers are provided for testing students' knowledge and skill levels in each of the seven IPE core competency areas. The questions in each area are not intended to be exhaustive or complete but rather are samples or illustrations for guiding instructors in creating their own assessment instruments. Although the number of questions for each competency area varies, each set of questions is representative of the content for that area.

By selecting and creating questions appropriate to their own course instruction, IPE teachers can use results to help measure how well their students have mastered the knowledge necessary for effective collaborative practice.

Programs should choose measures that:

- Best match the content of the program;
- Are appropriate in terms of the level of the students (i.e., graduate or undergraduate);
- Are appropriate for career stage (i.e., entering student, recent graduate, or seasoned professional); and
- Are appropriate length and breadth for the program's purposes.



Measuring Knowledge and Skills for Family-Centered Practice

1. A collaborative group has received funding to open a Family Resource Center. The center will be developed and maintained following the principles of family-centered practice and the ecological view of family development. It is your job to provide this information to the community. What characteristics of the Center will you mention to convey the philosophy and foundation upon which the Family Resource Center will be built?

A good answer to this question would mention that the Family Resource Center will:

- Focus on family strengths and expertise;
- Ask families to act as partners and decision makers in service-provision;
- Provide services in a flexible, accessible, and comprehensive manner;
- Treat families with respect and care;
- Communicate with families in a way that is respectful of their strengths, needs, and culture;
- Regard the family as a child's first and most important teacher;
- Develop programs and policies in collaboration with the community, including family members;
- Use an appropriate balance of intervention, prevention, and promotion in response to families' needs;
- Use an evaluation system that is fair and realistic; and
- Encourage family members to assist in the design of outcomes.

2. Describe wraparound services.

A good answer to this question would:

Indicate that wraparound services use an interprofessional team to consider all significant areas of the family's life. This team works in collaboration with the family to ensure that services are individualized to achieve positive outcomes. Finally, members take an active role in the design of services.





3. You are working with a family that has a number of needs. While the family has a home at the moment, they are often left homeless due to loss of employment and domestic violence issues. Currently, the mother is living apart from her husband and has sole responsibility for her two children, ages 7 and 9. Your agency uses wraparound services. You have been asked to convene an interprofessional team to help the family with their challenges and with the development of a service plan. Who will you invite to be part of this team?

A good answer to this question would say that the team should include:

- The mother;
- Any natural supports you can help her identify (friends, extended family, clergy, neighbors, etc.);
- Service providers that are already involved with the family; and
- Service providers that may not be involved at this time but could be helpful to the family (teachers, school counselors, principal, and any other pertinent school personnel).

4. Define school-linked and school-based models of service provision. What are some of the advantages and disadvantages of each?

A good answer to this question would:

Indicate that school-based services provide assistance to children and families through cooperative arrangements between schools, service providers, and community organizations and that these services are provided at or near the school site.

Recognize that school-based services reduce the issues of transportation, scheduling, and fragmentation. Communication and collaboration may increase as school personnel and service providers form relationships and have increased access to one another. However, providing school-based services requires a true collaborative approach. Challenges that occur with any collaborative endeavor will have to be addressed by all those involved in the project. The school may have space limitations.

Indicate school-linked services are cooperative arrangements between school personnel and community service providers to help families receive services in a more accessible and comprehensive manner. Information sharing is increased between the school and service providers. There is no need for the school to provide space for this type of program. Families may still face the challenges of transportation, scheduling difficulties, and fragmented service provision.





5. You are a member of a collaborative that wants to develop a one-stop service center to address the needs of recent Spanish-speaking immigrants to your community. What needs to be in place to insure effective communication across all agencies that will help those seeking assistance? Include things that any good service center should have as well as things that may be needed for this specific population.

A good answer to this question would note the need for:

- Agreements or similar positions toward undocumented persons;
- Memorandums of understanding (MOUs) to allow the sharing of confidential information with other agencies;
- Bilingual staff;
- Outreach and information materials in Spanish;
- Understanding of immigration laws;
- Knowledge of benefits for which families may be eligible;
- Protocols for intake and referral;
- Common set of identification numbers for registered families;
- Common set of forms to collect process and outcome information; and
- Referral network or co-located services to address immigration, housing, entitlements/benefits, educational, and mental and physical health needs that the center cannot deal with in-house.

6. What are the differences in these three approaches to improving the well-being of families and children: intervention, prevention, and promotion?

A good answer to this question would:

Define an intervention as a problem-oriented, remedial approach that involves the provision of an interrelated set of services, activities, and/or resources designed to eliminate or diminish problem situations, behaviors, or phenomena. Prevention approaches are designed to head off the development and/or occurrence of negative outcomes within families through the elimination of risk factors related to the target issue or problem. A promotion approach strengthens existing protective or resiliency factors and promotes positive behaviors, functioning, and conditions.





7. You have been running a Family Resource Center for three years and sense that the community make-up and needs have changed. What factors should you examine in your assessment of children and families in your community?

A good answer to this question would include many of the following topics or issues with a focus on risk factors, protective factors, assets, and community capacity, including:

- Health (nutrition, medical and dental care, insurance);
- Education (quality of schools, availability of tutoring, adult education, programs);
- Income and employment (lack thereof, training opportunities);
- Basic needs (housing, food, clothing);
- Transportation;
- Child care;
- Mental health concerns;
- Entitlements;
- Community safety;
- Public services (buses, garbage removal, street repairs);
- Population turnover;
- Drug and alcohol abuse;
- Environmental hazards;
- Domestic violence;
- Police protection;
- Availability and access to services;
- Resources available for developing needed services;
- Natural support systems; and
- Demographic characteristic of members (race, gender, age, single parent versus two parent homes, number and ages of children).





Measuring Knowledge and Skills for Integrated Services

1. A new family has recently immigrated into your community. This family needs housing, wants to register their children for free or reduced price lunch in school, is seeking employment, lacks clothing, and is temporarily out of food. They now go to different agencies for each of these services, and they must fill out new application forms at each of them. Some of these service agencies are very far apart. By the end of the first week, the family has two case managers working on their needs who do not know about each other. How could these services become integrated?

A good answer to this question would:

Indicate that integrated services are provided within the context of collaboration and coordination among service providers and organizations to mutually support agreed upon outcomes for children and families. For example, agencies providing services might use the same intake form, accept the same type of clients, offer complimentary services, have a system to refer clients to other sites for additional services, and have the necessary MOUs in place to do collaborative and integrated work. These services might be found in one central location.

2. Describe four key features of an integrated service model for people living with HIV or AIDS and their families in a large metropolitan area.

A good answer to this question would describe an integrated service model that includes:

Medical, mental health, housing, transportation, legal assistance regarding wills and custody issues, nutrition, information regarding clinical drug trials and new treatments, entitlements, employment, skills training, or educational opportunities throughout the city. Also, such a model would allow for intake at any of the service locations, coordination of services and referrals at any location, and the sharing of information as outlined by MOUs with other service providers. Each participating site would use a similar tracking system to examine common outcomes for all participants, and each would provide case management to clients who have multiple needs and who access a number of different services.





3. List at least four barriers to integrated service provision and how they can be overcome.

A good answer to this question would list at least four of the following barriers and potential actions to overcome them:

Barrier	Methods to overcome barrier
Professional identities – people examine or approach an issue based on their education or experiences.	Focus on outcomes.
Categorical services – services are based on strictly defined classifications (families with children between the ages 0-5, living in this zip code, earning this income, etc.) and are often time restricted.	Educate members regarding the need for and the effectiveness of collaborative and integrated services; attend relevant conferences and workshops.
Competition for resources – funding sources (e.g., federal RFPs) contribute to competition among agencies and organizations.	Educate funding sources about the need to support collaborative efforts to provide integrated services.
Limited resources – financial constraints influence the amount of time staff contributes to additional activities or meetings.	Promote collaborative involvement as part of the work and adjust workloads accordingly; seek additional funds to support new collaborative endeavors.
Service provision rigidity – agencies or organizations have a way of doing business or a vision that is very difficult to change and, without outcome-based evaluation, they see no reason to change.	Present research that promotes and evaluates different and effective methods of service provision; conduct a needs assessment examining needs, service use, and demographic characteristics of those using services; attend relevant conferences and workshops.
Confidentiality issues – agencies are leery of sharing information with other agencies on those families receiving services.	Develop memorandums of understanding (MOUs) and acceptable release of information documents.
Organizational structures and procedures – may hinder collaborative work and integrated services.	Invite members of established collaboratives to speak about effective structural and procedural changes resulting from their work together.





4. In a clinical meeting with your case managers, you have just learned that there has been a 40 percent increase in domestic violence hotline calls and crisis intervention cases in your agencies. You would like to improve or expand services to address this issue. How can you seek new monies and other resources to address this concern?

A good answer to this question would suggest:

- Seeking out information about available monies and other resources from foundations, state or federal agencies, domestic advocacy groups, and coalitions; and
 - Developing relationships with local shelters, legal assistance and advocacy groups, mental health professionals, and other agencies which can provide services to these clients if more comprehensive service provision is needed.
5. Define the following three terms: categorical services, fragmented services, and integrated services. Note their advantages and disadvantages.

A good answer to this question would:

Define categorical services as those that are specific to a certain population and/or which are restricted by funding or policy requirements. Services for pregnant teens in their first trimester who are under the age of 19, have Medicaid, and live in the 94621 zip code would be an example. Categorical services are useful to those who fit the criteria and give the funder more control over how their resources are used. But these services are not able to assist those with similar needs who do not fit into the specified categories. Also, they often focus on remediation versus prevention, and they target a particular problem versus examining related contextual and individual concerns.

Fragmented services are services provided without collaboration or coordination between agencies, organizations, or individuals who are offering the same or complimentary services. Such fragmentation may offer numerous choices and more access to services; but these services may conflict with one another, their enrollment procedures may be confusing and duplicative, and clients may be required to go to different locations for various service needs.

Integrated services are services provided in the context of collaboration and coordination among the various service providers and organizations. They are prevention-focused, comprehensive, and utilize common reporting and enrollment procedures. They collect information related to common outcomes and share needed information between various agencies and organizations. However, the development of such services takes time, energy, and a willingness to share information and resources.





Measuring Knowledge and Skills for Collaboration/Group Process

1. Define and compare coordination and collaboration. Make sure that your answer defines each term and discusses how they are alike and how they are different.

A good answer to this question would:

Define collaboration as individuals and/or organizations working together to identify common interests and goals and then sharing talents, resources, and responsibilities to accomplish those goals. Coordination is a process of planning and timing activities of various individuals, groups, and organizations to avoid conflicts and redundancies. Collaboration is a much broader process than coordination in that it involves not only coordination but also the joint delineation of goals, mutually reinforced behaviors, shared resources, and joint decision-making. Coordination might involve aligning programs, linking services, or scheduling jointly; but common goals do not have to exist.

2. From the point of view of an agency, describe two challenges to collaboration as a way of addressing social and human service issues in communities.

A good answer to this question would mention such issues as:

- The time commitment required for collaboration;
- Turf issues on the part of both agencies and individuals;
- Relinquishing individual autonomy; and
- The need for compromise in order to participate in the collaborative group.

3. What does a “win-win” solution mean? Give a concrete example of several agencies in a collaborative that create such a solution among themselves to facilitate their work together.

A good answer to this question would:

Correctly define a “win-win” solution as one in which all parties profit or gain by the decision or plan. The example should illustrate that all agencies or parties received something positive as a result of how the problem was resolved. The answer should also recognize that such solutions are easier to craft when all parties focus on meeting joint goals rather than on addressing their own interests.





4. A community is trying to decide which local problems would benefit from a collaborative response rather than one from a lead agency. Two issues under discussion are 1) the provision of immunizations for preschool children and 2) help for families who have experienced child abuse or neglect. Which of these issues or problems is likely to show greatest benefit from a collaborative approach? Why?

A good answer to this question would:

Select the child abuse or neglect problem as the one most likely to benefit from a collaborative approach. The answer would indicate that families with abuse and neglect issues are likely to have multiple needs and to be known to more than one service provider or agency in the community. Immunizations, on the other hand, can be effectively delivered by the health department or other medical service agency without the need for extensive family assessment or consideration of other family needs. Each service could involve collaborative activities if, for example, those delivering immunizations wanted to work with others who have access to preschool children to identify and recruit families. However, this problem does not demand the same level of collaboration needed to serve families experiencing abuse or neglect.

5. You are trying to convene a group of agencies and community members to talk about the rising drug problem in a community. To make sure you get a good turnout for this first meeting, what factors should you consider in planning the meeting?

A good answer to this question would consider:

- Who is involved, including the relevant stakeholders on this issue and their language and cultural considerations;
- What the topic of the meeting will be, providing some documentation about the nature and extent of the drug problem;
- Where the meeting should be held, considering location, convenience, parking, and availability of public transit;
- When the meeting should occur, considering time, safety, need for food, competing activities, child care needs; and
- Why the meeting should be held (to better identify the problem, to develop a plan of action, etc).





6. Name four important considerations when developing and maintaining effective collaboration.

A good answer to this question would talk about:

- Bringing the right parties to the table;
- Paying attention to the logistics of collaborative work;
- Adopting mutually agreed upon governance strategies;
- Paying attention to the quality of communication;
- Staying focused on the problem;
- Adopting win-win strategies;
- Staying away from a focus on particular people or personalities;
- Designing mission and vision statements;
- Identifying agreed upon outcomes;
- Developing ground rules and decision-making processes;
- Using action planning strategies;
- Celebrating large and small successes;
- Developing a common language or glossary of terms; and
- Collaboratively designing assessment and evaluation methodologies.

7. Under what circumstances are collaborative solutions to community issues not likely to be productive?

A good answer to this question would mention one or more of the following:

- When insufficient resources exist to address the problem;
- When little time exists to solve the problem;
- When physical distances among potential collaborative members preclude sufficient meeting time to act on the problem;
- When there are conflicting agency priorities;
- When a common mission, vision, or goal has not been agreed upon; or
- When potential members are unwilling or unable to collaborate.





8. You have been part of a collaborative for six months now. Members are beginning to grumble that this is just a lot of meetings but nothing is being accomplished. The participating agencies in the collaborative are beginning to show poor attendance. What might be wrong here?

A good answer to this question would:

Discuss the need for members to feel a greater sense of accomplishment by setting short-term achievable goals that can be celebrated. Each member may also need to feel that he/she has a meaningful role in the group. The answer might also discuss the need for focused leadership or explore whether the group has a mission, vision, and strategic plan. It could include the need to assess individual commitment to the work of the collaborative and identify unrealistic expectations of members or funders. A plan might be created to assess how effectively the collaborative functions and how to discontinue it if it is no longer needed or viable.

9. You are part of a collaborative of 15 agencies all working on reducing rates of violence in the community. One of these agencies hears about a federal opportunity for funding to prevent violence, applies for a grant, and receives it without discussing this with any of the other collaborative agencies. The agency announces their new violence initiative when the collaborative is having its “check in time” at a monthly meeting. How would you expect the group to react and what would be the appropriate response to this agency?

A good answer to this question would:

Anticipate negative feelings about this non-collaborative behavior on the part of the collaborative members. It would also suggest that the errant agency, having announced this to the group, might be unaware of the obligations of collaboration. While a participating agency should not lose its right to act autonomously, the leadership and group members should find a way to openly discuss the relative balance of agency autonomy and collaboration around the issue of community violence. If they have not been already, ground rules could be developed around information sharing and decision-making within the group.





10. A community collaborative working on teen pregnancy prevention finds some members arguing for an abstinence-only approach while others want to provide contraceptive services for sexually active teenagers. What kinds of strategies might either a) prevent such a situation or b) get around this potential impasse if it occurs?

A good answer to this question would emphasize that:

To prevent such a situation, the collaborative should establish good ground rules in the beginning, have a clearly defined and agreed upon vision and mission, and have problem solving and conflict management strategies in place. The group may need a decision-making strategy that is agreed upon by all and that will be followed in the case of disputes.

To ameliorate such a conflict once it occurs, the group needs to find common ground – issues on which the group agrees. The group should also find ways to divide up the work so that collaborative members take complementary roles when they cannot take identical roles. The group might also identify goals and outcomes on which they cannot agree and set these aside for a period of time. The answer might also mention that the group may also be willing to try experimental strategies to see how they work.

11. A collaborative in the community needs to be discontinued. Describe the steps and principles to effectively dismantle it but that do not preclude future collaborative work among the current members.

A good answer to the question would:

Stress making the ending of the collaborative as positive as possible, celebrating its accomplishments. It would have the group discuss the reasons for ending the collaborative to achieve agreement that this outcome is desirable and appropriate. It would talk about timing and making the end quick and clean rather than allowing the collaborative to atrophy from lack of work or from disinterest.

12. What factors increase and what factors decrease group cohesiveness?

A good answer to this question would:

Mention factors that build cohesiveness within a group such as mutual respect and trust, opportunities to gain status, cooperation rather than competition, fulfillment of members' needs, and attacks from the outside. Factors which decrease cohesiveness include unresolved conflicts, members experiencing conflicts between their group roles and other roles they play in the community, lack of clarity about group roles or purposes, negative evaluations of the group by respected outsiders, or poor communication.





Measuring Knowledge and Skills for Leadership

1. You are a new director of a drug abuse prevention program that has done little to develop connections with other agencies and programs. What are some of the things you would need to know about the community, its agencies, and your own leadership style to develop, implement, and/or participate in interprofessional activities?

A good answer to this question would:

Explain that in order to be effective, leaders should understand their own leadership styles and tendencies and how these tendencies hinder or help their work with various professionals, community members, and cultures. Equally important is knowing the political environment and how different groups within the community and professional arena will respond to you as a director of a drug abuse prevention effort. Including leaders and residents from the community rather than only non-resident professionals effectively promotes indigenous leadership behavior and skills. It also indicates to the community that you value their participation. Other important points would describe the knowledge needed to build an effective team. This knowledge may include clear understanding of the groups involved in this issue as well as the individuals in these groups.

2. Define the importance of vision building in a collaborative. Explain when it occurs in the life of a group and identify techniques that could be used to develop a vision statement.

A good answer to this question would:

Indicate that the development of a vision statement should be one of the first activities undertaken, since it guides the work of the group and insures that all members are thinking, working, and moving in the same direction. Creating such a statement usually follows considerable dialogue on the general direction and goals of the group. Techniques to help develop a vision statement may include getting input from all members on what they see as the group's function, goals/objectives, and the roles each member should take to insure the group meets its goals. Listing the results of this activity on a board or easel and seeking agreement on a final statement or list would be useful.





3. You head up a homeless action group that wants to support the proposed legislation to provide free meals at six sites throughout the city. However, members of the group do not think the new measure goes far enough to serve the myriad needs of homeless families, namely housing and employment. Describe three strategies to approach this problem.

A good answer to this question would:

Stress strategic planning rather than emergency, reactive responses. An action group should gather input from its members on the issues and research and disseminate information on other such efforts and their effectiveness. The city's history of services to the community should be noted as well as whether this new approach indicates movement in the right direction. The members should vote on how the group should proceed, and members could consider drafting a proposal outlining a more effective way for the city to use its resources.

4. The United Way wants its agencies to measure program outcomes. Many of the agencies are apprehensive about what this will mean for their funding and what will be required of them. United Way has hired a consultant to facilitate this assessment process. List three attributes the consultant should have to effectively reach and train this group.

A good answer to this question would suggest that the consultant should be able to:

- Articulate the importance of evaluation data in developing programs;
- Facilitate the process so that participants can voice their concerns about the assessment;
- Have the knowledge and skills necessary to design evaluation processes that minimize these concerns;
- Share effective program evaluation plans with the agencies; and
- Provide opportunities for agencies to develop individual evaluation plans consistent with their agencies' missions.





5. You want to bring leadership to a collaborative by asking some hard questions that challenge the status quo of the typical systems serving children, youth, and families. Give examples of such questions.

A good answer to this question would suggest the following types of questions:

- What services for children, youth, and families are needed but not available now?
- What does the present system lack in terms of resources and the integration of services?
- What are the best ways for the collaborative to bring needed services to the children, youth, and families in the community?
- What are some of the policies and external forces that will need to be addressed in order to develop and implement those services? Who among the group would best be able to deal with those forces or policies?
- Do needs exist that cannot be addressed with the current level of resources?
- How can the group bring in the needed resources?
- What does each group member bring to the table (sharing of expertise, resources, staff time, funding) that can help address those issues?
- What are the strengths of the existing system of services?
- What can be done to enhance those strengths and minimize weaknesses?

6. As the leader of a collaborative, outline three ways you could maintain or improve group functioning.

A good answer to this question would indicate that the leader would:

- Ensure input from all participants;
- Recognize and deal with conflict;
- Avoid problems associated with group size by insuring there are enough participants with the expertise and willingness to complete the tasks at hand;
- Celebrate the group's accomplishments, however small they may be; and
- Insure that committees and individuals have clear roles and responsibilities, including clear goals that they are working to achieve.





7. You are a part of a subcommittee for a collaborative that is to nominate candidates for leadership positions within the group. What personal qualities do you recommend be used to select these candidates?

A good answer to this question would recommend that nominees for leadership positions in the group demonstrate the following:

- A vision and strong commitment to the goals of the group;
- Some expertise or experience in the areas of primary focus for the collaborative;
- Viewed by members of the group as someone with legitimate power (i.e., the right to direct the actions of others);
- Ability to help the group stay on task;
- Willingness and ability to assign tasks to other members based on members' skills and abilities;
- Willingness to encourage and incorporate feedback and input from all members, regardless of the member's status (community resident versus agency director);
- Ability to deal constructively with conflict or disagreement and help the group reach consensus;
- Ability to recognize typical collaborative challenges and apply effective strategies to address them;
- Ability to view collaboration as a process, not an event, practicing patience in order to build a solid foundation; and
- "Emotional intelligence" – the ability to recognize, understand, and redirect moods and emotions that affect others, reflect, learn from experiences, apply new knowledge, and understand the implications of style, timing, participation, and other considerations in promoting empowerment and leadership.

8. Groups develop different styles of decision-making. Describe some of the ways in which groups can make decisions, highlighting the role of leadership in each.

A good answer to this question would discuss some of the following styles and recognize that each reflects different uses of information from group members and varying amounts of power being given to those members:

- Leaders making decisions themselves;
- Leaders making decisions using group members as sources of information;
- Leaders consulting group members about decisions but still deciding themselves;
- Leaders trying to produce group consensus on a decision; or
- Leaders taking a vote on decisions.





9. A major conflict has split community members and agency staff who are involved in a collaborative effort to develop a community-based social service center. Community members feel that agency staff are proposing services that are not sensitive to the culture and needs of the community. What are some of the steps the leader should take to address this conflict?

A good answer to this question might:

Propose that a needs and strengths assessment to be designed and implemented with the help of community residents and with the condition that findings guide the group's decisions about services at the new center. Make sure the assessment is culturally sensitive, is translated into languages common to the community, and uses alternative methods of assessment for those with disabilities or are unable to read or write. The leader could also suggest that a subcommittee of residents and non-residents be formed to examine what programs are lacking or which services are already available. If not already in place, the development of a vision statement may be useful. If it is too early for visioning, establishing some short-term goals may help the group focus on this particular problem area. Another option could offer training on cultural issues for all groups that provide services at the center.





Measuring Knowledge and Skills for Communication

1. Communication is key to collaborative work. What are four major barriers to effective communication, and how can each barrier be overcome?

A good answer to this question would describe at least four of the following communication barriers and their possible solutions:

- Frame of reference – differing perceptions of the message by the sender and receiver; could be solved through effective listening or feedback;
- Filtering – sender provides only partial information; regulated information flow may be helpful here as well as allowing more time for communication and using audiovisual aids;
- In-group language – use of language by group members that is unique to their field, work, or agency; allowing for feedback and effective listening helps the sender recognize and deal with this problem;
- Overload – providing too much information to be absorbed effectively; again regulated information flow will be useful; or
- Status differences – differences in status of senders and receivers; minimizing references to status, encouraging input from members, and emphasizing the need for empathy may be effective ways to remove this barrier.

2. How would you insure that communication is effective among your collaborative members?

A good answer to this question would indicate that effective communication insures that the senders and receivers share a common meaning and understanding of a particular piece of information. Effective communication uses non-expert language, translations if necessary, and multiple mediums or strategies to make a point. It is characterized by:

- Empowering all members so they feel and are viewed by other members as valued and equal partners in the collaboration;
- Sharing all significant and important information with all members;
- Being sensitive to the fact that not all members have access to e-mail or other technology; and
- Hearing and including input from all members in the development and implementation of the decisions and actions of the collaborative.





3. The tentative schedule for a Thursday and Friday retreat calls for four workshops a day, each lasting for two hours. Another workshop is proposed for the first evening. Each workshop presenter will provide a notebook of materials to be read. The last workshop on Friday provides critical information that attendees need to move forward on a project. What is likely to happen here? How can it be prevented?

A good answer to this question would:

- Recognize that this schedule is likely to produce information overload. Adult learners do not generally benefit from this type of structure;
- Recommend that the workshops be interactive, use diverse training methodologies, and provide adequate opportunities for discussion;
- Recognize that evening attendance may be minimal; and
- Recognize that retreat participants are likely to become overwhelmed by the amount of information they are receiving. As a result they may omit some of the information, process it incorrectly, filter out less significant information for more relevant information, or escape by tuning out.

Overload can be prevented by:

- Effectively timing messages to insure that they are given when they are more likely to be received (not after lunch on Friday of a week-long, all-day conference);
- Regulating information flow so that information is given out at an optimum pace;
- Allowing for feedback;
- Modifying the communication so that all members regardless of the background can understand;
- Using audiovisual aids or handouts to reinforce your presentations;
- Giving adequate and frequent breaks; and
- Allowing people time to get to know one another.





4. Your collaborative group of about 20 members is having difficulty listening to and understanding each other. You are preparing for the next meeting. Explain how you will plan and conduct it, considering the location, space, and logistics to help overcome this problem.

A good answer to this question would:

Suggest that the meeting should be held in a neutral place, located as conveniently as possible for all attendees with access to parking and public transportation. Seating should promote group discussion (conference table versus classroom seating) and be arranged so that the opposing members of the group do not sit opposite one another (perhaps use place markers to seat group members). A clear agenda recognizes there is tension in the group, provides the opportunity for members to voice concerns, and offers a strategy to insure that each member is listened to and is able to both give and hear feedback. The group leader should stress separating the people from the problems and focusing on common interests.

5. You are part of a collaborative where the following report on a client is distributed to the group. You don't completely understand this communication. What would be the best thing to say or do about this and future communications?

Father is 39-year-old B, with hx of abuse. Currently taking Benzodril 2t 2x/day. CBC has been ordered with potential rec. for detox and tx for remaining symptoms.

A good answer to this question would recommend that:

- The language be explained to the collaborative team;
- Members be encouraged to distribute future information with as little professional jargon as possible since the group is made up of people with different expertise;
- A set of guidelines be developed that state all members make an effort not to use jargon or technical language specific to their own training;
- If someone does not understand a term to speak up right away; and
- A glossary of terms be developed as a reference since there may be times when it is unavoidable to use technical language.





6. Describe four ways to give constructive feedback.

A good answer to this question would describe at least four of the following:

- Focusing on positives first and then negatives;
- Giving feedback as soon as possible, not waiting;
- Including examples to support comments;
- Not focusing on personality differences;
- Noting how comments relate to the goals and objectives of the group;
- Not using language that is accusatory or demeaning;
- Giving feedback to individuals alone rather than in front of a group;
- Being sensitive to the language, communication style, or particular culture of the person receiving the feedback;
- Focusing on behaviors, not on personality; or
- Using “I” statements.

7. List four skills that are associated with effective listening.

A good answer to this question would list at least four of the following:

- Stop talking and listen;
- Put the listener at ease;
- Show the talker you want to listen;
- Remove distractions;
- Be patient;
- Hold your temper;
- Go easy on argument and criticism; or
- Ask questions.





8. Give some examples of nonverbal communication and the kinds of nonverbal communication you might see in groups with a) positive communication practices and b) negative communication practices.

A good answer to this question would:

Define nonverbal communication as “body language” which may include gestures, body stance, posture while standing or sitting, placement of hands or arms, eye contact, doodling or nervous fiddling, and facial expressions. In a collaborative with positive communication, participants will be looking at each other, listening to one another’s communications, nodding their heads, etc.

In a collaborative with negative communication, members might express that they are not open to the process by crossing their arms across their bodies. They may not make eye contact, which may indicate discomfort with status differences among members. They may frown, sigh, or use other expressions that suggest they do not understand or agree with the statements of other members. Nervous fiddling or doodling may indicate boredom.

9. What are some of the ways that members of a collaborative can effectively promote good communication in its meetings?

A good answer to this question would list at least three of the following:

- Develop a set of ground rules about confidentiality, language, behavior, and group norms;
- Develop a clear, concise vision statement;
- Hold meetings in a space that is conducive to discussion (conference table with a chalkboard or easel to organize input and on which to list alternatives);
- Avoid the use of in-group language;
- Prepare a clear agenda and stick to it;
- Use a variety of materials and strategies (handouts, transparencies, chalkboard, small group activities);
- Begin and end each meeting with feedback, impressions, ideas from each member of the collaborative;
- Be aware of and allow for cultural differences in language and communication meanings; or
- Be sensitive to meeting times.





Measuring Knowledge and Skills for Assessment and Outcomes

1. Define each of the following and give an example:

Outcome evaluation

Needs and strengths assessment

Process evaluation

Cost benefit evaluation

A good answer to this question would be:

Outcome evaluation – investigates a change in condition, competency, characteristic, or other indicator that has been influenced by a particular intervention or activity or event (measuring how many young people drop out of school in a program designed to prevent this occurrence).

Needs and strengths assessment – collects information on community, agency, or client characteristics, resource availability, policy and cultural issues, and other related factors to inform program design and implementation (measuring the needs and strengths of communities, community resources, and residents).

Process evaluation – investigates what constitutes “the program” and tracks its activities and strategies to determine the dosage and type of services and the number of families reached (number of group sessions, number of units of service, number of clients attending).

Cost benefit evaluation – investigates the cost of providing a particular service to a targeted population to prevent a specific outcome versus the cost of not providing the service which may lead to a more negative outcome (cost of providing in-home care for one elderly client for 12 months versus cost of long-term residential nursing facility placement for one person and care for 12 months).





2. Explain how to check for cultural appropriateness in an interview schedule that is designed for a community needs assessment.

A good answer to this question would:

Explain that members of the community should be asked to design, review, complete, and revise the document before it is used. Using focus groups or pilot testing, community residents can give feedback on language, wording, content, meaning, structure, and application of the items addressed. A large cross-section of the community should be recruited to participate in this process. Information regarding community resources and strengths should also be a key part of the data collected.

3. A community has formed a collaborative designed to lower rates of teen pregnancy. Name some outcome measures that the collaborative could use to assess a) the health of its own collaborative and b) the success of this collaborative in achieving its desired community outcomes.

A good answer to determine the health of the collaboration should examine the following outcomes:

- Similarity of vision to address problem;
- Agreement on barriers to the work;
- Agreement on governance in the collaborative;
- Clarity of decision-making procedures;
- Level of agreement regarding mission/vision statement; and
- Degree to which conflict in the collaborative is handled positively.

A good answer to measure progress in achieving its desired community outcomes might examine:

- Change in the teen pregnancy rate;
- Change in the number of contraceptive providers in the community;
- Change in community attitudes toward sexuality education;
- Increase in the number of parents who talk to their children about sex and contraception; and
- Increase in number of sexually active teens who use contraception.



4. A community wants to do a needs and strengths assessment before planning a collaborative approach to improving the availability and quality of child care. Present the advantages and disadvantages of using questionnaires, interviews, or focus groups for this needs assessment.

A good answer to this question would:

Note that questionnaires are cheaper, are easier to administer directly or by mail, and permit standardizing questions. But they require some literacy, do not allow you to check for understanding or see the respondents' emotions, and often have a poor return rate. Interviews are usually more expensive, but they do not require literacy since the questions are oral. They do allow checking for understanding and exploring respondents' emotions. Focus groups are another way to collect data while examining group interaction. However, sample bias is difficult to avoid and people may not be willing to talk about certain issues in a group setting.

5. You are working with an agency that believes school grades are culturally biased indicators of student success. What factors need to be considered in examining whether this is true?

A good answer to this question would:

Suggest examining whether different cultural groups, in fact, receive different grades. In addition, at least the following might be examined to help the school community explore this issue: curricula being used, languages being used in the classroom, attitudes of staff toward students, staff characteristics relative to student characteristics, and testing procedures.

6. Describe a test of statistical significance and what role could it play in community decision-making about change.

A good answer to this question would:

Define a test of statistical significance as a calculation to determine whether noted changes occur by chance or actually reflect true differences among the observed population. For example, a significant difference at the .05 level means that 5 out of 100 times the noted differences might be due to chance. For community decision-making, statistically significant findings would be the most important ones to examine. Interventions should be focused on these findings since differences are not likely due to happenstance.





7. A program director wants to measure the number of hours of case management services delivered as the outcome of her program. How would you advise her about the optimal evaluation of her program?

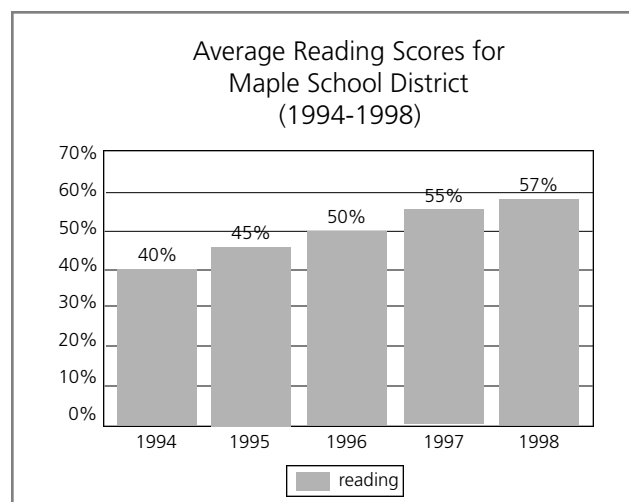
A good answer to this question would:

Advise the director that units of service may be good measures of program process but would not give her useful information about changes in behaviors, attitudes, or knowledge.

8. A community collaborative has been working on improving school performance among young people in a given school district. For the past five years, they have used standardized tests for all children in the schools. You have data available on reading scores for all five years. Create a hypothetical presentation of these data for use in a community meeting that will show what progress (or lack thereof) has been made in reading. Show the data in the clearest way possible, considering your audience.

A good answer to this question would:

Present data on the average reading scores by year, using a bar graph or a point graph. Such a bar graph might appear as follows:



A table format would also be acceptable, but it is not as easy to understand as a graph.



9. You are involved in a case conference that includes a social worker, a nurse, and a teacher who are discussing a student. The student has missed school, and he acts inappropriately in the classroom when he does attend. Each of these workers has a different idea of what may be wrong. Identify the different perspectives each professional might have and suggest some outcomes that they might agree upon for this student. Explain your strategy for getting this team to reach consensus on these outcomes.

A good answer to this question would:

Note that the social worker will be concerned with assessing the child's home situation, abuse concerns, emotional or maturational issues, and available resources. The nurse may be more concerned with the child's physical health, prescribed medications, nutrition, and medical history. The teacher may be more concerned with the child's educational history, learning style or disabilities, and available educational resources. To reach consensus, the team should outline all possible issues and decide who on the team should address them. Then they should decide how the various parties can work together to deal with the larger issues – truancy and behavior. The selected outcomes for this student might include an increase in school attendance, a decrease in acting out behaviors, an increase in school performance, an increase in positive behavior towards peers, and an increase in use of available academic resources (tutoring, after-school activities, sports, mental health counseling, etc).

10. A family in your community has recently lost its housing due to the unemployment of the major breadwinner. The family is close-knit but has no other relatives in the area. The children are doing well in school and dream of going to college. The father has few technical skills for employment but has a good work history. The mother does not speak English but is a caring, involved parent. Define the risk factors, protective factors, and resiliency factors in this family.

A good answer to this question would:

Define a risk factor as a characteristic that increases the likelihood that certain problems will occur. For this family, one such factor is lack of skills for employment. Another is lack of extended family support. These factors put this family at risk for poverty and isolation. A protective factor is a characteristic that decreases the likelihood that these problems will occur. The father has a good employment history which should help him get another job. A resiliency factor is a particular type of protective factor, i.e., a characteristic that decreases the likelihood of certain problems. Good family relations and the good performance of children in school should decrease the likelihood that this family will have domestic problems or that the children will drop out of school or have school behavior problems.





11. What makes a good community needs and strengths assessment?

A good answer to this question would:

Indicate that a good community needs and strengths assessment examines the community's risks and protective and resiliency factors as they relate to specific problems and/or issues of concern. The assessment explores strengths and weaknesses of the community's size, layout, ethnic and cultural makeup, socio-economic status, resources, and leadership.

12. Name three ways that findings from a needs assessment can be used to assist children and families.

A good answer to this question would suggest that data collected as part of a needs assessment could be used to:

- Inform residents, potential funders, and service providers about the needs and strengths in their community;
- Design, implement, and revise available services; and
- Build networks among various resources to address relevant concerns or problems.

13. Define the following research designs: experimental, quasi-experimental, longitudinal, and cross-sectional.

A good answer to this question would define these terms as follows:

- Experimental – a research design where the researcher has full control over the selection or placement of participants in control or program/intervention groups, the scheduling of events, and the level of intervention; subjects are usually randomly assigned to control and experimental groups;
- Quasi-experimental – a research design where the researcher lacks full control over the scheduling of events, who the participants are, and the level of intervention; such a design may have two groups but participants are not randomly assigned;
- Longitudinal – a research design in which the same group of subjects is followed over an extended period of time; and
- Cross-sectional – a research design in which a variety of subjects are studied at one point in time.



Measuring Knowledge and Skills for Social Policy Issues

1. You are the director of a residential treatment program for women with drug and alcohol problems. As you hire staff and implement services, what are the policies you should be aware of or develop?

A good answer to this question would explain that the director needs to know the following:

- Professional licensing requirements and commensurate salaries for each;
- Skills of various professionals so as to hire those who would best serve the needs of the women;
- How available funding and resources can and cannot be used as indicated by their various stipulations, requirements, etc.;
- What types of insurance must be in place;
- Entitlements for the women, if they are eligible;
- What services Medicaid or other insurance providers will and will not cover, (any restrictions on how many sessions or counseling hours a woman is allowed and for how long);
- How to build a network and devise protocols among providers in the community to enhance service provisions and integration;
- How to determine who is and who is not eligible to become a resident;
- How women can be recruited; and
- When a woman can or cannot be terminated from the program.





2. Describe some of the current policy trends in the United States that will affect integrated services.

A good answer to this question would:

Describe current legislative and policy practices. These include welfare reform, family preservation services, any policies that will de-categorize services, policy or financial supports for family resource centers, legislation requiring community input into services, or any other trend that will either support or weaken attempts to provide integrated services.

3. Explain how de-categorization and integrated services are related.

A good answer to this question would:

Explain that de-categorization involves removing requirements that govern the financing, delivery, and evaluation of publicly funded health and human services. Such requirements frequently become barriers to integrating services. However, it should be explained that de-categorization does not automatically lead to integrated services. For integrated services to occur, other barriers need to be addressed. These include competition among providers, reluctance to share resources, lack of agreement on goals/outcomes, and lack of a common understanding of the needs of families and children in the community.

4. How can direct work with children, youth, and communities affect the development of social policies?

A good answer to this question would stress that direct practice could:

- Influence the development of standards;
- Help define social issues and problems;
- Identify possible solutions to these problems; and
- Mobilize community responses to these issues and problems.







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