



Bridging Community Integration

Core Team Member Self-Assessment Worksheet

Name: _____ **Date of Self-Assessment:** _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Bridging Community Integration* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Bridging Community
Integration

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Exploring natural supports			
Including natural supports in meetings and interventions			
Linking youth / family to interests / resources			
Bridging youth's transition out of continuum			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Items for discussion			



Collaborative Treatment Planning and Care Coordination

Core Team Member Self-Assessment Worksheet

Name: _____

Date of Self-

Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Collaborative Treatment Planning and Care Coordination* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Establishing a Family Team			
Preparing Family/Youth for Family Team Meetings			
Preparing Team Members for Family Team Meetings			
Convening Family Team Meetings			
Focusing Family Team on Maintaining, Strengthening, or Achieving Permanency			
Focusing Family Team on Maintaining, Strengthening, or Achieving Academic Success			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Facilitating Family Team Individualized Action (Treatment) Planning			
Coordinating Care in Between Family Team Meetings			
Bridging with all Entering and Exiting Providers/ Supports			
Item for discussion			



Conducting a Comprehensive Collaborative Assessment

Core Team Member Self-Assessment Worksheet

Name: _____ Date of Self-Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Conducting a Comprehensive Collaborative Assessment* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Conducts Comprehensive
Collaborative Assessment

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Further developing therapeutic alliance			
Exploring needs, vision, strengths, and history of help			
Exploring permanency, strengths, needs, and barriers			
Conducting continuous evaluation			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Filling in contextual understanding with stakeholders			
Completing the written assessment			
Engaging in ongoing assessment			
Items for discussion			



Continuity with Higher Levels of Care

Core Team Member Self-Assessment Worksheet

Name: _____

Date of Self-

Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Continuity with Higher Levels of Care* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Ensuring Continuity During Encounters with Emergency Psychiatric Services (ESP)/ Mobile Crisis Intervention (MCI)			
Supporting Youth/Family Orientation to Out-of-Home Intervention (Hospital, CBAT, Detox, Group Home, etc.)			
Ensuring Continuity During Out-of-Home Acute Treatment Intervention (Hospital, CBAT, Detox, etc.)			
Ensuring Continuity During Group-Home Treatment Intervention			
Considerations for discussion with Supervisor and/or Program Team			



Engaging Youth and Family

Core Team Member Self-Assessment Worksheet

Name: _____ Date of Self-Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Engaging Youth and Family* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Responding to referral			
Facilitating initial (pre-intake) meeting with youth/family			
Facilitating youth / family intake			
Ongoing fostering of family-driven therapeutic alliance			
Items for discussion			



Incorporating Psychiatry and Occupational Therapy Consultation

Core Team Member Self-Assessment Worksheet

Name: _____ **Date of Self-Assessment:** _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Incorporating Psychiatry and Occupational Therapy Consultation* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Incorporating Psychiatry &
Occupational Therapy
Consultation

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Collaborating with the OT consultant and incorporating their consultation			
Collaborating with the psychiatry consultant and incorporating their consultation			
Items for discussion			



Practicing Cultural Relevance

Core Team Member Self-Assessment Worksheet

Name: _____ Date of Self-Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Practicing Cultural Relevance* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Conducting cultural self-assessment in the context of continuum work			
Discovering youth's/family's culture			
Discovering the culture of youth's/family's community			
Preventing and resolving cultural barriers/ misunderstanding between youth/family and core team			
Supporting resolution of cultural misunderstanding with family team and other supports/entities			



Providing Therapeutic Interventions

Core Team Member Self-Assessment Worksheet

Name: _____ Date of Self-Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Providing Therapeutic Interventions* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Maintaining therapeutic alliance			
Selecting therapeutic interventions to be used in youth/family sessions			
Preparing for therapeutic interventions and skill building			
Strengthening and building youth's and family's safe and permanent relationships			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Engaging youth/family in strategies to strengthen a broad range of skills			
Exploring progress and tracking change			
Providing psycho-education			
Items for discussion			



Strengthening Wellbeing through Respite

Core Team Member Self-Assessment Worksheet

Name: _____ **Date of Self-Assessment:** _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Strengthening Wellbeing through Respite* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Orienting parents/ caregivers and youth to respite			
Exploring respite needs			
Supporting parent / caregiver, youth, and family team in planning / coordinating respite			
Ensuring provision of youth respite care			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Debriefing respite care experience			
Items for discussion			



Assessing Risk, Safety Planning, and Supporting Families through Crisis

Core Team Member Self-Assessment Worksheet

Name: _____

Date of Self-Assessment: _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Assessing Risk, Safety Planning, and Supporting Families through Crisis* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Assessing Risk, Safety
Planning, and Supporting
Families through Crisis

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Completing Initial Risk Assessment and Safety Planning			
Conducting Ongoing Evaluation of the Full Range of Risk and Safety Concerns			
Orienting Youth and Family to the Safety Plan Development Process			
Developing a Usable Safety Plan for Prevention and Intervention			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Providing Ongoing Crisis Support and Revision of Safety Plan			
Providing On-Call Crisis Support			
Items for discussion			



Supporting Life Transitions

Core Team Member Self-Assessment Worksheet

Name: _____ **Date of Self-Assessment:** _____

This worksheet is for staff on Continuum Core Teams to assess their own practice in preparation for meeting with their Program Director. Use the *Supporting Life Transitions* Core Element of the Practice Profile to identify both the strengths and areas needing improvement in your practice. Please read the description of the Core Element all the way through so you can get a sense of what the practice looks like as a “whole.” Make note (you may highlight, underline or circle) of specific items that reflect your current practice, then assess your practice for each sub-category using a rating scale of 1 to 10 as defined below. Record your rating for each sub-category and provide examples of strengths and areas needing improvement on this worksheet.

10	Ideal practice proficiency	My practice in this area demonstrates a consistently high degree of mastery in a wide range of situations and with all families, children, and youth.
5	Developmental practice proficiency	My practice in this area demonstrates a good understanding and skill level. My practice is strong, but only in some situations and with some families, children, and youth.
1	Unsatisfactory practice proficiency	This is a new or emerging skill for me. It is not yet present in my practice
0	N/A	This practice is not part of my responsibilities on the Continuum Team.



Supporting Life Transitions

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Anticipating and planning for life transitions			
Supporting youth / family through life transitions			
Supporting youth in transition to adulthood			
Bridging youth's transition out of continuum			

Practice Sub-category	My Practice Rating	Practice Strengths	Practices Needing Improvement
Responding to unplanned service endings			
Developing a discharge plan			
Items for discussion			