

**FINAL REPORT
ON THE VALIDATION AND EFFECTIVENESS
STUDY OF LEGAL REPRESENTATION
THROUGH GUARDIAN *AD LITEM***

APPENDIX B

Data Collection Instruments

150732 P4.3

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children and Families
Administration on Children, Youth and Families
National Center on Child Abuse and Neglect
Washington, DC**

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Data Collection Instruments

NCJRS

NOV 2 1994

ACQUISITIONS

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children and Families
Administration on Children, Youth and Families
National Center on Child Abuse and Neglect**

ACKNOWLEDGMENT

The *Final Report on the Validation and Effectiveness Study of Legal Representation Through Guardian Ad Litem, Appendix B: Data Collection Instruments*, was prepared by CSR, Inc., under Contract Number 105-89-1727 for:

Research, Demonstration and Evaluation Branch
Division of Program Evaluation
Administration on Children, Youth and Families
Administration for Children and Families
U.S. Department of Health and Human Services.

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National Clearinghouse on Child Abuse and
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Washington, DC 20013-1182

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The National Clearinghouse is a service of the National Center on Child Abuse and Neglect, Administration for Children and Families, U.S. Department of Health and Human Services.

**QUESTIONNAIRE #1
ATTORNEY AND VOLUNTEER
(NEW CASES ONLY)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

GAL ID#:	Site ID#:
Subject ID#:	
Interviewer Name:	
Interviewer ID#:	
Completion Date: ___ / ___ / 93	

Public reporting burden for this collection of information is estimated to average 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

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Administration for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

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Office of Management and Budget
Paperwork Reduction Project
OMB Control No. (New Request)
Washington, D.C. 20503

GAL NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____/____/93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

- ☐₁ Yes (GO TO QUESTIONNAIRE #4) →
☐₂ No

CTL3 (a) When was the petition first filed? ____/____/____

(b) When was this representative assigned? ____/____/____

(c) Is the interviewee the original child's representative?

- ☐₁ Yes (GO TO CTL5) →
☐₂ No

CTL4 Ask R whether she/he has had sufficient experience with this case to answer questions about it.

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER REPRESENTATIVE WHO COULD PROVIDE THIS INFORMATION:)

CTL5 Are there two (2) representatives on this case?

- ☐₁ Yes
☐₂ No

BACKGROUND INFORMATION ON CHILD'S REPRESENTATIVE

FIRST, WE WOULD LIKE YOU TO ANSWER A FEW
GENERAL QUESTIONS ABOUT YOUR BACKGROUND
AND CURRENT WORK.

BA1 Are you an attorney or a lay volunteer?

☐₁ Attorney

☐₂ Lay volunteer (GO TO Q BA3) →

BA2 If an attorney, how were you recruited to represent children?
(INTERVIEWER: Check as many responses as applicable.)

"Recruited through..."

(a) ☐₁ self request to be put on court list

(b) ☐₁ court solicited

(c) ☐₁ referral from local bar

(d) ☐₁ law firm gave my name

(e) ☐₁ mandatory, required to register

(f) ☐₁ my firm/agency represents children (e.g., contract attorney)

(g) ☐₁ other (SPECIFY): _____

BA3 Have you had any previous professional or other experience in the child
welfare or child advocacy fields?

☐₁ Yes

☐₂ No (GO TO Q BA5) →

BA4 How many years experience have you had in the child welfare or child
advocacy fields?

_____ Years or [_____ Months]

BA5 Briefly describe the type of experience you have had:

BA6 How many years have you been involved as a child's representative?

_____ Years or [_____ Months]

BA7 Have you ever received any *specialized training* to represent children from such places as the State program or agency, court, bar association, or the like?

☐₁ Yes

☐₂ No (GO TO Q BA10) →

BA8 How many days total have you had this specialized training?

_____ Days

BA9 Did this training take place before or after you were first appointed to represent children?

☐₁ Before

☐₂ After

☐₃ Both before and after

BA10 What types of topics did you receive training in? Please answer whether Yes, No, Don't Know, or Not Applicable to the following general topics.
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

"Received training in..."	YES	1 NO	2 D/K	3 4 N/A
(a) laws and regulations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) courtroom procedures and responsibilities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) understanding child/family dynamics in abuse/neglect situations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) skills in investigation, monitoring, and negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) skills in interviewing/communicating with children/families	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) identification of community services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) developing service plans such as permanency planning, family preservation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) understanding systems such as court or child welfare system	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

BA11 Are you supervised in your role as a child's representative?

- ☐₁ Yes
☐₂ No (GO TO Q BA13) 

BA12 Who supervises you? (Interviewer: Check only one.)

- ☐₁ Judge
☐₂ GAL Program Director
☐₃ Senior Staff Attorney
☐₄ CASA Program Director
☐₅ Other (PLEASE SPECIFY): _____
- _____

BA13 Do you receive a formal evaluation specific to your responsibilities as a child's representative?

☐₁ Yes

☐₂ No (GO TO Q BA15) —————→

BA14 Did you know the criteria to be used in your evaluation at the time of your appointment?

☐₁ Yes

☐₂ No

BA15 If an attorney, are you reimbursed for your work?

☐₁ Yes

☐₂ No (GO TO Q BA23)

☐₃ Not an attorney (GO TO Q BA23) —————→

BA16 Are you paid on an hourly, case, or salaried basis?

☐₁ Hourly

☐₂ Case

☐₃ Salary (GO TO Q BA18) —————→

BA17 If you are paid hourly or per case how much are you reimbursed per hour or per case?

(a) \$_____ per hour

(b) \$_____ per case

BA18 If salaried, within what range does your annual salary fall?

☐₁ < \$20,000

☐₂ \$20-29,999

☐₃ \$30-39,999

☐₄ \$40-49,999

☐₅ \$50-59,999

☐₆ \$60-69,999

☐₇ \$70-79,999

☐₈ \$80-89,999

☐₉ > \$90,000

BA19 Is there a ceiling on your reimbursement?

☐₁ Yes

☐₂ No (GO TO Q BA21) —————→

BA20 How much is this ceiling?

\$_____

☐ Don't know

BA21 Estimate how much you have been or will get reimbursed for your work on this case.

\$_____

BA22 How are reimbursement procedures determined?

☐ by the State

☐ by local law

☐ by local court rule

☐ by local administrative policy

☐ by practice only

☐ other (SPECIFY): _____

☐ don't know

BA23 Do you have total, partial, or no immunity from liability regarding your work in representing the child?

☐ Yes, I have partial/good faith immunity

☐ Yes, I have total/absolute/judicial immunity

☐ No, I do not have immunity

☐ Don't know

☐ Other (PLEASE SPECIFY): _____

BA24 On average, how many hours per week do you spend as a child's representative on child abuse and neglect cases? (INTERVIEWER: *Note that this includes all cases.*)

_____ Hours per week

BA25 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

BA26 How many individual children do you currently represent as a GAL?

_____ Children

BA27 How many families does this represent?

_____ Families

**IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK
YOU ABOUT WHAT YOU DID TO INVESTIGATE AND
PREPARE FOR THE CASE FROM THE TIME YOU WERE
APPOINTED.**

A1 Did you investigate or prepare for the case extensively, somewhat, or not at all?

☐₁ Not at all (PLEASE SPECIFY THE CIRCUMSTANCE):

(GO TO Q B1) →

☐₂ Extensively

☐₃ Somewhat



A2 We would like to know the types of written sources of information you referred to when investigating or preparing for the case. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"WRITTEN SOURCES INCLUDED . . ."				
(a) police reports	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) CPS agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) child welfare agency records on the family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) court records (pleadings, petitions)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) third party statements	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) medical records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) mental health records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) school records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) correctional center records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) detox center records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) other (PLEASE SPECIFY):	_____			

A3 Next, we would like to know the types contacts you had personally or by phone when you investigated or prepared for the case. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"CONTACTS INCLUDED . . ."				
(a) CPS investigator/caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) siblings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) relatives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) foster parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) neighbors	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) medical personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) law enforcement personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) education personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) State's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) parent's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(n) court worker (e.g., probation officer)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(o) other GAL	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(p) prior representative	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(q) mental health personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(r) other (PLEASE SPECIFY): _____				

A4 At any time during this investigation or preparation, did you speak with the child without the child's parent(s) being present? *(If child is too young, then check "N/A.")*

- ☐₁ Yes
☐₂ No
☐₃ D/K
☐₄ N/A

A5 At any time during this investigation or preparation, did you ever submit an oral or written report about the case to the court?

- ☐₁ Yes
☐₂ No

A6 At any time during your investigation or preparation, did you assess the child's placement needs?

- ☐₁ Yes
☐₂ No (GO TO Q A8) →

A7 Please identify the types of special activities you did to assess the child's placement needs. **(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or not Applicable.)**

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

(i) other (PLEASE SPECIFY): _____

A8 At any time during your investigation or preparation, did you assess the child's or family's needs for services?

☐₁ Yes

☐₂ No (GO TO Q A11) —————>


A9 At any time during your investigation or preparation, did you undertake any special activities to assess the child's or family's needs for services in any of the following areas? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) mental health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) alcohol or drug treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) parenting skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A10 If you undertook any special activities to assess the child's or family's needs for services, what did you do to assess their needs? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) reviewed the agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A11 At any time during your investigation or preparation, did you assess the child's educational needs?

- ☐₁ Yes
☐₂ No (GO TO Q B1) 
☐₄ N/A (GO TO Q B1)

A12 Please identify the types of special activities you did to assess the child's educational needs. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with family members	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) talked with school personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) reviewed school records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) requested educational tests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

THE NEXT FEW QUESTIONS REFER TO THE LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS UP TO AND INCLUDING THE DISPOSITIONAL HEARING.

B1 Were you present at some, most, all, or none of the hearings since you were appointed as the child's representative?

☐₁ Some
☐₂ Most
☐₃ All
☐₄ None (PLEASE SPECIFY WHY NOT:) _____

B2 If you look across all uncontested (non-trial) hearings you attended on this case, which of the following activities did you perform? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"PERFORMED FOLLOWING ACTIVITIES . . ."				
(a) familiarized child with the court proceedings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) subpoenaed records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) submitted written reports for the record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) reported orally to court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) presented evidence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) offered a case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) filed motions or pleading	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) made disagreements with the agency known to court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) made disagreements with the child known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY): _____				

B3 Were you involved in any contested hearing?

- ☐₁ Yes
☐₂ No (GO TO Q B5) →

B4 At this hearing, which of the following activities did you perform?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"PERFORMED FOLLOWING ACTIVITIES . . ."				
(a) familiarized child with the court process	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) made an opening statement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) called lay witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) called expert witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) cross-examined witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) subpoenaed records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) submitted written report into the record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) presented evidence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) offered a case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) made or filed motions or pleadings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) made disagreements with agency known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) made disagreements with child known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) made a closing statement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(n) other (PLEASE SPECIFY): _____				

B5 At any time before the dispositional hearing took place, did you attempt to negotiate an agreement or stipulation?

☐₁ Yes
☐₂ No (GO TO Q B11) →

B6 Did the negotiations result in an agreement or stipulation?

☐₁ Yes

☐₂ No

B7 Did these negotiations take place at the time of the preliminary hearing, adjudication, dispositional, or other hearing? (Interviewer: Check only one.)

☐₁ Preliminary hearing

☐₂ Adjudication or fact finding

☐₃ Dispositional hearing

☐₄ Other (PLEASE SPECIFY): _____

B8 We are interested in the issue(s) that was (were) dealt with by the agreement. From the list below, please indicate whether or not this issue was involved. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ISSUE INVOLVED WAS . . ."				
(a) stipulation of abuse or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) services or treatment for the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) services or treatment for the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) legal guardianship	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY):	_____ _____			

- B9 Besides yourself, which of the individuals mentioned below were involved in the negotiations? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"OTHERS INVOLVED WERE . . ."				
(a) parents' attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) agency's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) child's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) lay volunteer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

- B10 During the negotiations, did you do any of the following activities? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

**THE NEXT FEW QUESTIONS REFER TO THE PROCESS
OF DETERMINING CASE GOALS FOR THE CHILD, AS
WELL AS THE PLACEMENT OF THE CHILD.**

B11 At any time before the dispositional hearing did you form an opinion about what the most desirable and realistic placement situation would be for the child, given the circumstances of the case and available resources?

- ☐₁ Yes
☐₂ No (GO TO Q B16) —————→

B12 In your opinion, what is the most desirable and realistic placement situation for the child? (Interviewer: Check only one.)

"BEST PLACEMENT IS . . ."

- ☐₁ keep child in home
☐₂ continue placement with relatives
☐₃ continue placement with non-relatives
☐₄ place in foster home with relatives
☐₅ place in foster home with non-relatives
☐₆ group home
☐₇ independent living
☐₈ residential treatment facility
☐₉ return child to home from placement
☐₁₀ other (PLEASE SPECIFY): _____

B13 At any time before the dispositional hearing did you discuss this idea with any other relevant parties to the case?

- ☐₁ Yes
☐₂ No (GO TO Q B15) —————→

- B14 With which of the following individuals did you discuss this idea?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED IDEA WITH . . ."				
(a) caseworker or agency's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) parents' attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) foster parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

- B15 At any time up through the dispositional hearing, did you make any recommendations to bring about this type of placement situation?

☐₁ Yes
☐₂ No

- B16 At any time up through the dispositional hearing, did you make any recommendations regarding services to the child or family?

☐₁ Yes
☐₂ No

- B17 At any time up through the dispositional hearing, did you make any recommendations regarding visitation between the child and parents?

☐₁ Yes
☐₂ No
☐₄ N/A

B18 At any time up through the dispositional hearing, did you disagree with the caseworker about the any of the following issues? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

➡ ➡ IF YES CHECKED FOR ANY ISSUE, ANSWER Q B19—
OTHERWISE GO TO Q B21.

B19 Given these differences, were they resolved between the parties? Indicate whether All, Some, or None were resolved.

- ☐₁ Yes, all (GO TO Q B21) ➡
- ☐₂ Yes, some
- ☐₃ No, none

B20 Of these unresolved differences, did you express any of them to the court?

- ☐₁ Yes
- ☐₂ No


B21 If you made recommendations to the court regarding case goals and placement, provision of services, and/or visitation, did the court adopt any of these recommendations?

- ☐₁ Yes
- ☐₂ No (GO TO Q B23) ➡

B22 In which area(s) did the court adopt your recommendations?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"COURT ADOPTED . . ."				
(a) case goals and placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

B23 At any time up through the dispositional hearing, did you disagree with the child in any way about case goals and placement, the provision of services, or visitation between the child and parent(s)?

- ☐₁ Yes
☐₂ No (GO TO Q B25)
☐₃ Not applicable (GO TO Q B25) 

B24 If you answered yes to the question above, which view(s) did you present to the court? Did you present what the child wanted, what you felt was best for the child, or both views to the court?

- ☐₁ child's wishes only
☐₂ my views on child's best interests
☐₃ both views

B25 At any hearing up through the dispositional hearing, did the child talk in court or to the judge?

- ☐₁ Yes
☐₂ No (GO TO Q B30) 

B26 Was the child's testimony presented in courtroom, in chambers or in court without spectators or videotaped or over closed-circuit TV. (INTERVIEWER: ***Check as many responses as applicable.***)

- (a) ☐ in courtroom
- (b) ☐ in chambers or in court without spectators
- (c) ☐ videotaped or over closed-circuit TV
- (d) ☐ other (PLEASE SPECIFY): _____

B27 Who requested that this be done: GAL, state attorney, parent's attorney, judge, other? (INTERVIEWER: ***Check as many responses as applicable.***)

- (a) ☐ GAL
- (b) ☐ agency's attorney
- (c) ☐ parents' attorney(s)
- (d) ☐ judge
- (e) ☐ other (PLEASE SPECIFY): _____

B28 Did you do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐ Yes
- ☐ No (GO TO Q B30) →

- B29 What types of things did you do to make it easier for the child?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"DID THE FOLLOWING TO MAKE IT EASIER FOR CHILD . . ."				
(a) moved to have previous testimony admitted	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) moved to have child/parents leave during sensitive testimony	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) rearranged courtroom environment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) objected to questioning of child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) prepared the child to testify and explained the process	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY) _____				

- B30 Looking back over what you have done to advocate for the child's interests in court, would you say that you were successful in expediting the progress of the case through the court system?


☐₁ Yes
☐₂ No (GO TO Q B32) →

- B31 What types of things did you do that you feel helped to expedite the case?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"EXPEDITED CASE BY . . ."				
(a) opposing delays or continuances that I felt worked against the child's interests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) requesting a court hearing sooner than scheduled	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assisting parties to resolve differences out of court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

(d) other (PLEASE SPECIFY): _____

B32 Looking back over what you have done to advocate for the child's interests inside and outside court, how forceful or assertive would you assess yourself? (INTERVIEWER: **Check only one.**)

- ☐₁ Very forceful or assertive (GO TO C1)
☐₂ Somewhat forceful or assertive (GO TO C1) 
☐₃ Not forceful or assertive at all

B33 If not forceful, why not? (INTERVIEWER: **Check all that apply.**)

- (a) ☐₁ little time to investigate
(b) ☐₁ concurred with other party
(c) ☐₁ do not view role as one of active participant
(d) ☐₁ hearings did not require active role
(e) ☐₁ other (PLEASE SPECIFY): _____

C1 At any time during this case, did you represent the child in other court actions?

- ☐₁ Yes
☐₂ No (GO TO Q D1) 

C2 In what other type(s) of court actions did you represent the child(ren)?
(INTERVIEWER: **Check all that apply.**)

- (a) ☐ criminal abuse of the child(ren) by the parent
- (b) ☐ other criminal case involving the child (either as victim or as perpetrator)
- (c) ☐ custody/visitation
- (d) ☐ delinquency
- (e) ☐ voluntary foster care
- (f) ☐ other (PLEASE SPECIFY): _____

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT YOU DID TO MEDIATE BETWEEN THE VARIOUS PARTIES.

IF R ANSWERED "NO" TO QUESTION B5, WHETHER THERE WAS A NEGOTIATED AGREEMENT OR STIPULATION, SKIP TO QUESTION E1.

D1 During the negotiations that we talked about earlier, how much would you say you were involved in the negotiations? Would you say you were very involved, moderately involved, minimally involved, or not involved at all?
(INTERVIEWER: **Check only one.**)

- ☐ Very involved
- ☐ Moderately involved
- ☐ Minimally involved
- ☐ Not involved at all

D2 During these negotiations, how important would you say your contribution was to the outcome of the negotiations? Would you say you were extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all

D3 During these negotiations, how effective would you say you were in presenting options and generally advocating for the child's interests? Would you say you were extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very effective
- ☐₂ Moderately effective
- ☐₃ Only somewhat effective
- ☐₄ Not effective at all

**THE NEXT FEW QUESTIONS INVOLVE YOUR ACTIVITIES
IN PROVIDING INFORMATION TO VARIOUS PARTIES TO
THE CASE AND IN ADVOCATING FOR SERVICES.**

E1 At any time during the case, did you provide information about a resource to either the family, the agency or the court which you feel they were unaware of or did not recommend themselves?

- ☐₁ Yes
- ☐₂ No (GO TO Q E3) —————→

E2 Did this information involve any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative or friend)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) change in circumstances of the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) affected the current case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E3 At any time in the case, did you either assist the child or the family directly to obtain any social services or to attempt to make sure that the agency obtained them?

☐₁ Yes
☐₂ No (GO TO Q F1) →

E4 If you assisted in any way, did you do any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY . . ."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting the caseworker or other professional to inform them of the need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting case worker or other professional to followup on previous plans	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E5 What types of services did you attempt to obtain or actually obtain for the child or family? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SERVICES INCLUDED . . ."				
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal matters not related to your GAL activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

**IN THE NEXT FEW QUESTIONS WE ASK YOU TO
ASSESS YOUR OVERALL PERFORMANCE AND
EFFECTIVENESS ON THIS CASE.**

F1 If you look over the whole case, I would like you to estimate the percentage of the time you spent dealing with each type of activity.

- (a) _____ investigating and collecting information about the case from written materials and relevant sources
 - (b) _____ legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
 - (c) _____ negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
 - (d) _____ monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
 - (e) _____ providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
 - (f) _____ other (PLEASE SPECIFY): _____
- _____ (NOTE, THEY MUST ADD UP TO 100%)

☐ Don't Know

F2 How effective would you assess yourself in each of the dimensions listed above? For each dimension assess your effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

		1 Ineffective	2 Somewhat Effective	3 Very Effective
(a)	investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b)	legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c)	negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d)	monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e)	resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

- ☐₁ Yes
☐₂ No (GO TO Q F5) →

F4 If yes, please identify and assess them on the same scale of 1 to 3.

		1 Ineffective	2 Somewhat Effective	3 Very Effective
(a)		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b)		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c)		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F5 Overall, how would you assess your relationship with the child? Was it Good, Poor, or Neither Good nor Poor?

- ☐₁ Good
☐₂ Poor
☐₃ Neither good nor poor

F6 Overall, how well would you say you were able to coordinate work on the case with the caseworker and child welfare agency? Would you say that you were able to coordinate work very well, somewhat well, or poorly?

- ☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F7 Overall, how well would you say the you were able to share information with the caseworker and child welfare agency? Would you say that you shared information very well, somewhat well, or poorly?

- ☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F8 Was there anything about your relationships with the child, parents, caseworker, volunteer, or other party that prevented you from performing as effectively as you would have liked?

- ☐₁ Yes
☐₂ No (GO TO Q F10) →

F9 If you answered yes, please identify the relationship that prevented you from performing as effectively as you would have liked. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID IT INVOLVE COOPERATION WITH THE . . ."				
(a) child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) volunteer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

F10 Was there anything else about the case that prevented you from performing as effectively as you would have liked?

- ☐₁ Yes
☐₂ No (GO TO CONTROL QUESTION AT THE TOP OF PAGE 35)



F11 If you answered yes, please identify whether any of the following prevented you from performing as effectively as you would have liked. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID IT INVOLVE . . ."				
(a) limits on your time (such as large caseload, conflicting case demands, etc.)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) limited time in which to prepare case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) inadequate compensation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) limited resources with which to prepare or conduct case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) uncertainty about role in case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) complexity of case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) lack of training about child advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) other (PLEASE SPECIFY): _____				

(INTERVIEWER: *If inadequate compensation was checked above, answer Q F12 and Q F13.*)

F12 Did the lack of adequate compensation affect the amount of time you were able to spend on the case?

- ☐₁ Yes
☐₂ No

F13 Will the lack of adequate compensation affect your continuing to serve as a child's representative in the future?

- ☐₁ Yes
☐₂ No

CONTROL CHECK: CONTINUE WITH THE QUESTIONNAIRE *ONLY* IF THERE WAS BOTH AN ATTORNEY AND ANOTHER ATTORNEY, VOLUNTEER, OR SOCIAL WORKER ON THE CASE.

- ☐₂ Two representatives, CONTINUE TO G1
☐₁ One representative, **STOP!!**

G1 At any point during the case, did you have contact (by phone or face-to-face) with the volunteer, caseworker, or attorney?

- ☐₁ Yes
☐₂ No (GO TO Q G6) —————→

G2 In your contacts, did you discuss any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED THE FOLLOWING . . ."				
(a) assessment of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) stipulation of abuse or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) services/treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) legal issues (e.g., hearings)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY): _____				

G3 Generally, at what points during the case did these contacts take place?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
(a) before or during the adjudication hearing	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) before or during the dispositional hearing	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) during negotiations over a settlement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) before or during a trial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

G4 If you look over the course of the case, roughly how many times would you say you contacted the attorney/volunteer in person or by phone in an average month?

_____ Times in an average month

G5 If you look at when and how often you had these contacts throughout the case, would you say that they were concentrated around the times of the hearings or were they spread more evenly throughout the case?
(INTERVIEWER: Check all that apply.)

- (a) ☐₁ concentrated at hearings
- (b) ☐₁ spread more evenly throughout
- (c) ☐₁ other (PLEASE SPECIFY): _____

G6 In the next four questions, I want you to think about your working relationship with your fellow representative. Please answer these questions on a scale of 1 to 5, with 1 being low or poor, 3 being neutral, and 5 being high or good.

	1	2	3	4	5
(a) How well you shared information and ideas with one another	<input type="checkbox"/> ₁ poor	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅ good
(b) How much you depended on the other for advice and recommendations	<input type="checkbox"/> ₁ none	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅ full
(c) The level of coordination in your working relationship	<input type="checkbox"/> ₁ none	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅ full

G7 Are there any aspects of the case on which you disagreed with the attorney/volunteer?

- ☐₁ Yes
☐₂ No (STOP!!)

G8 Did the disagreement involve any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes or No to each; place the response [Yes, No, Don't Know, or Not Applicable] next to each item.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREEMENT INVOLVED . . ."				
(a) assessment of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) stipulation of abuse or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) services/treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) legal issues (e.g., hearings)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY): _____				

IF ALL "NO," STOP

G9 Given these differences mentioned above, were you able to resolve them? Please indicate whether you resolved all of them, some of them, or none of them.

- ☐₁ Resolved all
☐₂ Resolved some
☐₃ Resolved none

STOP, END INTERVIEW

**QUESTIONNAIRE #2
CASEWORKER
(NEW CASES ONLY)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

Caseworker Name:
Subject ID#:
Case Record #:
Interviewer ID#:
Completion Date: ____ / ____ / 93

Public reporting burden for this collection of information is estimated to average 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Reports Clearance Officer
Administration for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

and to:

Office of Management and Budget
Paperwork Reduction Project
OMB Control No. (New Request)
Washington, D.C. 20503

CASEWORKER NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____/____/93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

- ☐₁ Yes (GO TO QUESTIONNAIRE #5) →
☐₂ No

CTL3 (a) When was this case opened? ____/____/____

(b) When was the caseworker assigned to case? ____/____/____

(c) Is the interviewee the original caseworker on the case?

- ☐₁ Yes (GO TO CTL5) →
☐₂ No

(d) Is there currently more than one caseworker assigned to this case?

- ☐₁ Yes
☐₂ No

CTL4 Ask R whether she/he has had sufficient knowledge of the child's representative to answer questions about his or her activities on the case.

☐₁ Yes

☐₂ No

(STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER CASEWORKER WHO COULD PROVIDE THIS INFORMATION:)

CTL5 Are there two (2) representatives on this case?

☐₁ Yes

☐₂ No

(GO TO QUESTIONNAIRE #2-B) →

BACKGROUND INFORMATION ON THE CASEWORKER

FIRST, WE WOULD LIKE YOU TO ANSWER A FEW
GENERAL QUESTIONS ABOUT YOUR BACKGROUND
AND CURRENT WORK.

BA1 How many years have you worked as a caseworker in child welfare services?

_____ Years or [_____ Months]

BA2 How large is your current caseload? (INTERVIEWER: *If the R is not currently responsible for the case, ask about caseload during time when the R was the responsible caseworker.*)

_____ Cases

BA3 How many other caseworkers have been assigned to this case since it was opened?

_____ Other caseworkers (*If no other caseworkers, enter zero.*)

☐ Don't know

BA4 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO INVESTIGATE AND PREPARE FOR THE CASE FROM THE TIME SHE/HE WAS APPOINTED.

A1 Did the child's representative investigate or prepare for the case extensively, somewhat, or not at all?

☐₁ Not at all (PLEASE SPECIFY):

(GO TO Q B1) →

☐₂ Extensively

☐₃ Somewhat

A2 During the investigation of the case, did you discuss any aspect of the case with the child's representative?

☐₁ Yes

☐₂ No (GO TO Q A4) →

A3 Which of the following did you discuss? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED . . ."				
(a) Facts of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) assessment of the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assessment of the family situation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) agency report (CPS)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) case goal	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) permanent placement objectives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) services or treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) legal issues	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) visitations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY): _____				

A4 At any time during the investigation of the case, did the child's representative assess the child's placement needs?

- ☐₁ Yes
☐₂ No (GO TO Q A6) —————→
☐₃ Don't know (GO TO Q A6) —————→

- A5 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's placement needs.
(INTERVIEWER, Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

- A6 At any time during the investigation of the case, did the child's representative assess the child's or family's needs for services?

- ☐₁ Yes
☐₂ No (GO TO Q A8)
☐₃ Don't know (GO TO Q A8)



A7 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's or family's needs for services. (INTERVIEWER, *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) requested an evaluation of the child or parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) reviewed the agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY): _____				

A8 At any time during the investigation of the case, did the child's representative assess the child's educational needs?

- ☐₁ Yes
- ☐₂ No (GO TO Q A10)
- ☐₃ Don't know (GO TO Q A10)
- ☐₄ N/A (GO TO Q A10)



- A9 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's educational needs.
(INTERVIEWER, Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with family members	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) talked with school personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) requested educational tests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY):	_____			

- A10 At any time did the child's representative undertake any special activities to assess the child's or family's needs for services in any of the following areas? (INTERVIEWER, *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) mental health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) alcohol or drug treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) parent skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

- A11 Overall, how thorough would you say the child's representative was in investigating and preparing for the case? Would you say she he was very thorough, somewhat thorough, or not thorough at all? (INTERVIEWER: *Check only one.*)

- ☐₁ Very thorough
☐₂ Somewhat thorough
☐₃ Not thorough

THE NEXT FEW QUESTIONS REFER TO LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS UP TO AND INCLUDING THE DISPOSITIONAL HEARING.

B1 At any time before the dispositional hearing took place, did the child's representative attempt to negotiate an agreement or stipulation?

- ☐₁ Yes
☐₂ No (GO TO Q B3)
☐₃ Don't know (GO TO Q B3)



B2 During the negotiations, did the child's representative do any of the following activities? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY):	_____			

B3 At any time up through the dispositional hearing, did you disagree with the child's representative about the any of the following issues? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

IF YES CHECKED FOR ANY ISSUE, ANSWER Q B4—
OTHERWISE GO TO Q B5.

B4 Given these differences, were they resolved between the parties? Please indicate whether all, some, or none of the differences were resolved.

- ☐₁ Yes, all
- ☐₂ Yes, some
- ☐₃ No, none

B5 At any hearing up through the dispositional hearing, did the child talk in court or to the judge?

- ☐₁ Yes
- ☐₂ No (GO TO Q B7) →
- ☐₃ Don't know (GO TO Q B7) →

B6 Did the child's representative do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐₁ Yes
- ☐₂ No
- ☐₃ Don't know

B7 Looking back over what you know of what the child's representative did to advocate for the child's interests inside and outside court, how forceful or assertive would you say he or she was? (INTERVIEWER: **Check only one.**)

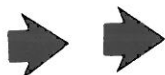
- ☐₁ Very forceful or assertive (GO TO Q C1) —————→
☐₂ Somewhat forceful or assertive (GO TO Q C1) —————→
☐₃ Not forceful or assertive at all

B8 If not forceful, why do you think he or she was not? (INTERVIEWER: **Check all that apply.**)

- (a) ☐₁ little time to investigate
(b) ☐₁ concurred with agency
(c) ☐₁ did not view child's representative role as one of being an active participant
(d) ☐₁ hearings did not require active role
(e) ☐₁ other (PLEASE SPECIFY): _____

C1 Has the child's representative done anything to carry out some aspect of a court order, voluntary agreement, or case plan?

- ☐₁ Yes
☐₂ No
☐₃ D/K
☐₄ N/A



IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO MEDiate BETWEEN THE VARIOUS PARTIES.

IF R ANSWERED "NO" OR "DON'T KNOW" TO QUESTION B1, WHETHER THERE WAS A NEGOTIATED AGREEMENT OR STIPULATION, SKIP TO QUESTION E1.

D1 During the negotiations that we talked about earlier, how much would you say the child's representative was involved in the negotiations? Would you say

she he was very involved, moderately involved, minimally involved, or not involved at all. (INTERVIEWER: **Check only one.**)

- ☐₁ Very involved
- ☐₂ Moderately involved
- ☐₃ Minimally involved
- ☐₄ Not involved at all
- ☐₅ Don't know

D2 During these negotiations, how important would you say the child's representative's contribution was to the outcome of the negotiations? Would you say she/he was extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: **Check only one.**)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all
- ☐₅ Don't know

D3 During these negotiations, how effective would you say the child's representative was in presenting options and generally advocating for the child's interests? Would you say she/he was extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations. (INTERVIEWER: **Check only one.**)

- ☐₁ Very effective
- ☐₂ Moderately effective
- ☐₃ Only somewhat effective
- ☐₄ Not effective at all
- ☐₅ Don't know

THE NEXT FEW QUESTIONS INVOLVE THE CHILD'S REPRESENTATIVE'S ACTIVITIES IN PROVIDING INFORMATION TO VARIOUS PARTIES TO THE CASE AND IN ADVOCATING FOR SERVICES.

E1 At any time during the case, did the child's representative provide information about a resource to either the agency, the court, or the family which you feel you were unaware of or did not recommend yourself?

- ☐₁ Yes
☐₂ No (GO TO Q E4) →

E2 Did this information involve any of the following aspects of the case?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative or friend)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) change in circumstances of the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY):	_____			

E3 Did you consider this information useful to help the child or family?

☐₁ Yes

☐₂ No (PLEASE SPECIFY): _____

E4 At any time during the case, did the child's representative either assist the child or the family to obtain any social services or to attempt to make sure that the agency obtained them?

☐₁ Yes

☐₂ No (GO TO Q F1) —————→

☐₃ Don't know (GO TO Q F1) —————→

E5 If the child's representative assisted in any way, did she/he do any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY . . ."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting the caseworker or other professional to inform them of the need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting caseworker or other professional to followup on previous plans.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E6 What types of services did the GAL attempt to obtain, or actually obtain, for the child or family. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SERVICES INCLUDED . . ."				
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal matters not related to GAL activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

(m) other (PLEASE SPECIFY): _____

**IN THE NEXT FEW QUESTIONS WE ASK YOU TO
ASSESS THE CHILD'S REPRESENTATIVE'S OVERALL
PERFORMANCE AND EFFECTIVENESS ON THIS CASE.**

F1 I would like you to think about and estimate the percentage of the time you feel a child's representative should spend dealing with the following types of activities, assuming an average case. (INTERVIEWER: *If R is uncertain about answering this, code as "Don't Know."*)

- (a) _____ investigating and collecting information about the case from written materials and relevant sources
- (b) _____ legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
- (c) _____ negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
- (d) _____ monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
- (e) _____ providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
- (f) _____ other (PLEASE SPECIFY):

_____ NOTE, THEY MUST ADD UP TO 100%

OR

☐ Don't know

- F2 If you were to assess the child's representative's activities on this case, how effective would you say she/he was in each of the dimensions listed above? For each dimension assess his/her effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

- F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

☐₁ Yes
☐₂ No (GO TO Q F5) →

- F4 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

- F5 Overall, how well would you say the child's representative coordinated work with you on the case? Would you say that she/he coordinated work very well, somewhat well, or poorly?

☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F6 Overall, how well would you say the child's representative shared information with you and the agency? Would you say that she/he shared information very well, somewhat well, or poorly?

- ☐₁ Very well
- ☐₂ Somewhat well
- ☐₃ Poorly

**QUESTIONNAIRE #2-B
CASEWORKER
(NEW CASES ONLY)
(DUAL REPRESENTATIVES)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

Caseworker Name:
Subject ID#:
Case Record #:
Interviewer ID#:
Completion Date: ____ / ____ / 93

CASEWORKER NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____ / ____ /93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

- ☐₁ Yes (GO TO QUESTIONNAIRE #5) →
☐₂ No

CTL3 (a) When was this case opened? ____ / ____ / ____

(b) When was the caseworker assigned to case? ____ / ____ / ____

(c) Is the interviewee the original caseworker on the case?

- ☐₁ Yes (GO TO Q5) →
☐₂ No

(d) Is there currently more than one caseworker assigned to this case?

- ☐₁ Yes
☐₂ No

CTL4 Ask R whether she/he has sufficient knowledge of the child's representative(s) to answer questions about their activities on the case.

☐₁ Yes

☐₂ No (STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER CASEWORKER WHO COULD PROVIDE THIS INFORMATION:)

CTL5 Are there two (2) representatives for the child on this case?

☐₁ Yes

☐₂ No (GO TO QUESTIONNAIRE #2) →

BACKGROUND INFORMATION ON THE CASEWORKER

FIRST, WE WOULD LIKE YOU TO ANSWER A FEW
GENERAL QUESTIONS ABOUT YOUR BACKGROUND
AND CURRENT WORK.

BA1 How many years have you worked as a caseworker in child welfare services?

_____ Years or [_____ Months]

BA2 How large is your current caseload? (INTERVIEWER: *If the R is not currently responsible for the case, ask about caseload during time when the R was the responsible caseworker.*)

_____ Cases

BA3 How many other caseworkers have been assigned to this case since it was opened?

_____ Other caseworkers (*If no other caseworkers, enter zero.*)

☐ Don't know

BA4 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO INVESTIGATE AND PREPARE FOR THE CASE FROM THE TIME SHE/HE WAS APPOINTED.

A1 Were there are any circumstances where the child's representative(s) did *not* investigate or prepare for the case?

☐₁ Yes (PLEASE SPECIFY):

(GO TO Q B1) →

☐₂ No

A2 During the investigation of the case, did you discuss any aspect of the case with either or both of the child's representatives?

☐₁ Yes

☐₂ No (GO TO Q A4) →

A3 Which of the following did you discuss? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED . . ."				
(a) facts of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) assessment of the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assessment of the family situation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) agency report (CPS)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) case goal	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) permanent placement objectives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) services or treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) legal issues	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) visitations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY): _____				

A4 At any time during the investigation of the case, did the child's representative(s) assess the child's placement needs?

- ☐₁ Yes
☐₂ No (GO TO Q A6)
☐₃ Don't know (GO TO Q A6)



- A5 Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's placement needs. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

- A6 At any time during the investigation of the case, did the child's representative(s) assess the child's or family's needs for services?

☐₁ Yes
☐₂ No (GO TO Q A8)
☐₃ Don't know (GO TO Q A8)



- A7 Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's or family's needs for services. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visiting the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visiting the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requesting an evaluation of the child or parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) reviewing the agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) other (PLEASE SPECIFY): _____				

- A8 At any time during the investigation of the case, did the child's representative(s) assess the child's educational needs?

- ☐₁ Yes
☐₂ No (GO TO Q A10)
☐₃ Don't know (GO TO Q A10)
☐₄ N/A (GO TO Q A10)



- A9 Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's educational needs. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with family members	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) talked with school personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) requested educational tests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

- A10 At any time did the child's representative(s) undertake any special activities to assess the child's or family's needs for services in any of the following areas? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)


	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) mental health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) alcohol or drug treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) parenting skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A11 Overall, how thorough would you say the child's representative(s) were in investigating and preparing for the case? Would you say they were very thorough, somewhat thorough, or not thorough at all? (INTERVIEWER: **Check only one.**)

- ☐₁ Very thorough
- ☐₂ Somewhat thorough
- ☐₃ Not thorough

THE NEXT FEW QUESTIONS REFER TO LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS UP TO AND INCLUDING THE DISPOSITIONAL HEARING.

B1 Did the child's representative(s) attempt to negotiate an agreement or stipulation?

- ☐₁ Yes
 - ☐₂ No (GO TO Q B3)
 - ☐₃ Don't know (GO TO Q B3)
 - ☐₄ N/A (GO TO Q B3)
- 

B2 During the negotiations, did the child's representative(s) do any of the following activities? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

B3 At any time, did you disagree with the child's representative(s) about the any of the following issues? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				




IF YES CHECKED FOR ANY ISSUE, ANSWER Q B4—
OTHERWISE GO TO Q B5.

B4 Given these differences, were they resolved between the parties? Please indicate whether all, some, or none of the differences were resolved.

- ☐₁ Yes, all
- ☐₂ Yes, some
- ☐₃ No, none


B5 At any hearing did the child talk in court or to the judge?

- ☐₁ Yes
 - ☐₂ No (GO TO Q B7)
 - ☐₃ Don't know (GO TO Q B7)
 - ☐₄ N/A (GO TO Q B7)
- 

B6 Did the child's representative(s) do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐₁ Yes
- ☐₂ No
- ☐₃ Don't know

B7 Looking back over what you know the child's representative(s) did to advocate for the child's interests inside and outside court, how forceful or assertive would you say they were? (INTERVIEWER: **Check only one.**)

- ☐₁ Very forceful or assertive (GO TO Q C1)
 - ☐₂ Somewhat forceful or assertive (GO TO Q C1)
 - ☐₃ Not forceful or assertive at all
- 

B8 If not forceful, why do you think they were not? (INTERVIEWER: **Check all that apply.**)

- (a) ☐₁ little time to investigate
 - (b) ☐₁ concurred with agency
 - (c) ☐₁ did not view child's representative role as one of being an active participant
 - (d) ☐₁ hearings did not require active role
 - (e) ☐₁ other (PLEASE SPECIFY): _____
- _____
- _____

IN THE NEXT FEW QUESTIONS, WE WILL ASK YOU ABOUT ANY ACTIVITIES THE CHILD'S REPRESENTATIVE MAY HAVE DONE TO MONITOR THE CASE.

C1 How frequently would you say the child's representative(s) contacted the child on matters *other than those* dealing with hearings? (INTERVIEWER: **Check only one.**)

- ☐₁ Very frequently
- ☐₂ Somewhat frequently
- ☐₃ Infrequently
- ☐₄ Not at all
- ☐₅ Don't know

C2 Have you been contacted by the child's representative(s) on matters *other than those* pertaining to a hearing?

- ☐₁ Yes
- ☐₂ No

C3 Has the child's representative(s) done anything to carry out some aspect of a court order, voluntary agreement, or case plan?

- ☐₁ Yes
- ☐₂ No
- ☐₃ D/K
- ☐₄ N/A

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO MEDIATE BETWEEN THE VARIOUS PARTIES.

➡ ➡ IF R ANSWERED "NO" OR "DON'T KNOW" TO QUESTION B1, WHETHER THERE WAS A NEGOTIATED AGREEMENT OR STIPULATION, SKIP TO QUESTION E1.

D1 During the negotiations that we talked about earlier, how much would you say the child's representatives were involved in the negotiations? Would you say they ~~were~~ very involved, moderately involved, minimally involved, or not involved at all? (INTERVIEWER: **Check only one.**)

- ☐₁ Very involved
- ☐₂ Moderately involved
- ☐₃ Minimally involved
- ☐₄ Not involved at all
- ☐₅ Don't know

D2 During these negotiations, how important would you say the child's representative's contributions were to the outcome of the negotiations? Would you say they were extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations. (INTERVIEWER: **Check only one.**)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all
- ☐₅ Don't know

D3 During these negotiations, how effective would you say the child's representative(s) were in presenting options and generally advocating for the child's interests? Would you say they were extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations. (INTERVIEWER: **Check only one.**)

- ☐₁ Very effective
 - ☐₂ Moderately effective
 - ☐₃ Only somewhat effective
 - ☐₄ Not effective at all
 - ☐₅ Don't know
-
-

THE NEXT FEW QUESTIONS INVOLVE THE CHILD'S REPRESENTATIVE'S ACTIVITIES IN PROVIDING INFORMATION TO VARIOUS PARTIES TO THE CASE AND IN ADVOCATING FOR SERVICES.

E1 At any time during the case, did the child's representative(s) provide information about a resource to either the agency, the court, or the family which you feel you were unaware of or did not recommend yourself?

☐₁ Yes

☐₂ No (GO TO Q E4) —————→

E2 Did this information involve any of the following aspects of the case?
(INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) adjustment or circumstances in the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E3 Did you consider this information useful to help the child or family?

☐₁ Yes

☐₂ No (PLEASE SPECIFY): _____

E4 At any time during the case, did the child's representative(s) either assist the child or the family to obtain any social or other services or to attempt to make sure that the agency obtained them?

- ☐₁ Yes
☐₂ No (GO TO Q F1)
☐₃ Don't know (GO TO Q F1)



E5 If the child's representative(s) assisted in any way, did they do any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY ..."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting caseworker or other professional to inform of need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting social worker or other professional to followup on previous plans	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY):	_____			

E6 What types of services were involved? From the following list, please indicate those the child's representative(s) helped the child or family to obtain. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SERVICES INCLUDED . . ."				
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal other than GAL	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

**IN THE NEXT FEW QUESTIONS WE ASK YOU TO
ASSESS THE CHILD'S REPRESENTATIVE'S OVERALL
PERFORMANCE AND EFFECTIVENESS ON THIS CASE.**

F1 I would like you to think about and estimate the percentage of the time you feel a child's representative(s) should spend dealing with the following types of activities, assuming an average case. (INTERVIEWER: *If R is uncertain about answering this, code as "Don't Know."*)

- (a) _____ Investigating and collecting information about the case from written materials and relevant sources
- (b) _____ Legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
- (c) _____ Negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
- (d) _____ Monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
- (e) _____ Providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
- (f) _____ Other (PLEASE SPECIFY): _____

_____ NOTE, THEY MUST ADD UP TO 100%

OR

☐ Don't know

F2 If you were to assess the child's representative's activities on this case, how effective would you say they were in each of the dimensions listed below? For each dimension assess their effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

☐₁ Yes

☐₂ No (GO TO Q F5)

F4 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F5 Overall, how well would you say the child's representative(s) coordinated work with you on the case? Would you say that they coordinated work very well, somewhat well, or poorly?

☐₁ Very well

☐₂ Somewhat well

☐₃ Poorly

F6 Overall, how well would you say the child's representative(s) shared information with you and the agency? Would you say that they shared information very well, somewhat well, or poorly?

- ☐₁ Very well
- ☐₂ Somewhat well
- ☐₃ Poorly



**IF ONE OF THE CHILD'S REPRESENTATIVES IS NOT AN ATTORNEY,
STOP INTERVIEW.**

F7 Overall, with which of the two child's representatives did you have the most contact with during the case? Would you say you had more contact:

- ☐₁ With the attorney
- ☐₂ With the volunteer
- ☐₃ Same with each
- ☐₄ Other _____

F8 Overall, with which of the two child's representatives were you best able to coordinate your work on the case? Would you say you were best able to coordinate:

- ☐₁ With the attorney
- ☐₂ With the volunteer
- ☐₃ Same with each
- ☐₄ Other _____

QUESTIONNAIRE #3 JUDGE

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

Judge Name:
Interviewer ID#:
Completion Date: ____ / ____ / 93

Public reporting burden for this collection of information is estimated to average 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Reports Clearance Officer
Administration for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

and to:

Office of Management and Budget
Paperwork Reduction Project
OMB Control No. (New Request)
Washington, D.C. 20503

JUDGE NAME: _____
INTERVIEWER ID#: _____
DATE: ____ / ____ /93

BACKGROUND INFORMATION ON THE JUDGE

BA1 How many years have you been sitting on a court that hears child abuse and neglect cases?

_____ Years or [_____ Months]

BA2 Before you were appointed to the court, did you have any previous professional or other experience in the child welfare or child advocacy fields?

☐₁ Yes

☐₂ No (GO TO Q BA5)

BA3 Prior to your appointment to the court, how many years experience did you have in the child welfare or child advocacy fields prior to your appointment?

_____ Years or [_____ Months]

BA4 Briefly describe the type of experience you have had prior to your appointment.

BA5 On average, how many child abuse and neglect cases do you hear each week?

_____ Cases

BA6 Does your court require GALs to have any *specialized training* before they can represent children?

☐₁ Yes

☐₂ No

A1

In your opinion, how thorough would you consider GALs are in fact finding and case preparation? For each item, please assess whether you consider them to be, on average, very thorough, somewhat thorough, or not thorough at all in terms of their investigation. If you think a particular item is not appropriate for a GAL to be concerned with, please indicate that as well.
(INTERVIEWER: *Read the list of responses below and mark appropriate response [Very thorough, somewhat thorough, not thorough at all, or not applicable] next to each item.*)

	1 Very Thorough	2 Somewhat Thorough	3 Not at all Thorough	4 N/A
"THOROUGH IN THEIR . . ."				
(a) fact finding and case preparation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) assessment of placement needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assessment of service needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) assessment of educational needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) assessment of health/mental health/parenting/alcohol & drug needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) assessment of housing/transportation/childcare/employment needs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

A2 If you were to assess the GALs you come in contact with on the bench, what percent of them would you say are very thorough, somewhat thorough, or not thorough at all in terms of investigating the facts and preparing for a case?

- (a) _____ % very thorough
(b) _____ % somewhat thorough
(c) _____ % not thorough at all

(MUST ADD TO 100 PERCENT)

- A3 In your opinion, how well prepared would you consider GALs are at presenting cases in the courtroom? For each item, please assess whether you consider them to be, on average, very well prepared, somewhat well prepared, or not prepared at all in terms of their court presentations. (INTERVIEWER: *Read the list of responses below and mark appropriate response [Very well prepared, somewhat well prepared, or not well prepared at all] next to each item.*)

	1 Very Well Prepared	2 Somewhat Prepared	3 Not at all Prepared
"PREPARATION IN TERMS OF ..."			
(a) oral reports	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) written reports	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) evidence presented	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) calling and/or cross-examining witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) filing motions	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(f) stipulations and negotiations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(g) court procedures during contested hearings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(h) other (PLEASE SPECIFY):	_____		

- A4 If you were to assess the GALs you come in contact with on the bench, what percent of them would you say were very well prepared, somewhat well prepared, or not prepared at all in terms of their court presentations? (INTERVIEWER: *Mark a figure next to each.*)

- (a) _____ % very well prepared
 (b) _____ % somewhat well prepared
 (c) _____ % not well prepared at all

 (MUST ADD TO 100 PERCENT)

B1 If you were to assess the GALs you come in contact with on the bench, how useful a role would you say they play in negotiating agreements? Would you say they play a very useful, somewhat useful, or not useful role in negotiating agreements? (CHECK ONLY ONE BOX.)

- ☐₁ Very useful
☐₂ Somewhat useful
☐₃ Not useful

B2 If you were to assess the GALs you come in contact with on the bench, how frequently would you say that they make recommendations in any of the following areas? Would you say that, on average, they make recommendations very frequently (more than 80%), somewhat frequently (between 60-80%), about even (40-60%), not too frequently (20-40%), or very infrequently (less than 20%)?

	1 Very Frequent (>80%)	2 Somewhat	3 Even	4 Not Too	5 Very Infrequent (<20%)
(a) stipulation of abuse and/or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(b) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(d) services to child and/or family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

B3 If you were to assess overall the cases that come before the bench, how frequently would you say that there is agreement or disagreement between the GALs and the child welfare agency. Would you say that, on average, they are likely to agree very frequently (more than 80%), somewhat frequently (between 60-80%), about even (40-60%), not too frequently (20-40%), or very infrequently (less than 20%)? (INTERVIEWER: *Check only one.*)

1 Very Frequent Agreement (>80%)	2 Somewhat	3 Even (40-60%)	4 Not Too	5 Very Infrequent Agreement (<20%)
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

B4 How frequently, on average, would you say that recommendations of GALs influence the court. For each of the areas identified above, would you say that, on average, the recommendations influence the court very frequently (more than 80%), somewhat frequently (between 60-80%), about even (40-60%), not too frequently (20-40%), or very infrequently (less than 20%).

	1 <i>Very Frequent (>80%)</i>	2 <i>Somewhat</i>	3 <i>Even</i>	4 <i>Not Too</i>	5 <i>Very Infrequent (<20%)</i>
(a) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(b) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
(c) services to child and/or family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
	(GO TO Q B5)				(GO TO Q B6)

B5 If you mentioned very frequently for any of the items above, please indicate the reason(s) why the recommendations of the GALs have been influential to the court.

B6 If you mentioned not very frequently for any of the items above, please indicate the reason(s) why the recommendations of the GALs have not been influential to the court.

B7 In those cases where the child had to speak before the court, did the GAL generally do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐₁ Yes
☐₂ No

B8 In your opinion, what types of things make it easier for the child to speak in the court?

B9 Looking back over what child GALs have done to advocate for the child's interests in court, would you say that they were successful in expediting the progress of the case through the court system?

- ☐₁ Yes
☐₂ No

B10 If you were to assess the GALs you come in contact with on the bench, how forceful or assertive would you say they are, on average, in advocating for the child's interests inside and outside the court? (INTERVIEWER: **Check only one.**)

- ☐₁ Very forceful or assertive
☐₂ Somewhat forceful or assertive
☐₃ Not forceful or assertive at all

C1 In your opinion, would you say that the GALs maintain sufficient contact with the child after completion of the dispositional hearing?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

C2 In your opinion, how diligent would you say that the GALs have been in carrying out some aspect of a court order, voluntary agreement, or case plan? Would you say that they have been very diligent, somewhat diligent, or not diligent at all?

- ☐₁ Very diligent
☐₂ Somewhat diligent
☐₃ Not diligent at all
-
-

D1 If you were to assess the GALs you come in contact with on the bench, how important would you say their contributions were to the outcome of any negotiations which take place inside or outside the court? Would you say they were extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: **Check only one.**)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all
- ☐₅ Don't know

D2 If you were to assess the GALs you come in contact with on the bench, how effective would you say the GALs are in presenting options and generally advocating for the child's interests during negotiations inside and outside the court? Would you say they are extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations? (INTERVIEWER: **Check only one.**)

- ☐₁ Very effective
- ☐₂ Moderately effective
- ☐₃ Only somewhat effective
- ☐₄ Not effective at all
- ☐₅ Don't know

E1 Looking back over your cases, how frequently would you say that the GALs were able to provide information about a resource to the agency, court, or family which you feel they were unaware of or did not recommend themselves? Would you say that it was very frequent, somewhat frequent, not frequent/sometimes, or not at all? (INTERVIEWER: **Check only one.**)

- ☐₁ Very frequent
- ☐₂ Somewhat frequent
- ☐₃ Not frequent/sometimes
- ☐₄ Not at all (GO TO Q E3)
- ☐₅ Don't know (GO TO Q E3)

E2 Did this information involve any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) adjustment or circum- stances of the child or the family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) Other (PLEASE SPECIFY):	_____			

F1 How effective would you assess GALs in each of the dimensions listed below?
For each dimension assess his or her effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigating and collecting information about the case from written materials and relevant sources	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) providing information about possible resource persons or support services to other parties and advocating for resources for the child and family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F2 Are there any *other* major types of activities performed by GALs you feel are worth mentioning and assessing?

- ☐₁ Yes
☐₂ No (GO TO Q F4)

F3 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F4 If you were to assess the GALs you come in contact with on the bench, how good would you say their relationships with the children were? Would you say they were generally good, generally poor, or neither good nor poor in general? (INTERVIEWER: **Check only one.**)

- ☐₁ Generally good
- ☐₂ Generally poor
- ☐₃ Neither good nor poor
- ☐₄ Don't know

F5 Overall, how well would you say that GALs have been able to coordinate work on the case with the caseworker and child welfare agency? Would you say that they were able to coordinate work very well, somewhat well, poorly, or not at all. (INTERVIEWER: **Check only one.**)

- ☐₁ Very well
- ☐₂ Somewhat well
- ☐₃ Poorly
- ☐₄ Not at all
- ☐₅ Don't know

F6 In your opinion, is there anything about the GAL program that you feel limits the effectiveness of the representatives in advocating for the best interests of the child?

☐₁ Yes (PLEASE SPECIFY):

☐₂ No
☐₃ Don't Know

F7 In your opinion, is there some aspect of the GAL program that should be changed?

☐₁ Yes (PLEASE SPECIFY):

☐₂ No
☐₃ Don't Know

F8 If there are two representatives for the child, do you feel that there are any benefits to having this second representative?

☐₁ Yes
☐₂ No **STOP INTERVIEW!**
☐₃ Don't Know
☐₄ Not Applicable

F9 If yes, what benefits would you say there were?

**QUESTIONNAIRE #4
ATTORNEY AND VOLUNTEER
(REVIEW CASES ONLY)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

GAL Name:
Subject ID#:
Case Record #:
Interviewer ID#:
Completion Date: ____ / ____ / 93

Public reporting burden for this collection of information is estimated to average 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Reports Clearance Officer
Administration for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

and to:

Office of Management and Budget
Paperwork Reduction Project
OMB Control No. (New Request)
Washington, D.C. 20503

GAL NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____ / ____ /93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

- ☐₁ Yes
☐₂ No (GO TO QUESTIONNAIRE #1) →

CTL3 (a) When was the petition filed? ____ / ____ / ____

(b) When was this representative assigned? ____ / ____ / ____

(c) Is the interviewee the original child's representative?

- ☐₁ Yes (GO TO CTL5) ↘
☐₂ No

CTL4 Ask R whether she/he has had sufficient experience with this case to answer questions about it.

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER REPRESENTATIVE WHO COULD PROVIDE THIS INFORMATION:)

CTL5 Is there another attorney or volunteer representative for this child?

- ☐₁ Yes
☐₂ No

BACKGROUND INFORMATION ON CHILD'S REPRESENTATIVE

BA1 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

**IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK
YOU ABOUT WHAT YOU HAVE DONE TO INVESTIGATE
AND PREPARE FOR THE CASE SINCE THE REVIEW
HEARING.**

A1. Since the review hearing, have you investigated or prepared for the case extensively, somewhat, or not at all.

☐₁ Not at all (PLEASE SPECIFY THE CIRCUMSTANCE):

(GO TO Q B1) →

☐₂ Extensively

☐₃ Somewhat

A2 We would like to know the types of written sources of information you referred to when investigating or preparing for the case since the review hearing. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"WRITTEN SOURCES INCLUDED . . ."				
(a) police reports	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) CPS agency report	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) child welfare agency records on the family	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) court records (pleadings, petitions)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) third party statements	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) medical records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) mental health records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) school records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) correctional center records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) detox center records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) other (PLEASE SPECIFY):	_____			

- A3 Next, we would like to know the types contacts you had personally or by phone when you investigated or prepared for the case since the review hearing. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"CONTACTS INCLUDED . . ."				
(a) CPS investigator/caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) siblings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) relatives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) foster parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) neighbors	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) medical personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) law enforcement personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) education personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) State's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) parent's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(n) court worker (e.g., probation officer)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(o) other GAL	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(p) prior representative	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(q) mental health personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(r) other (PLEASE SPECIFY): _____				

A4 Since the review hearing, did you speak with the child without the child's parent(s) being present? *(If child is too young, then check "N/A.")*

- ☐₁ Yes
☐₂ No
☐₃ D/K
☐₄ N/A

A5 Since the review hearing, did you ever submit an oral or written report about the case to the court?

- ☐₁ Yes
☐₂ No

A6 Since the review hearing, did you assess the child's placement needs?

- ☐₁ Yes
☐₂ NO (GO TO Q A8) —————→

A7 Please identify the types of special activities you did to assess the child's placement needs. **(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)**

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A8 Since the review hearing, did you assess the child's or family's needs for services?

☐₁ Yes

☐₂ No (GO TO Q B1) —————→

A9 Since the review hearing, did you undertake any special activities to assess the child's or family's needs for services in any of the following areas?
(INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) mental health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) education	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) alcohol or drug treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) parenting skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY):	_____			

A10 If you undertook any special activities to assess the child's or family's needs for services, what did you do to assess their needs? (INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) reviewed the school/agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

THE NEXT FEW QUESTIONS REFER TO THE LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS UP TO AND INCLUDING THE LATEST HEARING.

B1 Were you present at some, most, all, or none of the hearings since you were appointed as the child's representative?

- ☐₁ Some
☐₂ Most
☐₃ All
☐₄ None (PLEASE SPECIFY WHY NOT) _____

B2 If you look across all uncontested (non-trial) hearings you attended on this case, which of the following activities did you perform? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"PERFORMED FOLLOWING ACTIVITIES . . ."				
(a) familiarized child with the court proceedings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) subpoenaed records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) submitted written reports for the record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) reported orally to court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) presented evidence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) offered a case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) filed motions or pleading	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) made disagreements with the agency known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) made disagreements with the child known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY): _____				

B3 Were you were involved in any contested hearing?

☐₁ Yes
☐₂ No (GO TO Q B5) →

B4 At this hearing, which of the following activities did you perform?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"PERFORMED FOLLOWING ACTIVITIES . . ."				
(a) familiarized child with the court process	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) made an opening statement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) called lay witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) called expert witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) cross-examined witnesses	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) subpoenaed records	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) submitted written report into the record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) presented evidence	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) offered a case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) made or filed motions or pleadings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) made disagreements with agency known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) made disagreements with child known to the court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) made a closing statement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(n) other (PLEASE SPECIFY): _____				

B5 At any time since the dispositional hearing, did you attempt to negotiate an agreement or stipulation?

☐₁ Yes
☐₂ No (GO TO Q B10) →

B6 Did the negotiations result in an agreement or stipulation?

☐₁ Yes

☐₂ No

B7 We are interested in the issue(s) that was (were) dealt with by the agreement. From the list below, please indicate whether or not this issue was involved. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ISSUE INVOLVED WAS . . ."				
(a) stipulation of abuse or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) services or treatment for the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) services or treatment for the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) legal guardianship	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY):	_____			

- B8 Besides yourself, which of the individuals mentioned below were involved in the negotiations? (INTERVIEWER: *Read the list of responses below and ask R Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"OTHERS INVOLVED WERE . . ."				
(a) parents' attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) agency's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) child's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) lay volunteer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

- B9 During the negotiations, did you do any of the following activities? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

**THE NEXT FEW QUESTIONS REFER TO THE PROCESS
OF DETERMINING CASE GOALS FOR THE CHILD, AS
WELL AS THE PLACEMENT OF THE CHILD.**

B10 At any time since the review hearing did you form an opinion about what the most desirable and realistic placement situation would be for the child, given the circumstances of the case and available resources?

- ☐₁ Yes
☐₂ No (GO TO Q B15) —————→

B11 In your opinion, what is the most desirable and realistic placement situation for the child? (INTERVIEWER: **Check only one.**)

"BEST PLACEMENT IS . . ."

- ☐₁ keep child in home
☐₂ continue placement with relatives
☐₃ continue placement with non-relatives
☐₄ place in foster home with relatives
☐₅ place in foster home with non-relatives
☐₆ group home
☐₇ independent living
☐₈ residential treatment facility
☐₉ return child to home from placement
☐₁₀ other (PLEASE SPECIFY): _____

B12 At any time since the review hearing did you discuss this idea with any other relevant parties to the case?

- ☐₁ Yes
☐₂ No (GO TO Q B14) —————→

B13 With which of the following individuals did you discuss this idea?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED IDEA WITH . . ."				
(a) caseworker or agency's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) parents' attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) foster parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

B14 At any time since the review hearing, did you make any recommendations to bring about this type of placement situation?

- ☐₁ Yes
☐₂ No

B15 At any time since the review hearing, did you make any recommendations regarding services to the child or family?

- ☐₁ Yes
☐₂ No

B16 At any time since the review hearing, did you make any recommendations regarding visitation between the child and parents?

- ☐₁ Yes
☐₂ No
☐₄ N/A

B17 At any time up through the dispositional hearing, did you disagree with the caseworker about the any of the following issues? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

➡ ➡ IF YES CHECKED FOR ANY ISSUE, ANSWER Q B18—
OTHERWISE GO TO Q B20.

B18 Given these differences, were they resolved between the parties? Indicate whether All, Some, or None were resolved.

- ☐₁ Yes, all (GO TO Q B20) ➡
- ☐₂ Yes, some
- ☐₃ No, none

B19 Of these unresolved differences, did you express any of them to the court?

- ☐₁ Yes
- ☐₂ No


B20 If you made recommendations to the court regarding case goals and placement, provision of services, and/or visitation, did the court adopt any of these recommendations?

- ☐₁ Yes
- ☐₂ No (GO TO Q B22) ➡

B21 In which area(s) did the court adopt your recommendations? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"COURT ADOPTED . . ."				
(a) case goals and placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄


B22 At any time since the review hearing, did you disagree with the child in any way about case goals and placement, the provision of services, or visitation between the child and parent(s)?

- ☐₁ Yes
☐₂ No (GO TO Q24)
☐₃ Not applicable (GO TO Q24) 

B23 If you answered Yes to the question above, which view(s) did you present to the court? Did you present what the child wanted, what you felt was best for the child, or both views to the court?

- ☐₁ child's wishes only
☐₂ my views on child's best interests
☐₃ both views

B24 At any time since the review hearing, did the child talk in court or to the judge?

- ☐₁ Yes
☐₂ No (GO TO Q B29) 

B25 Was the child's testimony presented in courtroom, in chambers or in court without spectators or videotaped or over closed-circuit TV? (INTERVIEWER: ***Check as many responses as applicable.***)

(a) ☐ in courtroom

(b) ☐ in chambers or in court without spectators

(c) ☐ videotaped or over closed-circuit TV

(d) ☐ other (PLEASE SPECIFY): _____

B26 Who requested that this be done: GAL, state attorney, parent's attorney, judge, other? (INTERVIEWER: ***Check as many responses as applicable.***)

(a) ☐ GAL

(b) ☐ agency's attorney

(c) ☐ parents' attorney(s)

(d) ☐ judge

(e) ☐ other (PLEASE SPECIFY): _____

B27 Did you do anything special to help make it easier and more comfortable for the child to speak in court?

☐ Yes

☐ No (GO TO Q B29) →

B28 What types of things did you do to make it easier for the child?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID THE FOLLOWING TO MAKE IT EASIER FOR CHILD . . ."				
(a) moved to have previous testimony admitted	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) moved to have child/parents leave during sensitive testimony	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) rearranged courtroom environment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) objected to questioning of child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) prepared the child to testify and explained the process	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

B29 Looking back over what you have done to advocate for the child's interests in court, would you say that you were successful in expediting the progress of the case through the court system?

☐₁ Yes
☐₂ No (GO TO Q B31) →

B30 What types of things did you do that you feel helped to expedite the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"EXPEDITED CASE BY . . ."				
(a) opposing delays or continuances that I felt worked against the child's interests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) requesting a court hearing sooner than scheduled	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assisting parties to resolve differences out of court	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

B31 Looking back over what you have done to advocate for the child's interests inside and outside court, how forceful or assertive would you assess yourself? (INTERVIEWER: **Check only one.**)

☐₁ Very forceful or assertive (GO TO Q C1) 

☐₂ Somewhat forceful or assertive (GO TO Q C1)

☐₃ Not forceful or assertive at all

B32 If not forceful, why not? (INTERVIEWER: **Check all that apply.**)

(a) ☐₁ little time to investigate

(b) ☐₁ concurred with other party

(c) ☐₁ do not view role as one of active participant

(d) ☐₁ hearings did not require active role

(e) ☐₁ other (PLEASE SPECIFY): _____

**IN THE NEXT FEW QUESTIONS, WE WILL ASK YOU
ABOUT ANY ACTIVITIES YOU MAY HAVE DONE TO
MONITOR THE CASE.**

C1 Since the review hearing, how frequently would you say you contacted the child on matters *other than those dealing with hearings*? (INTERVIEWER: **Check only one.**)

☐₁ Very frequently

☐₂ Somewhat frequently

☐₃ Infrequently

☐₄ Not at all

C2 Since the review hearing, have you contacted any persons or parties on matters *other than those dealing with hearings*?

☐₁ Yes

☐₂ No (GO TO Q C4) 

C3 If you have contacted any persons or parties on matters *other than those* dealing with the hearings, please indicate who you have been in touch with by phone or in person. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"CONTACTED . . ."				
(a) parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) other adults in home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) foster parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) caseworker/foster care worker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) relatives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) CW agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) parent's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) state's attorney	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) medical personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) mental health personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) educational personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) court worker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

C4 Since the review hearing, have you done anything to carry out some aspect of a court order, voluntary agreement, or case plan?

- ☐₁ Yes
☐₂ No

C5 Since the review hearing, have you felt that a change was necessary in any of the following areas of the case? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"CHANGES WERE NECESSARY IN . . ."				
(a) placement of the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) services for the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) services for the parent(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) the hearing schedule	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

➡ ➡ IF YES CHECKED FOR ANY ISSUE, ANSWER Q C6—
OTHERWISE GO TO Q C7.

C6 If you felt that changes were necessary in any of the above, did you do any of the following? (INTERVIEWER: *Check all that apply.*)

- (a) ☐₁ recommended a change to the case plan order
- (b) ☐₁ filed motion or pleadings to obtain changes

C7 Were any changes made in the case plan as a result of your intervention?

- ☐₁ Yes
- ☐₂ No

C8 If the child was living out of the home after the review hearing, did you do anything to encourage or discourage visits or other contacts between the child and parent(s)?

- ☐₁ Yes
- ☐₂ No
- ☐₄ N/A

C9 At any time during this case, did you represent the child in other court actions?

☐₁ Yes

☐₂ No (GO TO Q D1) —————→

C10 In what other type(s) of court actions did you represent the child(ren)?
(INTERVIEWER: **Check all that apply.**)

(a) ☐₁ criminal abuse of the children by the parent

(b) ☐₁ other criminal case involving the child (either as victim
or perpetrator)

(c) ☐₁ custody/visitation

(d) ☐₁ delinquency

(e) ☐₁ voluntary foster care

(f) ☐₁ other (PLEASE SPECIFY): _____

**IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK
YOU ABOUT WHAT YOU DID TO MEDIATE BETWEEN
THE VARIOUS PARTIES.**

➡➡ IF R ANSWERED "NO" TO QUESTION B5, WHETHER
THERE WAS A NEGOTIATED AGREEMENT OR
STIPULATION, SKIP TO QUESTION E1.

D1 During the negotiations that we talked about earlier, how much would you say
you ~~were~~ involved in the negotiations? Would you say you were very involved,
moderately involved, minimally involved, or not involved at all? (INTERVIEWER:
Check only one.)

☐₁ Very involved

☐₂ Moderately involved

☐₃ Minimally involved

☐₄ Not involved at all

D2 During these negotiations, how important would you say your contribution was to the outcome of the negotiations? Would you say you were extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: **Check only one.**)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all

D3 During these negotiations, how effective would you say you were in presenting options and generally advocating for the child's interests? Would you say you were extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations? (INTERVIEWER: **Check only one.**)

- ☐₁ Very effective
- ☐₂ Moderately effective
- ☐₃ Only somewhat effective
- ☐₄ Not effective at all

**THE NEXT FEW QUESTIONS INVOLVE YOUR ACTIVITIES
IN PROVIDING INFORMATION TO VARIOUS PARTIES TO
THE CASE AND IN ADVOCATING FOR SERVICES.**

E1 Since the review hearing, did you provide information about a resource to either the family, the agency or the court which you feel they were unaware of or did not recommend themselves?

- ☐₁ Yes
- ☐₂ No (GO TO Q E3) →

E2 Did this information involve any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative or friend)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) change in circumstances of the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) affected the current placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

E3 Since the review hearing, did you either assist the child or the family directly to obtain any social services or to attempt to make sure that the agency obtained them?

- ☐₁ Yes
☐₂ No (GO TO Q F1) →

E4 If you assisted in any way, did you do any of the following? (INTERVIEWER: *read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY . . ."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting the caseworker or other professional to inform them of the need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting the caseworker or other professional to followup on previous plans	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E5 What types of services did you attempt to obtain, or actually obtain, for the child or family? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

"SERVICES INCLUDED ..."	1 YES	2 NO	3 D/K	4 N/A
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal matters not related to your GAL activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

**IN THE NEXT FEW QUESTIONS WE ASK YOU TO
ASSESS YOUR OVERALL PERFORMANCE AND
EFFECTIVENESS ON THIS CASE.**

F1 If you look over the whole case, I would like you to estimate the percentage of the time you spent dealing with each type of activity.

- (a) _____ investigating and collecting information about the case from written materials and relevant sources
- (b) _____ legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
- (c) _____ negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
- (d) _____ monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
- (e) _____ providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
- (f) _____ other (PLEASE SPECIFY): _____

_____ (NOTE, THEY MUST ADD UP TO 100%)

☐ Don't Know

F2 How effective would you assess yourself in each of the dimensions listed above? For each dimension assess your effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

☐₁ Yes
☐₂ No (GO TO Q F5) →

F4 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F5 Overall, how would you assess your relationship with the child? Was it Good, Poor, or Neither Good nor Poor?

☐₁ Good
☐₂ Poor
☐₃ Neither good nor poor

F6 Overall, how well would you say you were able to coordinate work on the case with the caseworker and child welfare agency? Would you say that you were able to coordinate work very well, somewhat well, or poorly?

- ☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F7 Overall, how well would you say the you were able to share information with the caseworker and child welfare agency? Would you say that you shared information very well, somewhat well, or poorly?

- ☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F8 Was there anything about your relationships with the child, parents, caseworker, volunteer, or other party that prevented you from performing as effectively as you would have liked?

- ☐₁ Yes
☐₂ No (GO TO Q F10) —————→

F9 If you answered yes, please identify the relationship that prevented you from performing as effectively as you would have liked. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID IT INVOLVE COOPERATION WITH THE ..."				
(a) child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) caseworker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) volunteer	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other attorney(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

F10 Was there anything else about the case that prevented you from performing as effectively as you would have liked?

☐₁ Yes

☐₂ No (GO TO CONTROL QUESTION AT THE TOP OF PAGE 31)

F11 If you answered yes, please identify whether any of the following prevented you from performing as effectively as you would have liked. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID IT INVOLVE . . ."				
(a) limits on your time (such as large caseload, conflicting case demands, etc.)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) limited time in which to prepare case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) inadequate compensation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) limited resources with which to prepare or conduct case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) uncertainty about role in case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) complexity of case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) lack of training about child advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) other (PLEASE SPECIFY): _____				

(INTERVIEWER: *If inadequate compensation was checked above, answer Q F12 and Q F13.*)

F12 Did the lack of adequate compensation affect the amount of time you were able to spend on the case?

☐₁ Yes

☐₂ No

F13 Will the lack of adequate compensation affect your continuing to serve as a child's representative in the future?

☐₁ Yes

☐₂ No

CONTROL CHECK: CONTINUE WITH THE QUESTIONNAIRE ONLY IF THERE WAS BOTH AN ATTORNEY AND ANOTHER ATTORNEY, VOLUNTEER, OR SOCIAL WORKER ON THE CASE.

- ☐₂ Two representatives, CONTINUE TO G1 →
☐₁ One representative, STOP!!

G1 At any point during the case, did you have contact (by phone or face-to-face) with the volunteer, social worker, or attorney?

- ☐₁ Yes
☐₂ No (GO TO Q G6) →

G2 In your contacts, did you discuss any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED THE FOLLOWING . . ."				
(a) assessment of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) stipulating abuse or neglect	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) services/treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) legal issues (e.g., hearings)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) other (PLEASE SPECIFY): _____				

G3 Generally, at what points during the case did these contacts take place?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
(a) before or during the adjudication hearing	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) before or during the dispositional hearing	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) during negotiations over a settlement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) before or during a trial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) before or during a review hearings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) between the review hearings	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

G4 If you look over the course of the case, roughly how many times would you say you contacted the attorney/volunteer in person or by phone in an average month?

_____ Times in an average month

G5 If you look at when and how often you had these contacts throughout the case, would you say that they were concentrated around the times of the hearings or were they spread more evenly throughout the case? (INTERVIEWER: *Check all that apply.*)

- (a) ☐₁ concentrated at hearings
- (b) ☐₁ spread more evenly throughout
- (c) ☐₁ other (PLEASE SPECIFY): _____

- G6 In the next four questions, I want you to think about your working relationship with your fellow representative. Please answer these questions on a scale of 1 to 5, with 1 being low or poor, 3 being neutral, and 5 being high or good.

- | | 1 | 2 | 3 | 4 | 5 |
|---|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---|
| (a) How well you shared information and ideas with one another | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅
good |
| (b) How much you depended on the other for advice and recommendations | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅
full |
| (c) The level of coordination in your working relationship | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅
full |

- G7 Are there any aspects of the case on which you disagreed with the attorney/volunteer?

- ☐₁ Yes
☐₂ No (STOP!!)

- G8 Did the disagreement involve any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

- | | 1
YES | 2
NO | 3
D/K | 4
N/A |
|-------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| "DISAGREEMENT INVOLVED . . ." | | | | |
| (a) assessment of the case | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (b) stipulation of abuse or neglect | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (c) placement | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (d) services/treatment | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (e) visitation | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (f) legal issues (e.g., hearings) | <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ |
| (g) other (PLEASE SPECIFY): _____ | | | | |

[IF ALL "NO," STOP]

G9 Given these differences mentioned above, were you able to resolve them?
Please indicate whether you resolved all of them, some of them, or none of them.

- ☐₁ Resolved all
- ☐₂ Resolved some
- ☐₃ Resolved none

STOP, END INTERVIEW

**QUESTIONNAIRE #5
CASEWORKER
(REVIEW CASES ONLY)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

Caseworker Name:
Subject ID#:
Case Record #:
Interviewer ID#:
Completion Date: ___/___/___ 93

Public reporting burden for this collection of information is estimated to average 1 hour per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Reports Clearance Officer
Administration for Children and Families
Department of Health and Human Services
370 L'Enfant Promenade, S.W.
Washington, D.C. 20447

and to:

Office of Management and Budget
Paperwork Reduction Project
OMB Control No. (New Request)
Washington, D.C. 20503

CASEWORKER NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____ / ____ /93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

☐₁ Yes

☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

☐₁ Yes

☐₂ No (GO TO QUESTIONNAIRE #2) →

CTL3 (a) When was this case opened? _____ / _____ / _____

(b) When was the caseworker assigned to case? _____ / _____ / _____

(c) Is the interviewee the original caseworker on the case?

☐₁ Yes (GO TO CTL5) →

☐₂ No

(d) Is there currently more than one caseworker assigned to this case?

☐₁ Yes

☐₂ No

CTL4 Ask R whether she/he has sufficient knowledge of the child's representative to answer questions about his or her activities on the case.

☐₁ Yes

☐₂ No (STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER CASEWORKER WHO COULD PROVIDE THIS INFORMATION):

CTL5 Are there two (2) representatives for the child on this case?

☐₁ Yes (GO TO QUESTIONNAIRE #5-B) →

☐₂ No

BACKGROUND INFORMATION ON THE CASEWORKER

FIRST, WE WOULD LIKE YOU TO ANSWER A FEW GENERAL QUESTIONS ABOUT YOUR BACKGROUND AND CURRENT WORK.

BA1 How many years have you worked as a caseworker in child welfare services?

_____ Years or [_____ Months]

BA2 How large is your current caseload? (INTERVIEWER: *If the R is not currently responsible for the case, ask about caseload during time when the R was the responsible caseworker.*)

_____ Cases

BA3 How many other caseworkers have been assigned to this case since it was opened?

_____ Other caseworkers (*If no other caseworkers, enter zero.*)

☐ Don't know

BA4 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO INVESTIGATE AND PREPARE FOR THE CASE SINCE THE DISPOSITIONAL HEARING.

A1 Since the review hearing, did the GAL investigate or prepare for the case extensively, somewhat, or not at all?

☐₁ Not at all (PLEASE SPECIFY):

(GO TO Q B1) →

☐₂ Extensively
☐₃ Somewhat

A2 Since the dispositional hearing, did you discuss any aspect of the case with the child's representative?

☐₁ Yes
☐₂ No (GO TO Q A4) →

A3 Which of the following did you discuss? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED . . ."				
(a) facts of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) assessment of the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assessment of the family situation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) agency report (CPS)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) case goal	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) placement objectives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) services or treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) legal issues	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) visitations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY):	_____ _____			

A4 Since the review hearing, did the child's representative assess the child's placement needs?

- ☐₁ Yes
☐₂ No (GO TO Q A6) —————→
☐₃ Don't know (GO TO Q A6) —————→

A5 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's placement needs.
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A6 Since the review hearing, did the child's representative assess the child's or family's needs for services?

- ☐₁ Yes
☐₂ No (GO TO Q A8) —————→
☐₃ Don't know (GO TO Q A8) —————→

- A7 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's or family's needs for services. (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of the child or parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) reviewed the agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) other (PLEASE SPECIFY): _____				

- A8 Since the review hearing, did the child's representative assess the child's educational needs?

☐₁ Yes
☐₂ No (GO TO Q A10) —————>
☐₃ Don't know (GO TO Q A10) —————>
☐₄ N/A (GO TO Q A10) —————>

- A9 Please identify to the best of your recollection the types of special activities the child's representative did to assess the child's educational needs.
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with the child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) talked with family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) talked with school personnel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) requested educational tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) other (PLEASE SPECIFY): _____				

- A10 Since the review hearing, did the child's representative undertake any special activities to assess the child's or family's needs for services in any of the following areas? **(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)**

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) mental health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) housing assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) alcohol or drug treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(g) employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(h) parenting skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) other (PLEASE SPECIFY): _____				

A11 Overall, how thorough would you say the child's representative was in investigating and preparing for the case since the review hearing? Would you say she/he was very thorough, somewhat thorough, or not thorough at all? (INTERVIEWER: **Check only one.**)

- ☐₁ Very thorough
☐₂ Somewhat thorough
☐₃ Not thorough

THE NEXT FEW QUESTIONS REFER TO LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS.

B1 At any time since the review hearing, did the child's representative attempt to negotiate an agreement or stipulation?

- ☐₁ Yes
☐₂ No (GO TO Q B3) →
☐₃ Don't know (GO TO Q B3) →

B2 During the negotiations, did the child's representative do any of the following activities? (INTERVIEWER: **Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.**)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

B3 At any time since the review hearing, did you disagree with the child's representative about the any of the following issues? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

IF YES CHECKED FOR ANY ISSUE, ANSWER Q B4—
OTHERWISE GO TO Q B5.

B4 Given these differences, were they resolved between the parties? Please indicate whether all, some, or none of the differences were resolved.

- ☐₁ Yes, all
- ☐₂ Yes, some
- ☐₃ No, none

B5 At any hearing since the review hearing, did the child talk in court or to the judge?

- ☐₁ Yes
- ☐₂ No (GO TO Q B7) →
- ☐₃ Don't know (GO TO Q B7) →

B6 Did the child's representative do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐₁ Yes
- ☐₂ No
- ☐₃ Don't know

B7 Looking back over what you know of what the child's representative did to advocate for the child's interests inside and outside court, how forceful or assertive would you say he or she was? (INTERVIEWER: **Check only one.**)

- ☐₁ Very forceful or assertive (GO TO Q C1)
☐₂ Somewhat forceful or assertive (GO TO Q C1) →
☐₃ Not forceful or assertive at all

B8 If not forceful, why do you think he or she was not? (INTERVIEWER: **Check all that apply.**)

- (a) ☐₁ little time to investigate
(b) ☐₁ concurred with agency
(c) ☐₁ did not view child's representative role as one of being an active participant
(d) ☐₁ hearings did not require active role
(e) ☐₁ other (PLEASE SPECIFY): _____

IN THE NEXT FEW QUESTIONS, WE WILL ASK YOU ABOUT ANY ACTIVITIES THE CHILD'S REPRESENTATIVE MAY HAVE DONE TO MONITOR THE CASE SINCE THE REVIEW HEARING.

C1 Since the review hearing, how frequently would you say the child's representative contacted the child on matters *other than those* dealing with hearings? (INTERVIEWER: **Check only one.**)

- ☐₁ Very frequently
☐₂ Somewhat frequently
☐₃ Infrequently
☐₄ Not at all
☐₅ Don't know

C2 Since the review hearing, have you been contacted by the child's representative on matters *other than those* pertaining to a hearing?

- ☐₁ Yes
☐₂ No

C3 Since the review hearing, has the child's representative done anything to carry out some aspect of a court order, voluntary agreement, or case plan?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

C4 Since the review hearing, were any changes made in any of the following areas as a result of the intervention of the child's representative?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"CHANGES WERE MADE IN . . ."				
(a) placement of the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) services for the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) services for the parent(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) the hearing schedule	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

C5 If the child was living out of the home after the review hearing, did the child's representative do anything to encourage or discourage visits or other contacts between the child and parent(s)?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO MEDIATE BETWEEN THE VARIOUS PARTIES.

IF R ANSWERED "NO" OR "DON'T KNOW" TO QUESTION B1, WHETHER THERE WAS A NEGOTIATED AGREEMENT OR STIPULATION SINCE THE REVIEW HEARING, SKIP TO QUESTION E1.

- D1 During the negotiations that we talked about earlier, how much would you say the child's representative was involved in the negotiations? Would you say she/he was very involved, moderately involved, minimally involved, or not involved at all. (INTERVIEWER: *Check only one.*)

- ☐₁ Very involved
- ☐₂ Moderately involved
- ☐₃ Minimally involved
- ☐₄ Not involved at all
- ☐₅ Don't know

- D2 During these negotiations, how important would you say the child's representative's contribution was to the outcome of the negotiations? Would you say she/he was extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all
- ☐₅ Don't know

- D3 During these negotiations, how effective would you say the child's representative was in presenting options and generally advocating for the child's interests? Would you say she/he was extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very effective
- ☐₂ Moderately effective
- ☐₃ Only somewhat effective
- ☐₄ Not effective at all
- ☐₅ Don't know

THE NEXT FEW QUESTIONS INVOLVE THE CHILD'S REPRESENTATIVE'S ACTIVITIES IN PROVIDING INFORMATION TO VARIOUS PARTIES TO THE CASE AND IN ADVOCATING FOR SERVICES.

E1 At any time since the review hearing, did the child's representative provide information about a resource to either the agency, the court, or the family which you feel you were unaware of or did not recommend yourself?

- ☐₁ Yes
☐₂ No (GO TO Q E4) →

E2 Did this information involve any of the following aspects of the case?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative or friend)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) change in circumstances of the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E3 Did you consider this information useful to help the child or family?

- ☐₁ Yes
☐₂ No (PLEASE SPECIFY): _____

- E4 At any time since the review hearing, did the child's representative either assist the child or the family to obtain any social services or to attempt to make sure that the agency obtained them?

☐₁ Yes
☐₂ No (GO TO Q F1)
☐₃ Don't know (GO TO Q F1) ➔

- E5 If the child's representative assisted in any way, did she/he do any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY . . ."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting social worker or other professional to inform of need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting social worker or other professional to followup on previous plans	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E6 What types of services did the GAL attempt to obtain, or actually obtain, for the child or family? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"SERVICES INCLUDED . . ."				
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal matters not related to GAL activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

**IN THE NEXT FEW QUESTIONS WE ASK YOU TO
ASSESS THE CHILD'S REPRESENTATIVE'S OVERALL
PERFORMANCE AND EFFECTIVENESS ON THIS CASE.**

F1 I would like you to think about and estimate the percentage of the time you feel a child's representative should spend dealing with the following types of activities, assuming an average case. **(INTERVIEWER: If R is uncertain about answering this, code as "Don't Know.")**

- (a) _____ investigating and collecting information about the case from written materials and relevant sources
- (b) _____ legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
- (c) _____ negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
- (d) _____ monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
- (e) _____ providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
- (f) _____ other (PLEASE SPECIFY): _____

_____ (NOTE, THEY MUST ADD UP TO 100%)

OR

☐ Don't know

F2 If you were to assess the child's representative's activities on this case, how effective would you say she/he was in each of the dimensions listed above? For each dimension assess his/her effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

- ☐₁ Yes
☐₂ No (GO TO Q F5) →

F4 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

F5 Overall, how well would you say the child's representative coordinated work with you on the case? Would you say that she/he coordinated work very well, somewhat well, or poorly?

- ☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F6 Overall, how well would you say the child's representative shared information with you and the agency? Would you say that she/he shared information very well, somewhat well, or poorly?

- ☐₁ Very well
- ☐₂ Somewhat well
- ☐₃ Poorly

**QUESTIONNAIRE #5-B
CASEWORKER
(REVIEW CASES ONLY)
(DUAL REPRESENTATIVES)**

Conducted by:

CSR, INCORPORATED
1400 Eye Street, N.W.
Washington, DC 20005

For:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children, Youth and Families

I want to assure you that everything we talk about today is completely confidential. Nothing you say will be discussed with any agency or anyone else. What you say will be anonymous. Your name will not be used in any way in reporting the results of the study.

Your participation is entirely voluntary. You are free to answer or not answer any or all of the questions I will be asking. You can end the interview at any time.

Caseworker Name:
Subject ID#:
Case Record #:
Interviewer ID#:
Completion Date: ____ / ____ / 93

CASEWORKER NAME: _____
SUBJECT ID#: _____
INTERVIEWER ID#: _____
DATE: ____ / ____ /93

CONTROL INFORMATION

INTERVIEWER: Attempt to answer these questions prior to the interview. If unable to complete all questions, ask respondent to complete.

CTL1 Has this case been adjudicated?

- ☐₁ Yes
☐₂ No (STOP INTERVIEW, THANK RESPONDENT FOR TIME)

CTL2 Has this case had a review hearing?

- ☐₁ Yes
☐₂ No (GO TO QUESTIONNAIRE #2) →

CTL3 (a) When was this case opened? ____ / ____ / ____

(b) When was the caseworker assigned to case? ____ / ____ / ____

(c) Is the interviewee the original caseworker on the case?

- ☐₁ Yes (GO TO CTL5) →
☐₂ No

(d) Is there currently more than one caseworker assigned to this case?

- ☐₁ Yes
☐₂ No

CTL4 Ask R whether she/he has sufficient knowledge of the child's representatives to answer questions about their activities on the case.

☐₁ Yes

☐₂ No (STOP INTERVIEW, BUT ASK RESPONDENT TO PROVIDE THE NAME OF ANOTHER CASEWORKER WHO COULD PROVIDE THIS INFORMATION):

CTL5 Are there two (2) representatives for the child on this case?

☐₁ Yes

☐₂ No (GO TO QUESTIONNAIRE #5) →

BACKGROUND INFORMATION ON THE CASEWORKER

FIRST, WE WOULD LIKE YOU TO ANSWER A FEW GENERAL QUESTIONS ABOUT YOUR BACKGROUND AND CURRENT WORK.

BA1 How many years have you worked as a caseworker in child welfare services?

_____ Years or [_____ Months]

BA2 How large is your current caseload? (INTERVIEWER: *If the R is not currently responsible for the case, ask about caseload during time when the R was the responsible caseworker.*)

_____ Cases

BA3 How many other caseworkers have been assigned to this case since it was opened?

_____ Other caseworkers (*If no other caseworkers, enter zero.*)

☐ Don't know

BA4 On average, how many hours per week do you spend on this particular case?

_____ Hours per week

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO INVESTIGATE AND PREPARE FOR THE CASE SINCE THE DISPOSITIONAL HEARING.

A1 Since the review hearing, were there any circumstances where the child's representative(s) did *not* investigate or prepare for the case?

☐₁ Yes (PLEASE SPECIFY):

(GO TO Q B1) →

☐₂ No

A2 Since the review hearing, did you discuss any aspect of the case with either or both of the child's representatives?

☐₁ Yes

☐₂ No (GO TO Q A4) →

A3 Which of the following did you discuss? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DISCUSSED . . ."				
(a) facts of the case	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) assessment of the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) assessment of the family situation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) agency report (CPS)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) case goal	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) permanent placement objectives	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) services or treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) legal issues	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) visitations	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) other (PLEASE SPECIFY):	_____ _____			

A4 Since the review hearing, did the child's representative(s) assess the child's placement needs.

- ☐₁ Yes
☐₂ No (GO TO Q A6)
☐₃ Don't know (GO TO Q A6)



A5 Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's placement needs.
 (INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the social worker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visited the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visited the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requested an evaluation of a child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) requested an evaluation of the parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) observed the interaction between the parent and child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A6 Since the review hearing, did the child's representative(s) assess the child's or family's needs for services?

- ☐₁ Yes
☐₂ No (GO TO Q A8)
☐₃ Don't know (GO TO Q A8)



A7 Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's or family's needs for services. **(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)**

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with family members or other adults	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) met or spoke with the caseworker or other professionals	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) visiting the foster home or shelter	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) visiting the parent's home	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) requesting an evaluation of the child or parents	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) reviewing the agency record	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) other (PLEASE SPECIFY): _____				

A8 Since the review hearing, did the child's representative(s) assess the child's educational needs?

- ☐₁ Yes
☐₂ No (GO TO Q A10)
☐₃ Don't know (GO TO Q A10)
☐₄ N/A (GO TO Q A10)



A9

Please identify to the best of your recollection the types of special activities the child's representative(s) did to assess the child's educational needs.
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES WERE . . ."				
(a) talked with the child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) talked with family members	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) talked with school personnel	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) requested educational tests	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

A10 Since the review hearing, did the child's representative(s) undertake any special activities to assess the child's or family's needs for services in any of the following areas? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)


	1 YES	2 NO	3 D/K	4 N/A
"SPECIAL ACTIVITIES IN AREA OF . . ."				
(a) health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) mental health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) alcohol or drug treatment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) parenting skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) other (PLEASE SPECIFY): _____				

A11 Overall, how thorough would you say the child's representative(s) were in investigating and preparing for the case since the review hearing? Would you say they were very thorough, somewhat thorough, or not thorough at all? (INTERVIEWER: *Check only one.*)

- ☐₁ Very thorough
☐₂ Somewhat thorough
☐₃ Not thorough

THE NEXT FEW QUESTIONS REFER TO LEGAL AND OTHER ACTIVITIES PERTAINING TO THE VARIOUS HEARINGS.

B1 Since the review hearing, did the child's representative(s) attempt to negotiate an agreement or stipulation?

- ☐₁ Yes
☐₂ No (GO TO Q B3)
☐₃ Don't know (GO TO Q B3) 
☐₄ N/A (GO TO Q B3)

B2 During the negotiations, did the child's representative(s) do any of the following activities? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"DID FOLLOWING ACTIVITIES . . ."				
(a) attempted to bring the different parties together	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) highlighted the common goals of the parties	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) encouraged the parties to negotiate	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) suggested options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) drafted a written agreement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

- B3 At any time since the review hearing, did you disagree with the child's representative(s) about the any of the following issues? **(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)**

	1 YES	2 NO	3 D/K	4 N/A
"DISAGREED ABOUT . . ."				
(a) child's placement	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) provision of services to child or parent	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) visitation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) other (PLEASE SPECIFY): _____				

IF YES CHECKED FOR ANY ISSUE, ANSWER Q B4—
OTHERWISE GO TO Q B5.

- B4 Given these differences, were they resolved between the parties? Please indicate whether all, some, or none of the differences were resolved.

- ☐₁ Yes, all
☐₂ Yes, some
☐₃ No, none

- B5 At any hearing since the review hearing, did the child talk in court or to the judge?


- ☐₁ Yes
☐₂ No (GO TO Q B7)
☐₃ Don't know (GO TO Q B7)
☐₄ N/A (GO TO Q B7)



- B6 Did the child's representative(s) do anything special to help make it easier and more comfortable for the child to speak in court?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

B7 Looking back over what you know the child's representative(s) did to advocate for the child's interests inside and outside court, how forceful or assertive would you say they were? (INTERVIEWER: **Check only one.**)

- ☐₁ Very forceful or assertive (GO TO Q C1) 
☐₂ Somewhat forceful or assertive (GO TO Q C1)
☐₃ Not forceful or assertive at all

B8 If not forceful, why do you think they were not? (INTERVIEWER: **Check all that apply.**)

- (a) ☐₁ little time to investigate
(b) ☐₁ concurred with agency
(c) ☐₁ did not view child's representative [either attorney or volunteer] role as one of being an active participant
(d) ☐₁ hearings did not require active role
(e) ☐₁ other (PLEASE SPECIFY): _____

IN THE NEXT FEW QUESTIONS, WE WILL ASK YOU ABOUT ANY ACTIVITIES THE CHILD'S REPRESENTATIVE MAY HAVE DONE TO MONITOR THE CASE SINCE THE DISPOSITIONAL HEARING.

C1 Since the review hearing, how frequently would you say the child's representative(s) contacted the child on matters *other than those* dealing with hearings? (INTERVIEWER: **Check only one.**)

- ☐₁ Very frequently
☐₂ Somewhat frequently
☐₃ Infrequently
☐₄ Not at all
☐₅ don't know

C2 Since the review hearing, have you been contacted by the child's representative(s) on any matters *other than those* dealing with hearings?

- ☐₁ Yes
☐₂ No

C3 Since the review hearing, has the child's representative(s) done anything to carry out some aspect of a court order, voluntary agreement, or case plan?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

C4 Since the review hearing, were any changes made in any of the following areas as a result of the intervention of the child's representative(s)?
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"CHANGES WERE MADE IN . . ."				
(a) placement of the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) services for the child(ren)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) services for the parent(s)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) the hearing schedule	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) other (PLEASE SPECIFY): _____				

C5 If the child was living out of the home after the review hearing, did the child's representative(s) do anything to encourage or discourage visits or other contacts between the child and parent(s)?

- ☐₁ Yes
☐₂ No
☐₃ Don't know

IN THE NEXT FEW QUESTIONS WE ARE GOING TO ASK YOU ABOUT WHAT THE CHILD'S REPRESENTATIVE DID TO MEDIATE BETWEEN THE VARIOUS PARTIES.

IF R ANSWERED "NO" OR "DON'T KNOW" TO QUESTION B1, WHETHER THERE WAS A NEGOTIATED AGREEMENT OR STIPULATION SINCE THE DISPOSITIONAL HEARING, SKIP TO QUESTION E1.

D1 During the negotiations that we talked about earlier, how much would you say the child's representatives were involved in the negotiations? Would you say they were very involved, moderately involved, minimally involved, or not involved at all? (INTERVIEWER: *Check only one.*)

- ☐₁ Very involved
- ☐₂ Moderately involved
- ☐₃ Minimally involved
- ☐₄ Not involved at all
- ☐₅ Don't know

D2 During these negotiations, how important would you say the child's representative's contributions were to the outcome of the negotiations? Would you say they were extremely important, moderately important, only somewhat important, or not important at all to the outcome of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very important
- ☐₂ Moderately important
- ☐₃ Only somewhat important
- ☐₄ Not important at all
- ☐₅ Don't know

D3 During these negotiations, how effective would you say the child's representatives were in presenting options and generally advocating for the child's interests? Would you say they were extremely effective, moderately effective, only somewhat effective, or not effective at all to the success of the negotiations? (INTERVIEWER: *Check only one.*)

- ☐₁ Very effective
 - ☐₂ Moderately effective
 - ☐₃ Only somewhat effective
 - ☐₄ Not effective at all
 - ☐₅ Don't know
-
-

**THE NEXT FEW QUESTIONS INVOLVE THE CHILD'S
REPRESENTATIVE'S ACTIVITIES IN PROVIDING
INFORMATION TO VARIOUS PARTIES TO THE CASE
AND IN ADVOCATING FOR SERVICES.**

E1 At any time since the review hearing, did the child's representative(s) provide information about a resource to either the agency, the court, or the family which you feel you were unaware of or did not recommend yourself?

☐₁ Yes

☐₂ No (GO TO Q E4) —————→

E2 Did this information involve any of the following aspects of the case?
 (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"INFO INVOLVED . . ."				
(a) availability of services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) availability of resources (such as a relative)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) adjustment or circumstances in the family or child	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) case plan	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) placement options	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

E3 Did you consider this information useful to help the child or family?

☐₁ Yes
☐₂ No (PLEASE SPECIFY): _____

E4 At any time since the review hearing, did the child's representative(s) either assist the child or the family to obtain any social or other services or to attempt to make sure that the agency obtained them?

☐₁ Yes
☐₂ No (GO TO Q F1)
☐₃ Don't know (GO TO Q F1)

➡

E5 If the child's representative(s) assisted in any way, did either or both do any of the following? (INTERVIEWER: *Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.*)

	1 YES	2 NO	3 D/K	4 N/A
"ASSISTED BY . . ."				
(a) giving information about resources to the child or family by phone or in person	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) discussing case and directly arranging a referral or services with another agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) directly escorting client to agency	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) contacting caseworker or other professional to inform of need	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) contacting caseworker or other professional to followup on previous plans	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) other (PLEASE SPECIFY): _____				

- E6 What types of services were involved? From the following list, please indicate those the child's representative(s) helped the child or family to obtain.
(INTERVIEWER: Read the list of responses below and ask R to answer Yes, No, Don't Know, or Not Applicable.)

	1 YES	2 NO	3 D/K	4 N/A
"SERVICES INCLUDED . . ."				
(a) psychological therapy/counseling	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(b) physical health	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(c) legal matters not related to GAL activities	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(d) educational or vocational training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(e) housing assistance	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(f) financial	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(g) homemaker services	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(h) child care	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(i) employment	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(j) transportation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(k) alcohol/drug abuse	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(l) parenting classes	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
(m) other (PLEASE SPECIFY): _____				

IN THE NEXT FEW QUESTIONS WE ASK YOU TO ASSESS THE CHILD'S REPRESENTATIVE'S OVERALL PERFORMANCE AND EFFECTIVENESS ON THIS CASE.

F1 I would like you to think about and estimate the percentage of the time you feel a child's representative(s) should spend dealing with the following types of activities, assuming an average case. (INTERVIEWER: *If R is uncertain about answering this, code as "Don't Know."*)

- (a) _____ investigating and collecting information about the case from written materials and relevant sources
- (b) _____ legal representation, involving attending hearings, filing motions, plans and exhibits, counseling the client, and other legal matters
- (c) _____ negotiating with the various parties in between and prior to hearings in order to discuss issues and options and to arrive at agreements
- (d) _____ monitoring and follow-up such as checking on compliance with court orders and voluntary agreements between hearings, following up on agency and court activity, and maintaining regular contacts with the child, family, and foster family
- (e) _____ providing information about possible resource persons or support services to other parties and advocating for resources for the child and family
- (f) _____ other (PLEASE SPECIFY): _____

_____ (NOTE, THEY MUST ADD UP TO 100%)

OR

☐ Don't know

- F2 If you were to assess the child's representative's activities on this case, how effective would you say they were in each of the dimensions listed below? For each dimension assess their effectiveness on a scale of 1 to 3, with 1 being Ineffective, 2 being Somewhat Effective, and 3 being Very Effective.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) investigation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) legal representation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) negotiation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(d) monitoring/followup	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(e) resource information and advocacy	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

- F3 Are there any *other* major types of activities you feel are worth mentioning and assessing?

☐₁ Yes
☐₂ No (GO TO Q F5) —————→

- F4 If yes, please identify and assess them on the same scale of 1 to 3.

	1 Ineffective	2 Somewhat Effective	3 Very Effective
(a) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(b) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
(c) _____	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

- F5 Overall, how well would you say the child's representative(s) coordinated work with you on the case? Would you say that they coordinated work very well, somewhat well, or poorly?

☐₁ Very well
☐₂ Somewhat well
☐₃ Poorly

F6 Overall, how well would you say the child's representative(s) shared information with you and the agency? Would you say that they shared information very well, somewhat well, or poorly?

- ☐₁ Very well
- ☐₂ Somewhat well
- ☐₃ Poorly



**IF ONE OF THE CHILD'S REPRESENTATIVES IS NOT AN ATTORNEY,
STOP INTERVIEW.**

F7 Overall, with which of the two child's representatives did you have the most contact with during the case? Would you say you had more contact:

- ☐₁ With the attorney
- ☐₂ With the volunteer
- ☐₃ Same with each
- ☐₄ Other _____

F8 Overall, with which of the two child's representatives were you best able to coordinate your work on the case? Would you say you were best able to coordinate:

- ☐₁ With the attorney
- ☐₂ With the volunteer
- ☐₃ Same with each
- ☐₄ Other _____

CASE RECORD EXTRACTION FORM

**VALIDATION AND EFFECTIVENESS STUDY
OF LEGAL REPRESENTATION THROUGH
GUARDIAN AD LITEM**

Conducted by:

CSR, INCORPORATED
1400 Eye St., N.W.
Suite 600
Washington, D.C. 20005

for the:

**U.S. DEPARTMENT
OF HEALTH AND HUMAN SERVICES**
Administration for Children and Families
Washington, D.C. 20201

CONTROL INFORMATION

GAL ID# _ _ _ _ _

SUBJECT ID# _ _ _ _ _

SITE _____

Child/Family Name: _____

or

Case Record Number: _____

Caseworker Name: _____

Reviewer Name: _____

or

Reviewer ID#: _ _ _

Review Date: ____/____/1993

NOTE: *When selecting the child on which to obtain data, use the following selection method:*

- (1) use the **named child** listed in the petition, if only one name is listed

OR

- (2) if more than one child is listed, randomly select one child from those listed in the petition.

SUBJECT ID#: _____	REVIEWER NAME: _____	DATE: ____/____/93
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Cannot
Determine

1	Date of Birth	____/____/____	<input type="checkbox"/>
2	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/>
3	Race/Ethnicity	<input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black, not of Hispanic origin <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Multiracial	<input type="checkbox"/>
4	Date Initial Petition Filed	____/____/____	<input type="checkbox"/>
5	Number of Children Identified in the Case Record	_____ (fill in number)	<input type="checkbox"/>
6	Were the allegations contested in court?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
7	Was the child placed in any of the following? (NOTE: We are trying to determine whether the child is/was damaged and placed in a facility, over and above one associated with ordinary care.)	Hospital <input type="checkbox"/> Yes <input type="checkbox"/> No Residential <input type="checkbox"/> Yes <input type="checkbox"/> No Treatment Facility Other <input type="checkbox"/> Yes <input type="checkbox"/> No Institution (e.g., emergency foster care)	<input type="checkbox"/> <input type="checkbox"/>
8	Is/was there a criminal case associated with this case against the caretaker?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>
9	Type of abuse/neglect sustained (Check all that apply)	<input type="checkbox"/> Physical abuse <input type="checkbox"/> Sexual abuse <input type="checkbox"/> Neglect	<input type="checkbox"/>

(NOTE: For questions 10 and 11, use the following codes for the type of placement:

TYPE OF PLACEMENT	PLACEMENT WITH SIBLINGS
1 — Original home with a custodial parent	(NOTE: Complete only if siblings indicated in question #6.)
2 — Other home, with a non-custodial parent	
3 — Foster home, with a relative	
4 — Foster home, with a non-relative	
5 — Group home/Shelter	
6 — Hospital/Institution/Facility	1 — NO
7 — Independent living	2 — YES, with all
8 — Preadoptive home	3 — YES, but not with all
9 — Adoptive home	00 — Cannot determine
00 — Cannot determine	

10. In what type of setting is the child currently placed? _____

When did s/he enter this placement? ____/____/____

11. List in chronological order the placement history of the child. (*Start from the first placement and list all placements up to the current placement.*)

[illegible]

12. Do any of the following evaluations and/or records appear in the case record? (Check only those that are present.)

Type	Evaluations	Records
• School/educational	<input type="checkbox"/>	<input type="checkbox"/>
• Medical/physical health	<input type="checkbox"/>	<input type="checkbox"/>
• Mental health	<input type="checkbox"/>	<input type="checkbox"/>
• Alcohol or other drug	<input type="checkbox"/>	<input type="checkbox"/>
• Police		<input type="checkbox"/>
• Child protective services		<input type="checkbox"/>
• Foster care		<input type="checkbox"/>

(NOTE: For questions 14 and 15 use the following codes to indicate the disposition or placement goal for the child.)

Goal Codes	
1 —	Remain home - no services or monitoring
2 —	Remain home - with services and/or monitoring
3 —	Return home - no services or monitoring
4 —	Return home - with services and/or monitoring
5 —	Long-term foster care
6 —	Emancipation
7 —	Guardianship
8 —	Termination of parental rights
9 —	Adoption
10 —	Other: _____
00 —	Cannot determine

13. According to the agency case plan, what was the original case goal regarding final disposition or placement of the child? _____

14. If there have been any changes in the case goal since the original case plan, please indicate below. (NOTE: If there was a goal change, indicate the new goal(s), the date(s) the goal(s) was changed, and the reason for the change.)

☐ — If no change in case goal, check here.

Goal	Date of Goal Change	Reason for Change
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____
_____	____/____/____	_____

15. Have any of the following services been recommended by either the agency or the court for the child/parent(s) and have these services been provided?

Service	Recommended or ordered by agency or court			Actually received		
• Family counseling	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Inhome family preservation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Parenting classes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Medical/health	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Alcohol/other drug treatment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Homemaker	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Child care	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Employment	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Financial assistance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Legal assistance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Housing assistance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Transportation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Legal assistance	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Educational	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Vocational	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?
• Other: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> ?