



Lessons from the Field

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Determining Youth and Young Adult Eligibility for Services: Grantee Tools and Processes

The Children's Bureau, within the Administration for Children and Families (U.S. Department of Health and Human Services), is funding a multiphase grant program to build the evidence base on what works to prevent homelessness among youth and young adults who have been involved in the child welfare system. This program is called Youth At-Risk of Homelessness (YARH). YARH focuses on three populations: (1) adolescents who enter foster care from ages 14 to 17, (2) young adults aging out of foster care, and (3) homeless youth and young adults up to age 21 with foster care histories.

Eighteen organizations received funding for the first phase (YARH-1), a two-year planning grant (2013–2015). Grantees used the planning period to conduct data analyses to help them understand their local population and develop a comprehensive service model to improve youth outcomes related to housing, education and employment, social-emotional well-being, and permanent connections. Six of those organizations received funding to refine and test their comprehensive service models during the second phase (YARH-2), a four-year initial implementation grant (2015–2019). During the third phase (YARH-3), Mathematica is continuing to support the YARH-2 grantees (also known as sites) in building and disseminating evidence related to grantees' comprehensive service models. In addition, Mathematica designed and is implementing a federally-led summative evaluation of Colorado's Pathways to Success comprehensive service model.

This brief describes the processes and tools the six YARH-2 grantees used to assess eligibility among youth and young adults for participation in their comprehensive service models, as described in grantees' YARH manuals. Additional details are available in the YARH-2 process report, available at <https://www.acf.hhs.gov/opre/report/reducing-homelessness-among-youth-child-welfare-involvement-phase-ii-implementation>.

For more information on YARH, please see <https://www.acf.hhs.gov/opre/project/building-capacity-evaluate-interventions-youth/young-adults-child-welfare-involvement>.

During the first two phases of YARH, grantees developed and implemented tools and processes to:

1. Identify youth and young adults who have been involved in the child welfare system; and
2. Screen them for eligibility for the grantee's comprehensive service model designed to prevent homelessness among this population.

Some grantees use referrals and questionnaires to identify and screen¹ potentially eligible youth and young adults. Others rely on administrative data sources. This brief describes the identification and screening processes implemented by YARH-2 grantees in more detail.

¹ Each grantee uses different language (screen, assess, etc.) to describe the tools and processes they've designed for determining youth and young adult eligibility for their comprehensive service model. We use "screening" to refer to this process generally and defer to the language each grantee uses in its YARH manual in the grantee sections below.

Alameda County



Alameda County's Youth

Transition Partnership (YTP) program serves youth and young adults who are ages 14 to 20, have multiple risk factors for homelessness, and are placed in out-of-home care in Alameda County.

Each month, evaluation staff at the social service agency compile a list of potentially eligible youth and young adults currently in foster care in Alameda County using an administrative risk assessment. This assessment screens for several homelessness risk factors, including age of entry into care, time in care, placement instability, mental health indicators, placement in congregate care, and youth and young adults who are parenting or pregnant (Appendix A).

Each risk factor is scored as +1 if it is present in the youth or young adult's history, as documented by YTP's administrative database. Youth and young adults placed in Transitional Housing Placement-Plus-Foster Care receive a protective factor score of -1.25 because these youth and young adults already receive some form of intensive case management services. To be eligible for YTP, youth and young adults must have a score of at least +2. Evaluation staff then share this list of eligible youth and young adults with the enrollment specialist.

Colorado



Colorado's Pathways to Success focuses on preventing

homelessness among youth and young adults ages 14 to 21 who are currently in or transitioning out of foster care. Additionally, the program serves young adults up to age 23 who were enrolled in Pathways before turning 21 and who are either homeless or at risk of homelessness.

Potentially eligible youth and young adults are identified by a county child welfare caseworker, a runaway and homeless youth case manager, referrals from other service providers that work with the primary population, or a review of administrative records.

Youth and young adults identified as potentially Pathways-eligible must complete the Pathways screening assessment which is informed by research on homelessness among Colorado foster youth and young adults. The assessment adapts questions from the research-based Transition-Age Youth triage tool developed by Dr. Eric Rice and Angela Rosales to identify



youth and young adults most at risk of chronic homelessness. It also incorporates trafficking questions from the Vera Institute of Human Trafficking.

The screening assessment consists of 12 yes-or-no questions that ask youth and young adults about homelessness risk factors such as parental incarceration and foster care history; involvement in the foster care system; use of marijuana; factors that can contribute to running away, such as conflict or abuse in the home; pregnancy; and human trafficking (Appendix B). Pathways enrolls youth and young adults into the program who have a minimum of one identified risk factor; however, staff can adjust the threshold for program eligibility to moderate the flow of youth and young adults into the program and control caseload size.

The screening assessment is administered in person or over the phone by a Navigator (case worker), a service partner, or the referring child welfare worker. No special training is needed for using the tool.

Lighthouse Youth & Family Services



The Lighthouse Youth & Family Services comprehensive service model, Watch Me Rise (WMR), focuses on enrolling clients ages 18 to 24 who enter the Lighthouse Sheakley Center for Youth and are either: (1) a resident of the Lighthouse shelter, (2) in contact with Hamilton County Job & Family Services Aftercare program and experiencing homelessness, or (3) currently accessing the day program or services at the Lighthouse shelter.

Young adults are screened for WMR eligibility during shelter intake. Staff ask, "Are you currently or formerly the responsibility of child welfare or foster care?" Lighthouse clients are eligible for WMR if they respond affirmatively. Clients might also be eligible if they disclose their child welfare history to shelter staff after intake or if staff from Hamilton County Job & Family Services Aftercare know the young adult's child welfare history.

Homeless young adults are not eligible if they do not use the Lighthouse shelter or day program, are not referred by the Hamilton County Job & Family Services Aftercare program, or are not conversationally fluent in English.

New Jersey



New Jersey's Connect

to Home (CTH) intervention serves young adults, age 18 and

older, who are aging out of the child welfare system and demonstrate high needs. Young adults must be (1) currently or formerly in foster care and (2) homeless or at risk of homelessness.

Child welfare workers or advocates within the community can refer young adults to the CTH program. More often, however, an early warning system (EWS) identifies young adults as potentially eligible. The EWS uses information on foster care and behavioral health experience to predict a potential risk for homelessness among young adults. The system assigns each young adult a risk score of -3 to 9, based on the number of risk and protective factors attributable to their experiences, with higher numbers indicating greater risk of homelessness. Appendix C lists risk and protective factors considered in the EWS.

Young adults must score 3 or higher on the EWS to be considered for CTH. In addition, young adults must be:

1. **Between ages 18 and 20 at referral**, although young adults older than 20 receive priority because of their limited remaining eligibility in the child welfare system. Youth in New Jersey are not eligible for child welfare services beyond age 21 but may receive CTH services after age 21.
2. **Homeless or at risk of homelessness**. Youth must meet one of four “Determining Homeless Status of Youth” categories developed by the U.S. Department of Housing and Urban Development: (1) literally homeless, (2) imminent risk of homelessness, (3) homeless under other federal status, and (4) fleeing domestic violence. Young adults are prioritized for CTH according to their category.
3. **High need**. Young adults must have at least one of four qualifying high needs: (1) a history of mental health challenges, (2) a history of substance use disorder, (3) a history of juvenile detaining or an arrest history, or (4) pregnancy or parenting.

Young adults meeting the four requirements (score of 3 or higher on the EWS in addition to meeting the above three requirements) are referred to CTH and begin the consent process.

University of Maryland



All youth and young adults who are between the ages of 14 to 21 and in an out-of-home placement are eligible for the University of Maryland’s Enhanced-Youth Transition Planning (E-YTP) intervention.

Youth and young adults are screened using the Risk Screen, a tool developed to assess the potential risk of well-being and homelessness or housing instability after youth and young adults ages 14 to 21 exit child welfare. The tool was developed with input from transition-age foster youth and builds upon existing risk screen tools used with populations experiencing homelessness or housing instability.

The Risk Screen consists of 20 items that are broken into three subsections: youth child welfare experience (seven items), youth current functioning (eight items), and child welfare worker opinion (five items) (Appendix D). Scoring for the Risk Screen includes considerations for age and permanency plan and yields scoring classifications as low risk, medium risk, or high risk. Additionally, the Risk Screen yields a total score and a score for each subsection.

The youth or young adult’s assigned child welfare worker completes the Risk Screen biannually and uses it for transition planning. The Risk Screen, if needed, can also be used for prioritizing youth and young adults for the intervention when all youth and young adults cannot be served. For example, if caseload sizes exceed 10 transition age youth, youth and young adults who score high (between 11 and 24) on the Risk Screen will be prioritized for participation in the E-YTP intervention.

Westchester County



The Westchester County Bravelife (BLI) intervention serves system-connected youth, defined as youth and young adults who have a formal connection to the Westchester County Department of Social Services system in the form of a caseworker, regardless of age or status of their child welfare case. BLI also serves nonsystem-connected youth, defined as youth and young adults who are no longer formally connected to the system and might or might not be homeless. Nonsystem-connected youth must currently consider Westchester County as home to be eligible for BLI participation.

Westchester County Department of Social Services case managers, agency case planners, and aftercare workers refer and recruit system-connected eligible youth. Nonsystem-connected eligible youth are referred through more informal, unstructured means. Sometimes referrals are through word-of-mouth from youth and young adults who are already involved in the program or through BLI presentations to youth and young adults at visits to homeless shelters.

Once identified, potentially eligible youth and young adults complete the 15-item Westchester Building Futures screening

instrument (Appendix E). Some examples of the screening questions are “Have you ever been ‘couch surfing’ for a place to stay?,” “Have you ever abused alcohol or other substances?,” and “Do you have an adult in your life who you can trust?”

Youth and young adults with a score of 3 or higher on the screening instrument or those who are currently homeless are considered at risk and eligible for BLI. Youth and young adults who are homeless still complete the Westchester Building Futures screening as part of the baseline questionnaire.

Additional Resources:

Alameda County

Packard Tucker, L., A. Dworky, and M. Van Drunen.

“Alameda County’s Youth Transitions Partnership Program: Project Brief.” Chicago, IL: Chapin Hall at the University of Chicago, May 2020. Available at https://www.homelesshub.ca/sites/default/files/attachments/Alameda-County-Brief_Final.pdf.

Colorado

Davis, L., and S. Matyasic. “Colorado Pathways to Success Intervention Manual September 2019.” Denver, CO: Center for Policy Research, September 2019. Available at https://centerforpolicyresearch.org/wp-content/uploads/Pathways_Intervention_Manual_Final_September2019_withAppendix.docx-1.pdf.

Lighthouse Youth & Family Services

Dickerscheid, R., C. Houchin, R. Lindquist-Grantz, and K. Downing. “Using Wraparound with Homeless Youth Who Have a Child Welfare History: Lessons from the Field.” Cincinnati, OH: Lighthouse Youth & Family Services, May 2020. Available at https://library.childwelfare.gov/cwig/ws/library/docs/gateway/Blob/137936.pdf?r=1&rpp=25&upp=0&w=NATIVE%28%27SIMPLE_SRCH+ph+is+%27%27Using+Wraparound+with+Homeless+Youth+Who+Have+a+Child+Welfare+History%3A+Lessons+from+the+Field.%27%27%27%29&m=1&order=native%28%27year%2FDescend%27%29.

Lindquist-Grantz, R., K. Downing, C. Houchin, and V. Ackman. “It Begins at ‘Hello’: Lessons Learned from Enrolling and Engaging Homeless Youth with a Child Welfare History in Services.” Cincinnati, OH: Lighthouse Youth & Family Services, September 2020. Available at https://library.childwelfare.gov/cwig/ws/library/docs/gateway/Blob/137945.pdf?r=1&rpp=25&upp=0&w=NATIVE%28%27SIMPLE_SRCH+ph+is+%27%27It+Begins+at+%E2%80%98Hello%E2%80%99%3A+Lessons+on+Enrolling+and+Engaging+Homeless+Young+Adults+with+a+Child+Welfare+History+in+Services.%27%27%27%29&m=1&order=native%28%27year%2FDescend%27%29.

New Jersey

There are no publicly available resources on New Jersey’s early warning system. For more information on New Jersey’s YARH intervention, please visit:

<https://www.nj.gov/dcf/adolescent/yarh.html>

University of Maryland

Gould-Kabler, C., A. Miller, E. Greeno, D.S. Harburger, S. Bowman, E. Hoey, and K. Strubler. “The Enhanced Youth Transition Planning (E-YTP) Model: A Promising Approach for Supporting Transition Age Youth in Foster Care.” Baltimore, MD: University of Maryland School of Social Work, The Institute for Innovation and Implementation, June 2021. Available at https://theinstitute.umaryland.edu/media/ssw/institute/images/EYTP_ModelBrief_062921.pdf.

Harburger, D., and E. Greeno. “Thrive@25 Overview & Theory of Change.” Baltimore, MD: University of Maryland School of Social Work, The Institute for Innovation and Implementation, September 2017. Available at [https://theinstitute.umaryland.edu/media/ssw/institute/md-center-documents/Thrive@25-Overview-&-Theory-of-Change-\(September-2017\).pdf](https://theinstitute.umaryland.edu/media/ssw/institute/md-center-documents/Thrive@25-Overview-&-Theory-of-Change-(September-2017).pdf).

Westchester County

Westchester County Department of Social Services, Fordham University Graduate School of Social Services Ravazzin Center, and The Children’s Village. “BraveLife (BLI) Intervention Manual.” Westchester County, NY: Westchester County Department of Social Services, Fordham University Graduate School of Social Services Ravazzin Center, and The Children’s Village, November 2020. Available at https://www.fordham.edu/download/downloads/id/15604/westchester_bli_manual_final.pdf

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For more information about this project, please contact M.C. Bradley at cbradley@mathematica-mpr.com or Mary Mueggenborg at mary.mueggenborg@acf.hhs.gov.

Appendix A: YTP Risk Factors and Criteria (Alameda County)

Risk Factor	Criteria
Age of entry	Youth entered foster care at age 14 or older
Time in care	Youth in the target population age range who have been in foster care for 18 months or longer
Placement instability	Youth has experienced a total of at least five placements ever or at least three runaway episodes
Mental health	Child welfare administrative data indicate at least one of the following: takes psychiatric medication, takes any medication for mental health concern, documented behavioral health need, or changed placement due to a Katie A. reason ^a
Placement in congregate care	Youth currently placed in group care
Parenting	Youth currently identified as receiving an “infant care supplement” associated with the payment for their foster care placement

^a Katie A. v. Bonta is a federal class action lawsuit filed on behalf of California foster youth and children at risk of out-of-home placement. The Katie A. lawsuit seeks to improve access to effective mental health care and reduce potential trauma from residential settings by ensuring that California’s children and youth at risk of or in the foster care system can receive intensive mental health services in their own homes and communities. An additional intention of the lawsuit is to provide intensive mental health treatment in the home before behaviors escalate beyond the family’s ability to cope so that fewer children will enter foster care. Children may be deemed Katie A. Subclass members if they are full-scope Medi-Cal eligible children/youth up to age 21 who (1) have an open child welfare services case; (2) meet the medical necessity criteria for Specialty Mental Health Services; AND (3a) are currently in or being considered for wraparound, TFC, specialized care rate due to behavioral health needs or other intensive Early Periodic Screening, Diagnosis, and Treatment services, including but not limited to Therapeutic Behavior Services or crisis stabilization/interventions; OR (3b) are currently in or being considered for group home (Rate Classification Level facilities 10 or above), a psychiatric hospital or 24-hour mental health treatment facility or has experienced three or more placements within 24 months due to behavioral health needs.

Appendix B: Pathways to Success Screening Assessment (Colorado)

Pathways to Success Embedded Screening Assessment: (Homelessness)

Purpose of the Assessment: Colorado’s Adapted Assessment is a tool to identify the youth most at-risk of homelessness among youth currently or previously in foster care.

Homelessness may include living in a place that is not permanent, predictable or consistent or moving from place to place and relying on the kindness of others for a place to stay / couch surfing.

The populations of interest are youth in foster care at ages 14-17, youth transitioning out of foster care, and those homeless youth up to age 21 with past child welfare involvement (as permitted by the Chafee Foster Care Independence Program).

Have you ever been in foster care, currently or in the past?

Yes Continue with Assessment

No Stop

Check if the answer is yes		
1	Have you ever become homeless because you ran away from your family home, group home, a foster home or placement?	<input type="checkbox"/>
2	Have you ever become homeless because there was violence at home between family members?	<input type="checkbox"/>
3	Have you ever become homeless because you had differences in religious beliefs with parents, guardians or caregivers?	<input type="checkbox"/>
4	Have you ever been pregnant or got someone else pregnant?	<input type="checkbox"/>
5	How old were you when you first tried marijuana? (age: ___)	<input type="checkbox"/>
6	Before your 18th birthday did you spend any time in jail or detention?	<input type="checkbox"/>
7	Have you ever applied for or used housing assistance like public housing, a housing voucher or overnight shelter?	<input type="checkbox"/>
8	Has your mother ever spent time in jail or prison?	<input type="checkbox"/>
9	Was your mother ever in foster care?	<input type="checkbox"/>
10	Has anyone ever pressured you to engage in a sexual act for money, food, housing, gifts or favors?	<input type="checkbox"/>
Enter Total Number of Items Checked		

Referring agency:	Date
Case worker name:	Phone

Youth

<input type="checkbox"/>	I authorize the referring agency to share my information with all partner agencies in order for me to fully participate in the project. I authorize the child welfare agency to share my information with the Center for Policy Research, in order to be a part of the research study. I understand all my information will be kept confidential, my name will never be used in a report, and this will not affect services I receive from any partner agency.
<input type="checkbox"/>	I do not want services; I do not authorize the release of my information.

Signature	Date
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From TAY Triage Tool Pilots Report (p. 7), by E. Rice and A. Rosales, 2015, New York: Corporation for Supportive Housing. Copyright 2015. Full document is posted on csh.org

Appendix C: CTH Risk and Protective Factors (New Jersey)

Risk factors:

- Complex behavioral health needs
- Legal challenges/juvenile justice system involvement
- Case goal ever something other than permanency
- Unstable foster care placements
- Last foster care placement with nonrelative
- More than five foster care placement settings
- Any history of taking psychotropic medication
- Placed in foster care because of parent absence or abandonment
- Ever pregnant or parenting

Protective factors:

- Early placement stability
- Ever placed with a relative while in foster care
- Fewer than three foster care placement settings

Appendix D: Enhanced-Youth Transition Planning (E-YTP) Risk Screen (University of Maryland)

Overview	
Goal	To identify the risk level for youth who are in an out-of-home placement for high, medium, or low risk of experiencing homelessness or housing instability after exiting from child welfare or have difficulty transitioning post-exit from child welfare.
Tool	20-item, YES/NO Questions asked about the youth's experiences.
Who Completes the Tool?	The youth's assigned Maryland Local Department of Social Services Foster Care Worker.
Population of Focus:	All youth currently in an out-of-home placement, ages 14 to 20, and youth (14 or older) who have exited care within the previous 3 months.
Considerations to complete the tool:	The youth's Local Department of Social Services Foster Care Worker will complete the tool on their own and not in the presence of the youth. This is to minimize the negative impact on and possible re-traumatization of youth that may result if they were asked these questions directly. The Risk Screen will be completed every 6-months.
Time to complete the tool:	10-15 minutes when the worker is familiar with the youth's story and experience. This may take longer for new youth when a worker needs to engage in active information gathering (i.e., completing the tool requires knowledge about the youth's history and current behavior and may require the worker to data mine in their case file or CJAMS).
Scoring	
There are 3 Subscales:	<ol style="list-style-type: none"> 1. Youth child welfare experience (7 items; #1-#7); 2. Youth current functioning (8 items; #8-#15); 3. Child Welfare Worker Opinion (5 items; #16-#20)
Scoring:	Every 'Yes' response is equal to 1-point. 'No' responses are equal to zero points. Placement and age* considerations are included in the total score summation.
Scores are summed and then the following is added to the total summed score:	<ul style="list-style-type: none"> • If the youth has a primary permanency plan of APPLA (another planned permanent living arrangement) add 1 point • If the youth is 18 add 1 point • If the youth is 19 add 2 points • If the youth is 20 add 3 points.
	Total scores are comprised of the scores from the 20-items and then the addition of scores accounting for the APPLA permanency plan and/or age. Scores can range from 0 to 24.
3 Ratings:	<ul style="list-style-type: none"> • <i>Low:</i> 0-5 • <i>Medium:</i> 6-10 • <i>High:</i> 11 or Greater
Scores yielded from the Risk Screen:	<ul style="list-style-type: none"> • Total Score • Subscale Scores (3 subscales)

*Note for adding points for ages: the Foster Care Worker should round up. For example, if a youth is 18 years and 7 months, they should round to age 19 and add 2 point

20 Item Thrive@25 Youth Risk Screen

Subscale	Question #	Question	Response option Yes or No
Subscale 1 = Youth Child Welfare Experience	1	Did the youth have <i>more than 4 different out-of-home placements (more than 4 placement changes)</i> during <u>any</u> entry into care; including the youth's current entry into care? Example/Explanation: Placements can include child welfare, juvenile justice, or other types of out-of-home placements such as regular or treatment foster homes, RTC, group homes, or kinship placements.	
Subscale 1 = Youth Child Welfare Experience	2	Did the youth <u>ever</u> enter care due to physical or sexual abuse that was committed <i>against</i> the youth? Example/Explanation: Was physical or sexual abuse indicated at the time the youth entered care (during any entry into care; this may include entry into care in another state or through another system such as juvenile justice) OR has physical or sexual abuse been revealed since entry into care but may not be documented in the youth's case history?	
Subscale 1 = Youth Child Welfare Experience	3	Did the youth enter care <u>ever</u> between 0-5 years of age? Example/Explanation: Between the ages of 0-5, did the youth ever enter into an out-of-home child welfare placement?	
Subscale 1 = Youth Child Welfare Experience	4	At the time of <u>any entry</u> into care, was an involvement with <u>any</u> of the following listed as an entry characteristic? A. Child Trafficking B. Commercial Sex C. Transactional Sex Example/Explanation: Any entry into care may mean any entry into <i>any</i> type of care (i.e., child welfare, mental health, juvenile justice). The following definitions may help you: Child Trafficking = the movement of a minor (a child under the age of 18) with the immediate or ultimate aim of the child's exploitation. Exploitation may include a commercial sex act. Commercial Sex = the exchange of money for sexual services. Primary forms of commercial sex include prostitution, pornography, and exotic dancing or stripping. Transactional sex = the exchange of money or gifts for sexual services.	
Subscale 1 = Youth Child Welfare Experience	5	At the time of the <u>most recent entry</u> into care, did the youth have either of the following as an entry characteristic? A. Involvement with substance use (substance use by the youth) B. Parental substance use (substance use by the parent); OR Is the youth <u>currently</u> using substances? Example/Explanation: This question is assessing for both current substance use and history of substance use by the youth AND/OR if the parent is using substances. Parental substance usage may be indicated at the time of removal or may be revealed during the youth's time in child welfare.	
Subscale 1 = Youth Child Welfare Experience	6	Has the youth <u>ever</u> run away from their current placement or prior placement? Example/Explanation: This question is assessing a significant time period for runaway (ex. overnight or days) versus running away for a few hours.	

20 Item Thrive@25 Youth Risk Screen

Subscale	Question #	Question	Response option Yes or No
Subscale 1 = Youth Child Welfare Experience	7	<p>At the time of the <u>most recent entry</u> into care, was housing (including homelessness, unsafe housing, or housing instability) noted as an issue of concern?</p> <p>Example/Explanation: This may or may not be indicated in CJAMS, case files, or court reports. A worker may have this information from his/her knowledge of the case or talks with the youth and their family. The following definitions may be helpful: Homelessness = Lacking a fixed, regular, or adequate nighttime residence the time of entry; this includes any youth/family whose primary residence during the night is a supervised public or private facility (e.g., shelters) that provides temporary living accommodations; this may also include situations where individuals are forced to stay with friends or family due to lack of housing. Unsafe Housing = unsafe housing is housing that is physically unsound and potentially dangerous to occupants; may be unsanitary or congested; may be located in a hazardous area; or may pose a health risk Housing Instability = may include the following: frequent moves, missed rent payments, lack of utilities, threaten eviction; lives in a hotel or motel; or lives in severely overcrowded housing</p>	
Subscale 2 = Youth Current Functioning	8	<p>Is the youth <u>currently</u> living in a group home, RTC, or other congregate placement?</p> <p>Example/Explanation: This question is designed for current placement/living arrangement.</p>	
Subscale 2 = Youth Current Functioning	9	<p>Has the youth <u>ever</u> had a clinical diagnosis that included: Trauma; Anxiety; and/or Depression?</p> <p>Example/Explanation: The intent of this question is if the youth has been diagnosed by a qualified professional with trauma, anxiety, and/or depression. This question would only be answered yes if there was documentation of trauma, anxiety, depression diagnosis (es).</p>	
Subscale 2 = Youth Current Functioning	10	<p>Has one (or more) of the following occurred: A. Did the youth drop out of school? B. Is the youth 2 or more years behind grade level (for example, the youth is in the 9th grade but has been identified as performing on a 7th grade or below level on reading or math)? C. Has the youth changed schools more than 3 times in the last 5 years?</p> <p>Example/Explanation: This may or may not be indicated in CJAMS, case files, or court reports. A worker may have this information from their knowledge of the case or from talks with the youth and their family, and/or educational providers.</p>	
Subscale 2 = Youth Current Functioning	11	<p>Does the youth identify with a non-heterosexual sexual orientation (for example, the youth identifies as lesbian, gay, bisexual, or questioning) or identifies with a non-biological gender orientation (for example, the youth was born male but identifies female)?</p> <p>Example/Explanation: Answer yes to this question <u>only</u> if the youth has disclosed to you a non-heterosexual sexual orientation or non-biological gender identity. A worker may suspect a youth has a non-heterosexual orientation or gender identity, but if a youth has not disclosed to you the answer for this question would be 'no'.</p>	

20 Item Thrive@25 Youth Risk Screen

Subscale	Question #	Question	Response option Yes or No
Subscale 2 = Youth Current Functioning	12	Does the youth have <u>any current</u> involvement or <u>history</u> of involvement with criminal justice or juvenile justice systems? Example/Explanation: This is a history (past experience) or current experience with the justice system question.	
Subscale 2 = Youth Current Functioning	13	Has the youth <u>ever</u> been pregnant? Or, does the youth have children? Example/Explanation: For the question, 'has the youth ever been pregnant' portion of the question, please answer a yes only if the youth has disclosed to you if she has been pregnant. For males for the 'does the youth have children' portion of the question, please answer a yes only if the youth has disclosed to you he has children.	
Subscale 2 = Youth Current Functioning	14	Does the youth <u>currently</u> have or is there a <u>history</u> of religious conflict with caregivers? Example/Explanation: This question is likely answered through a worker's knowledge or conversation with the youth or their caregivers.	
Subscale 2 = Youth Current Functioning	15	During the <u>most recent</u> Family Team Decision Meeting (FTDM), other Facilitated Meeting or through another recent assessment (e.g., MD-CANS, Casey Life Skills Assessment), was education, substance use treatment, therapy, or vocation/employment assistance identified as needs for the youth? Yes/No response. If yes, please indicate specifically what areas were identified as needs: Education yes/no Substance Use Treatment yes/no Therapy (individual or family) yes/no Vocation/Employment Assistance yes/no Example/Explanation: Please answer yes if any of the referenced areas were identified as needs during a FTDM or other assessment.	
Subscale 3 = Child Welfare Worker Opinion	16	In your opinion, does the youth have a non-child welfare worker supportive adult that they can go to for advice, just to talk, or support? Example/Explanation: This question is likely answered through a worker's knowledge or conversation with the youth and/or their caregivers. Please note, a Foster Care Worker should not be counted as a supportive adult. Similarly, resource parents or residential staff should also be considered as child welfare supports and would NOT be considered a supportive adult. Please answer yes only if a non-child welfare worker or support person can be identified.	
Subscale 3 = Child Welfare Worker Opinion	17	In your opinion, does the youth have a close relationship with their family or origin? Example/Explanation: In answering this question, please use your best judgment as to if you consider the youth's relationship with their family or origin as close.	
Subscale 3 = Child Welfare Worker Opinion	18	In your opinion, does the youth have a stable relationship with their family of origin? Example/Explanation: In answering this question, please use your best judgment as to if you consider the youth's relationship with their family or origin to be stable.	

20 Item Thrive@25 Youth Risk Screen

Subscale	Question #	Question	Response option Yes or No
Subscale 3 = Child Welfare Worker Opinion	19	<p>In your opinion, is the youth's daily living and functioning impacted by their emotional health?</p> <p>Example/Explanation: In answering this question, please use your best judgment regarding whether you think the youth's daily life is impacted by either their mental health diagnosis (es) of trauma, anxiety, and/or depression OR, if the youth does not have a formal mental health diagnosis but their daily living and functioning is impacted by their current emotional health.</p>	
Subscale 3 = Child Welfare Worker Opinion	20	<p>Is the youth currently displaying behavior that would potentially interrupt or impact their current placement?</p> <p>Example/Explanation: Is the youth displaying risk taking behavior (i.e., self-injurious behavior) aggressive behavior, or emotionally unstable behavior that would impact the youth's placement in terms of the youth being vulnerable to placement disruption or being moved to a more restrictive placement setting.</p>	

Appendix E: Westchester Building Futures Screening Instrument (Westchester County)

	Please respond yes or no to the following questions	Yes	No
1	Have you ever been “couch surfing” for a place to stay?	Yes	No
2	Have you ever been homeless?	Yes	No
3	Have you ever run away or been kicked out of home?	Yes	No
4	Have you experienced violence in your home, residential placement, etc., between those living/residing with you?	Yes	No
5	Do you have any conflict around values with your primary caregiver (or adults in your life), for example over religious beliefs, food, or practices?	Yes	No
6	Do you have adequate housing?	Yes	No
7	Do you have adequate food and clothing?	Yes	No
8	Have you ever been pregnant, gotten anyone pregnant or fathered a child?	Yes	No
9	Have you ever abused alcohol or other substances?	Yes	No
10	Have you ever been involved in gang activity?	Yes	No
11	Have you ever been involved in the juvenile justice system?	Yes	No
12	Do you have an adult in your life that you can trust?	Yes	No
13	Are there peers who you can trust?	Yes	No
14	Have you had more than two moves in the foster care system?	Yes	No
15	Please specify how many moves in the foster care system you have had.	moves	

Scoring: Items 6, 7, 12, and 13 need to be reverse coded before summing. Higher numbers indicate greater risk. After recoding, 1 point for every “Yes” response, 0 for every “No” response. For item 15, a response of 3 or higher receives 1 point, 2 or lower receives 0 points. Scores can range from 0 to 15, with higher scores indicating higher risk.

Source: Heyman, J.C., Farmer, G.L., White-Ryan, L., Kelly, P., & Gregory, R. (2016). WCDSS Screening for risk and protective factors. Fordham University Ravazzin Center/Children and Families Institute for Research Support and Training. West Harrison, NY.

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