Casey Family Programs

Kinship Navigator Pilot Project Replication Manual

December 2005

TRIWEST GROUP

Table of Contents

1. Using This Manual

This manual is intended to help service providers and policymakers use the lessons learned in the Kinship Navigator Pilot to expand and improve programs that support kinship caregivers of children and youth. It is hoped that the manual will serve to improve understanding of the pilot's successes and challenges, as well as act as a reference guide on implementing a similar program. The manual contents are based upon observations, interviews, and discussions with project staff, focus groups and surveys with kinship caregivers served by the pilot initiative. Due to the pilot's short time period and limited scope, this manual can not provide comprehensive, detailed and proven instructions for replication. However, this manual does provide a summary of the program's background, philosophy and implementation steps offering a solid foundation for developing a Kinship Navigator program.

2. Pilot Project At-A-Glance

Kinship Navigator Pilot Project	
Project Goal	To assist kinship caregivers with understanding and navigating the system of care for children in out-of-home care, and to reduce barriers faced by kinship caregivers when accessing services.
Pilot Implementation	July 2004
Caregivers Served As of 11/30/05	443 adults (305 in Yakima region and 138 in Seattle region) caring for 1,148 children (767 of whom were children of kin)
Funding Sources	▪ Two positions funded by Casey Family Programs since 7/04 ▪ Two additional positions approved through the Washington State Legislature with funding provided to the Department of Social and Health Services Aging and Disability Services Administration as of 7/05
Project Sites	▪ Seattle Casey Family Programs Field Office (7/04) ▪ Yakima Casey Family Programs Field Office (7/04) ▪ Catholic Family & Child Services of Yakima (CFCSY) (8/05) ▪ Senior Services of Seattle (SSS) (10/05)
CFP Washington Strategy Director	Ron Murphy, RMurphy@casey.org
Seattle Casey Site Director Project Supervisor Kinship Navigator	 Lyman Legters, LLegters@casey.org Dana Boales, DBoales@casey.org Helen Sawyer, HSawyer@casey.org
Yakima Casey Site Director Project Supervisor Kinship Navigator	 Lynn Biggs, LBiggs@casey.org Grace Smith, GSmith@casey.org Dotty Simpson, DSimpson@casey.org
CFCSY Site Director Kinship Navigators	 Darlene Darnell, DDarnell@cfcsyakima.org Mary Pleger, MPleger@cfcsyakima.org Terry Aguilera-Flemming, TAguilera-Flemming@cfcsyakima.org
SSSKC Site Director Kinship Navigator	 Terra McCaffree, TerraM@seniorservices.org Greg Townsend, GregoryT@seniorservices.org

TRIWEST GROUP

3. "What is a Kinship Navigator Program?"

➢ **What is a Kinship Navigator Program?**
A Kinship Navigator Program provides staff positions (*Navigators*) to assist kinship caregivers with understanding, navigating and accessing the system of out-of-home care supports and services for children.

➢ **Why was the Program Implemented?**
The program was developed to respond to the perceived needs of kinship caregivers:

o Kinship caregivers find it difficult to access services. Many kinship caregivers describe the service system as cumbersome and difficult to navigate, detailing providers' widely varying levels of helpfulness, professionalism, and knowledge.
o Kinship caregivers can use "Kinship Navigators" as community-based and consistent direct service providers to help reduce or eliminate systems barriers to family and child-serving resources.
o Kinship caregivers need information and support to access services before situations become crises, potentially reducing more costly and intensive chronic situations, such as foster care or therapeutic placements.

➢ **Who are Kinship Caregivers?**
Kinship Caregivers are family members—most often grandparents but also aunts, uncles and even siblings and can include non-blood related "fictive kin"—who serve as short-term or long-term primary caregivers for children whose own parents are unable to care for them. The majority of "kinship care" arrangements are informal, private arrangements between parents and relative caregivers, while other situations involve the child welfare system. There are also more formal kinship care arrangements, including third-party custody and guardianship arrangements. Estimates of the number of children living informally with relatives range as high as nine for every one in formal placement in the child welfare system.[1]

➢ **What do the Navigators do?**
The Navigators activities include:
o Educate kinship caregivers/service providers about resources and supports;
o Directly refer kinship caregivers to appropriate services;
o Help establish and maintain relationships between caregivers, and public and private service providers, and formal supports through the Department of Social and Health Services (DSHS);
o Help establish a community collaboration focused on kinship services;
o Provide consultation and education about kinship caregivers to service providers;
o Advocate for services and resources for kinship caregivers;
o Provide follow-up with kinship caregivers;
o Collect necessary data to support evaluation and system improvement.

---

[1] Mayfield, Pennucci, & Lyon. (June, 2002.) Kinship Care in Washington State: Prevalence, Policy, and Needs. #02-06-3901. Page 13.

TRIWEST GROUP

4. Project Foundations

Background and History

Casey Family Programs, in collaboration with the Washington State Kinship Oversight Committee, implemented the Kinship Navigator pilot project in July 2004. Casey Family Programs partnered with the Washington State Department of Social and Health Services (DSHS) to respond to a mandate in the 2003 Kinship Care Bill (SHB-1233) passed in the Washington State Legislature. Initially, two contract positions were created, one at the Casey office in Yakima (DSHS Region 2) and one at the Casey office in Seattle (DSHS Region 4), to assist kinship caregivers with understanding and navigating the system of services for out-of-home care, and to reduce access barriers faced by kinship caregivers. In July 2005, two additional positions were approved through the Washington State Legislature with funding provided to the Department of Social and Health Services Aging and Disability Services Administration. These funds were then allocated to two local Area Agencies on Aging (Aging and Disability Services-Seattle King County and Southeast Washington Aging and Long Term Care who contracted with local organizations: Catholic Family and Child Services of Yakima and Senior Services of Seattle-King County to create these positions.

> SHB-1233 required the Department of Social and Health Services to develop a kinship search process for children and youth in care or at risk of placement; establish an oversight committee on kinship care; and seek to establish a public/private partnership to implement kinship care navigator pilot projects.

Program Principles and Philosophy

The Kinship Care Oversight Committee, following the project's legislative mandate, established these Navigator expectations:

➤ Respond to kinship caregivers' long-standing and well-documented need for information in key service areas, including: financial assistance, child care, legal issues, physical and mental health, education and other support services;

➤ Respond to varying needs and resources in pilot communities (Seattle and Yakima);

- Maintain a strength-based, supportive role – *not* offer another form of case management;
- Provide caregiver outreach, as well as community education and public awareness;
- Span the boundaries between formal and informal systems of care;
- Be knowledgeable and maintain strong linkages to formal system resources while operating outside the system, with flexibility to respond to diverse needs and advocate for individual caregiver concerns; and
- Identify and help respond to kinship care service system gaps *without* becoming a formal part of the service delivery system.

Program Effectiveness

While more rigorous research is needed to establish its cost-effectiveness, Casey Family Program's December 2005 evaluation of the pilot's first sixteen months suggests that the Kinship Navigator program is a promising approach to supporting kinship caregivers and avoiding placement in the formal child welfare system. In the period covered by that report, 637 kinship caregivers received either information or support from Navigators. Of those, 443 adults (305 in Yakima and 138 in Seattle) caring for 1,148 children (767 of whom were children of kin) received documented navigator services. An additional 194 caregivers received brief informational services over the telephone.

Survey respondents and focus group participants unanimously endorsed the program as deserving continuation. 93% of those surveyed found the program "often" to "always" helpful, including 100% of the 32 Yakima respondents. Navigator services showed extremely high satisfaction rates, with 98% of caregivers either "very satisfied" (81%) or "satisfied" (17%). Only 1 caregiver expressed dissatisfaction. The following caregiver comments typify the overwhelmingly high satisfaction levels:

"I have nothing but good things to say about [the Navigator] and this program."

"It's a great and awesome program."

"In my opinion, this is the best social program I've seen... It works. It would truly be worth the money from the government."

5. Steps to Implementation

The following table and accompanying text summarize the pilot's steps to implementation and are recommended as a starting place for new programs.

Steps to Implementation

Getting Ready

1. **Build consensus and plan for success** – Collaboration! Bring the right stakeholders together to assess needs, build a coalition, and plan for implementation.
2. **Establish linkages** – Linkages with key state and local agencies and with community organizations will allow the program, and the Navigators, to help kinship caregivers successfully sidestep system barriers.
3. **Choose your site(s)** – The program needs a base of operations, preferably independent from state and local child welfare agencies. Because Navigator services are mostly community and phone-based, physical site requirements are minimal. A computer and a phone are must-haves!
4. **Staffing: Hire Navigators and Supervisor** – Navigators are the key! Choose individuals who match the needs, culture and language of the community to be served.

Providing Services

5. **Linking with Kinship Caregivers** – Find out who the kinship caregivers are in your community and how to reach them.
6. **Intake** – Establish a process for formally engaging kinship caregivers in the program while minimizing red tape and paperwork.
7. **Meeting the need: Navigator services** – Provide information and linkages so that kinship caregivers have the information and support they need to keep children and youth in the community and with their families!
8. **Information management** – Build a simple database to keep track of program activities. This is vital to assess the program's effectiveness and to continuously improve the program's ability to meet kinship caregivers' needs.

5.1 Build Consensus and Plan for Success

Bringing the right group of stakeholders together is critical. In designing the pilot, the Washington State Kinship Oversight Committee and Casey Family Programs worked closely with the Washington State Department of Social and Health Services (DSHS). Their goal was an independent program supported by DSHS and the formal child welfare system. Buy-in from members of the state child welfare system as well as local agencies will smooth the way to successful program roll-out.

5.2 Establish Linkages

Depending on the set of stakeholders that come together for the initial planning process, this step will vary in its complexity. After the initial planning and coalition building, it is necessary to establish linkages and buy-in from the array of programs, agencies and community groups that may serve kinship caregivers. Navigators play a key role in these activities, beginning early in program implementation and ongoing. Regardless of varying inherent regional challenges, the Navigator must work to establish and solidify community linkages with agencies and residents.

> One example of how to build community linkages was the 2004 King County Kinship Symposium. The symposium brought together a wide range of agencies and organizations that could serve kinship caregivers. The symposium offered the opportunity to inform caregivers about available services, while helping to launch a more formal level of kinship collaboration among local agencies.

5.3 Choose Your Site(s)

The program needs a base of operations, preferably independent from state and local child welfare and other public agencies. Because Navigator services are mostly community and phone-based, physical site requirements are minimal. A computer and a phone are must-haves! While Navigators are based in field offices, they are also expected to spend time in the community conducting outreach, making linkages with public and private agencies (including kinship support groups), and assisting kinship caregivers as needed. Offices should be welcoming and safe spaces for caregivers to seek out Navigator assistance, tap into support groups, and attend meetings or focus groups.

5.4 Staffing: Hire Navigators and a Supervisor

For the pilot, staffing consisted of a program supervisor providing part time oversight and a full time Kinship Navigator at each site. While the Kinship Navigator is responsible for providing direct caregiver services, the program supervisor closely oversees the progress, successes, and challenges of the Navigator's work. Criteria for selection of the Kinship Navigators should include:

> Selecting the right staff is a key element of success. Choose individuals who match the needs, culture and language of the community to be served.

- o experience in providing kinship care support, preferably a person who is an active kinship caregiver;
- o excellent communication skills (listening and speaking);
- o links to the local community and knowledge of community resources;
- o an understanding of state and local service systems;
- o friendliness;
- o able to collaborate with a wide range of service providers;
- o able to help establish and maintain respectful relationships between caregivers and service providers within a variety of service systems;
- o strong advocacy, problem-solving and follow-through skills;
- o able to relate well to and communicate effectively with individuals from the community to be served across the full spectrum of cultural, ethnic, socio-economic, religious, education, and age groups; and
- o tenacity and selflessness.

In addition to good people and communication skills, the Navigator must also be comfortable with and competent in managing the ebb and flow of program information. Navigators must document needs and support advocacy—efforts that require information management skills. Navigators must also enter information into the project tracking database. These administrative expectations need to be incorporated into Navigators' selection, training and orientation process. Navigators and program supervisors must simultaneously implement a new program and develop administrative support processes. They must be given sufficient organizational support and autonomy to initiate,

implement, and fine tune ongoing and new routines and processes. However, Navigator staff and their supervisor must hold as a value that the primary focus of their effort goes toward direct services in the community.

5.5 Linking with Kinship Caregivers in the Community

Kinship caregivers take numerous paths to reach Kinship Navigators. Navigators are responsible for conducting outreach to increase agency and community awareness of the program, its services and support, particularly in the first six months to a year of operations. With successful linkages, referrals will come from state agencies, schools, churches and other community-based organizations. Word of mouth is also important – many caregivers took it upon themselves to share news of the Navigator services they received. Some caregivers seek out the Kinship Navigators for a quick information-only phone call while others are looking for more extensive assistance. The degree of help needed by those looking for more than quick information is determined during the intake meeting with the Navigator.

5.6 Intake

Once kinship caregivers approach the Kinship Navigator by phone, email or in person, the Navigator arranges an intake meeting. This can occur in person or by phone. The Navigator most typically offers to meet in his or her office, the caregiver's home, or an appropriate community location. The intake process is an initial meeting at which the Navigator works to build the trust of the caregiver, learn about his/her family situation, and assess the caregiver's most urgent needs.

The Navigator collects caregiver and family information and refers to the Kinship Navigator Project Family Needs Scale as a tool to clarify and document areas of need. The Family Needs Scale was adapted from the work of Don Cohon of the Edgewood Institute for the Study of Community-Based Services. Cohon developed a 31-item family needs scale based on the work of Carl Dunst and colleagues (Dunst, Trivette & Deal,

1988).[2] This scale was modified to make the Family Needs Scale (FNS) instrument more relevant to Washington State stakeholders' priorities, to provide greater specificity and to shorten the tool. The Family Needs Scale information is recorded on a six-point scale with answer options ranging from *never* to *always*. The first section of the FNS can be seen on the following page.

---

[2] C.J. Dunst, C.M. Trivette, & A.G. Deal. (1988). *Enabling and Empowering Families: Principles and Guidelines for Practice*. Cambridge, MA: Brookline Books.

File Edit View Insert Format Records Tools Window Help

Type a question for help

Family Needs Scale

Caregiver:
Navigator:

Date of Assessment: 5/26/2005
Date of Follow-up:

Back to Caregivers

Type:

Never   Almost Never   Sometimes   Often   Almost Always   Always

How frequently do you need help to get or keep this support:

	Never	Almost Never	Sometimes	Often	Almost Always	Always	Notes
1. Extra money to buy necessities and pay bills.	◉	◉	◉	◉	◉	◉	
2. Legal assistance related to being a kinship caregiver (adoption or third party custody).	◉	◉	◉	◉	◉	◉	
3. Legal assistance related to benefits (Medicaid, Social Security, child support, other).	◉	◉	◉	◉	◉	◉	
4. Other legal assistance.	◉	◉	◉	◉	◉	◉	
5. Help getting enough food daily for two meals for your family.	◉	◉	◉	◉	◉	◉	
6. Help getting a place to live.	◉	◉	◉	◉	◉	◉	
7. Help getting a job.	◉	◉	◉	◉	◉	◉	
8. Help getting places you need to go for yourself.	◉	◉	◉	◉	◉	◉	
9. Help transporting my child places, including appointments.	◉	◉	◉	◉	◉	◉	
10 . Someone to talk to about your child (-ren).	◉	◉	◉	◉	◉	◉	

How frequently do you need help to get or keep this support:

	Never	Almost Never	Sometimes	Often	Almost Always	Always	Notes
11. Someone to talk to about how things are going for you.	◉	◉	◉	◉	◉	◉	
12. Medical care for your family.	◉	◉	◉	◉	◉	◉	

Record: ◄ ◄ 1 ► ►► ►* of 1 (Filtered)

Form View

NUM   FLTR

TRIWEST GROUP

5.7 Meeting the Need – Navigator Services

Once the Navigator identifies the caregiver's needs, the next step is to provide the information, support and linkages to meet those needs. In the pilot, the most commonly expressed kinship caregiver needs are shown below:

<div style="border:1px solid;padding:1em">

Common Caregiver Needs

1. **Information and knowledge**
2. **Advocating within and across service systems** – Kinship caregivers often have limited legal authority to advocate for the children and youth in their care.
3. **Financial needs** – Kinship caregivers are often overextended financially and often lack funds for basics such as clothing, school supplies, and housing.
4. **Legal assistance** – Kinship caregivers need affordable and qualified legal assistance from professionals knowledgeable about caregiver needs and family law.
5. **Special needs resources** – Kinship caregivers often need additional resources for children with special needs, including specialized child care and transportation, educational and mental health supports, specialized supports for adolescents, and supports to comprehensively address multiple challenges.

</div>

In addressing these needs, just over half of the actual services were provided by phone (51%), with the remainder mostly provided face-to-face (47%), generally in the community. In the pilot, due to differences in the Seattle and Yakima regions, the Navigators had different priorities at each site. While the two Seattle Navigators spent more time on supportive listening and referrals primarily delivered over the telephone, the two Yakima Navigators spent more time providing advocacy and follow-up linkages primarily delivered in person. These differences between Yakima and Seattle illustrate the need for project services to develop based not only on project goals but with respect for regional infrastructure and service needs.

Kinship Navigators provided a broad array of services in direct response to kinship caregivers' identified needs. The following chart, based on our pilot experience, exemplifies the range and amount of different service types that Navigators

Types of Services Delivered by Region
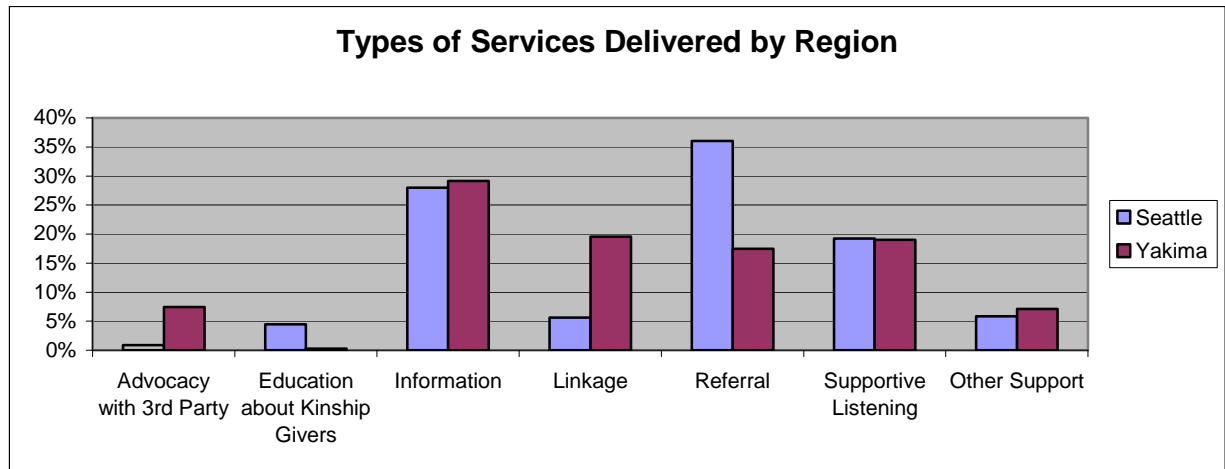
may provide. In the pilot, Seattle services tended to be referrals, information, and supportive listening. In Yakima, services tended to involve information, follow-up linkages, referrals and supportive listening.

5.8 Information Management

Kinship Navigators are responsible for recording data as they conduct the intake meeting and continue to work with the caregiver. Navigators are responsible for tracking data on caregivers served, outreach conducted, and informal contacts. This data provides valuable program management material, while supporting independent assessment of how well the project is meeting its goals and serving caregivers' needs.

6. Administrative Requirements

6.1 Encounter Tracking for Services to Caregivers

All caregivers requesting more than information by telephone are offered an initial intake meeting and enrolled into the services program. For these enrollees, each Navigator encounter is tracked. For each encounter, the following information is recommended:

o A client identifier
o Date of encounter
o Length of encounter (in minutes)
o Person receiving the encounter – One of three options: caregiver, child of caregiver, third party
o Type of encounter: One of six types or other:
  - **Information**: Providing a caregiver information about a needed resource/support.
  - **Referral**: Providing a caregiver with the specific name and contact information for a person to go to for a needed resource or support.

- **Linkage**: Providing additional help beyond just a referral to link a caregiver with a needed resource or support. For example, helping arrange an appointment time.
- **Advocacy with Third Party**: Contact with a third party to advocate for the caregiver to receive a needed resource or support.
- **Education about Kinship Caregivers**: Sharing information with the caregiver, a family member, or a third party to help them better understand the experiences of kinship caregivers.
- **Supportive Listening**: Talking with a caregiver primarily to provide emotional support.
- **Other**: This is used for services not listed above and requires brief specification of what was provided.
- o How the encounter was provided: In person, By telephone or Other. For "Other" , a brief description should be provided (for example, "by email")

6.2 Encounter Tracking for Coordination with Agencies

Navigators also sometimes provide community-level outreach and education to agencies.

It is useful to track those services. For each agency encounter, the following information

is needed:

- o Date of encounter
- o Length of encounter (in minutes)
- o Type of agency receiving the encounter:
  - Department of Social and Health Services (DSHS)
  - Caregiver support group
  - Faith based organization
  - Mental health service provider
  - Substance abuse service provider
  - Physical health service provider
  - School or school district
  - Aging services agency
  - Youth services agency
  - Food bank or basic needs provider
  - Advocacy group
  - Media organization
  - Other (specify)
- o Number of people attending the event
- o Materials provided (yes/no for each):
  - Navigator contact information?
  - Navigator educational materials?
  - General education on kinship caregivers?

6.3 Navigator Database

To collect the information described above, Casey Family Programs (CFP) created a database to record intake and follow-up information. The database main page (shown three pages below), allows the Navigator to track detailed demographic, household, and socio-economic information; project notes; and services received. In the bottom right corner, the database page links to the pertinent caregiver's Family Needs Assessment. It also links to a page where the Navigator can track all agency outreach conducted – this option is not tied to the particular caregiver whose information is recorded on the main page. While use of the particular CFP Navigator Database is not essential, tracking key caregiver information through a reliable and usable database is an important aide to the Navigator as they seek to meet their primary goal of providing assistance. Navigators may also use their discretion when addressing sensitive issues, as not all data is needed to offer supports. Key database variables needed to track services include:

For Caregivers & Children:

o First, middle and last name
o Date of Birth
o Address
o Primary & Alternate Phone numbers
o Gender
o U.S. Citizenship Status (yes/no/unknown)
o Social Security Number (if available and as appropriate)
o Tribal Affiliation (yes/no/unknown)
o Race/Ethnicity (all that are applicable should be indicated)
   - American Indian or Alaska Native
   - Asian Indian
   - Black or African American
   - Chinese
   - Filipino
   - Guamanian or Chamorro
   - Japanese
   - Korean
   - Native Hawaiian
   - Other Asian
   - Other Pacific Islander
   - Samoan
   - Vietnamese
   - White
   - Other (write in)
o Primary Race

- o Hispanic
  - No, not Spanish/Hispanic/Latino
  - Yes, Cuban
  - Yes, Mexican/Mexican-American/Chicano
  - Yes, Other Spanish/Hispanic/Latino
  - Yes, Puerto Rican
- o Primary & Secondary (if applicable) Languages Spoken
  - English
  - Spanish
  - French
  - Japanese
  - Russian
  - Chinese
  - Other (specify)

Additional Caregiver Data:
- o Marital Status
  - Single
  - Married
  - Separated
  - Divorced
  - Widowed
- o Education
  - Less than High School
  - GED
  - High School
  - Two-Year College or Professional Degree or Certification
  - Four Year College
  - Education Beyond Four Year Degree
- o Employment
  - Employed Full Time (35+ hours per week)
  - Employed Part-Time
  - Full Time Caregiver (Not employed outside home)
  - Unemployed, looking for work
  - Unemployed, disabled
  - Unemployed, volunteer work
  - Unemployed, retired
  - Unemployed, not looking for work
- o Household Income
  - Under $10,000
  - $10,000 - $19,000
  - $20,000 - $29,000
  - $30,000 - $39,000
  - $40,000 - $49,000
  - Over $50,000
- o Home Ownership Status (yes/no/unknown)

Additional Child Data:
o   Relationship to Caregiver
- Child
- Step-child
- Nephew or Niece
- Grandchild
- Cousin
- Sibling
- Godchild
- Other tribe or clan member
- Fictive kin
- Other relative (specify) or non-relative (specify)
o   Length of Time with Caregiver (in months & years)
o   Custody Status
- Biological Child
- Adopted
- Guardian
- Foster Child
- None established
- Other (specify)
o   School Enrollment Status (yes/no/unknown)
o   Grade Level
- Infant or Toddler (NA)
- Pre-school
- Kindergarden
- 1st
- 2nd
- 3rd
- 4th
- 5th
- 6th
- Alternative Elementary
- 7th
- 8th
- 9th
- 10th
- 11th
- 12th
- Alternative Middle or High School
o   Is there a Child Protection Services (CPS) or Child Welfare Services (CWS) worker currently working with the child or the child's parents?
o   Was there a CPS or CWS worker working with the child and his/her parents when this child came to live with you?
o   Was there a CPS or CWS worker working with the child and his/her parents prior to this child coming to live with you?
o   Is the child in your care receiving TANF support?

Microsoft Access - [F_Main : Form]

File   Edit   View   Insert   Format   Records   Tools   Window   Help

Type a question for help

NUM

casey family programs

Kinship Navigator Project

Pilot Database

Caregiver Information

Name:
last   first   middle

Date of Birth: month   day   year
☐ Check here if DOB is estimated

Address1:
Address 2:
City: Seattle   State: WA   zip:

Add Caregiver

Search by Last Name

Scroll Through Records   ▼ ▲

Exit

Search note: Make sure cursor is in Last Name field.

Primary Phone:
Alternate Phone:

Notes:

Demographics | Socio-Economic Info | Kinship Navigator Project Notes | Navigator Services Received | Evaluation Information

CFP ID: 0
Gender: Female
US Citizen: Unknown
SSN:
Tribal Affiliation: Unknown
Hispanic:

Race/Ethnicity (check all that apply)
☐ American Indian or Alaskan Native
☐ Asian Indian
☐ Black or African American
☐ Chinese
☐ Filipino
☐ Guamanian or Chamorro
☐ Japanese
☐ Korean
☐ Native Hawiian
☐ Other Asian
☐ Other Pacific Islander
☐ Samoan
☐ Vietnamese
☐ White
☐ Other (write in below)

Primary Race/Ethnicity:

Primary Language:
Second Language:

Family Needs Assessment

Start a New Family Assessment

Agency Services

Enter Agency Services

Go To Dependent Youth Information for This Caregiver

Go To Information on other Adults in Household for This Caregiver

Other Household Members Information
Summary: Others in Household
Name: Legal Status   Approx. Age   Gender:

Caregiver's last name -- internal db only will not be ex Kinship Navigator Replication Manual (5-24-05).doc - Microsoft Word

6.4 Program Completion

The evaluation of the initial six-month pilot found that caregivers tended to receive fewer services over time during their first three months of contact. Most services in this period (54%) were provided during the first month of interaction with the caregivers, falling off to 26% in month two and 20% in month three. The table below shows the distribution across the Seattle and Yakima sites.

Percent Distribution of Services Over Time by Site
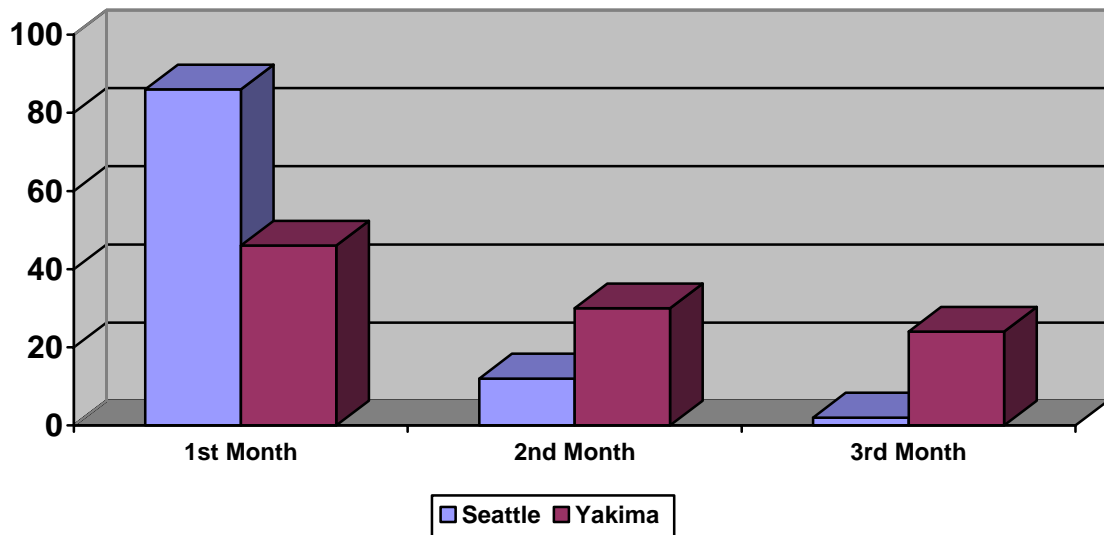
However, Navigators reported that needs varied over time, so it was important for caregivers to continue accessing the program after this initial three-month period. Navigators provide an ongoing resource to help caregivers navigate community services. As initial needs are met, new needs may later emerge. While the Navigator does not provide ongoing case management, their information and referral function continue to be useful over time. Therefore, there is not a formal point of termination for most caregivers, with participation determined by the caregiver's self-assessment of needs. Just like other helpers, such as primary care physicians or agencies, Navigators remain available over time as needs emerge and recede.