



DIVISION OF LICENSED RESOURCES (DLR)
COMPREHENSIVE REVIEW

Staff Interview

INTERVIEWER'S NAME	DATE
AGENCY	
STAFF MEMBER'S NAME	

1. What is your job title at this agency? Generally, what does your job entail?
2. How long have you worked here?
3. Who is your supervisor? Do they provide regular feedback and assistance to you? Yes No
Comments:
4. What kind of training have you had in the following areas:
 - How to supervise youth:
 - Behavior management / restraint:
 - Medical emergencies:
 - Treatment areas (i.e., suicide, mental health, substance abuse, SAY, PAAY, developmental disabled youth, etc.):
 - The mandatory reporting video:
 - What do you do during a natural disaster:
5. Have you used a restraint or a "quiet room?" Yes No
If yes, can you describe what happened during the event? Can you also explain how the agency responded (paperwork, notification, training, etc.)?
6. Have you cared for a youth in a medical emergency? Yes No
If yes, describe the event and what you and other staff did:
7. Have you ever made a CPS referral? Yes No
If yes, describe the incident and process.
8. What do you think of the food here? Can youth get seconds? Do you eat meals with the residents?
 Yes No
Comments:
9. What do you think of the educational experience and extracurricular activities the youth get here?
10. What do you think of the medical care youth are provided here?
Comments:

11. Do you think there are an adequate number of staffs to provide good supervision? Yes No

On average, what are your daily staffing ratios:

12. What happens when youth get into a physical altercation or argument? What do you do?

13. Have any youth had sexual contact with each other here that you know about? Yes No

If yes, what happened?

14. Does the agency administration meet the needs of the staff and the residents? Yes No

Comments:

15. If you could make any changes to this facility or program, what would you change? Is there anything that strikes you as harmful to youth in the physical facility or program?

16. Are you involved in the planning and service delivery that build on strengths with family, tribal, and/or community services? Yes No

If yes, please describe your involvement:

17. Can you describe how you support permanency (reunification, adoption, or guardianship) for youth and how you coordinate your efforts with the permanency goals of DSHS?

18. Do you know what the youth's treatment goals are? If so, how do you help the youth meet their goals?

19. How do you utilize the WAC and BRS Provider Handbook to perform your daily duties? Where do you find these documents at your agency or job site? Where are your agency's policy manuals located?

20. Other comments: