

CTI-RRH Self-Assessment

Never or rarely	Sometimes	About half the time	Most of the time	Always
1	2	3	4	5

Summary of Achievement in Each Area	Score
Time-limited (<i>financial assistance may extend beyond end of CTI</i>) 1. CTI workers provide no more than six months of CTI after the date a client starts Phase 1.	
Three Phases 2. Beginning after Pre-CTI, the intervention takes place in three phases, each phase lasting two months.	
Focused 3. Using the <i>Phase Plan</i> , CTI workers select 1-3 focus areas for each phase.	
4. All focus areas on the <i>Phase Plan</i> must be selected from the list of predetermined CTI areas.	
Small caseload size 5. Each FTE CTI worker has no more than 20 weighted cases (using the <i>Weighted Caseload Tracker</i>).	
Weekly team supervision meetings 6. Supervision takes place as a team, consisting of the supervisor and more than one CTI worker. <i>For agencies with only one CTI worker, supervision is between the supervisor and CTI worker.</i>	
7. Team supervision meetings are led by the supervisor, who is a clinician (MSW or equivalent) and has been trained in CTI.	
8. Team supervision meetings take place weekly.	
Decreasing contact over three phases 9. As clients become connected to community supports, CTI workers decrease frequency of contact and shift their role to mediator/monitor.	
Initial Engagement & Assessment	
During Pre-CTI: 10. CTI workers have contacts* with client at least twice a month to build trust as early as possible.	
11. CTI workers assess basic resource needs to establish where early linkages should be made.	
12. CTI workers act quickly to begin securing early linkages.	
13. CTI workers attend lease signing and establish connection with the landlord.	

* "contact" = a meeting, phone call, email or set of linked text messages

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Community-Based					Score
<u>During Phase 1:</u>					
14. CTI workers gather client information to enable a best fit between client and community resources (<i>e.g., interests, skills, strengths, vulnerabilities, aspiration; history, such as education, jobs, housing, treatment</i>)					
15. CTI workers explore neighborhood with client in order to foster new community-based relationships and skills.					
Linking Process					
<u>During Phase 1:</u>					
16. CTI workers have at least one weekly contact* with the client.					
17. Building on work done during Pre-CTI, CTI workers continue to connect client to community supports where needed and to strengthen relationships with existing supports.					
18. CTI workers and client complete the <i>Client/Family Personal Resource List</i> .					
<u>During Phase 2:</u>					
19. CTI workers have at least one contact* with client every two weeks.					
20. CTI workers mediate between a client and his/her support network, including informal supports such as family, friends and spiritual communities.					
21. CTI workers assess the strength of linkages by observing and recording client's interaction with providers and other supports.					
<u>During Phase 3:</u>					
22. CTI workers have at least one contact* with client once a month.					
23. CTI workers ensure direct communication between different members of a client's support network (<i>e.g., a family member and a provider, as well as between client and his/her providers and informal supports</i>)					
<u>In Phase 3, before a case is closed:</u>					
24. CTI workers have a transfer-of-care meeting or call with those providers and informal supports with whom it is necessary to meet. (<i>e.g., maybe not with daycare provider</i>)					
25. CTI workers have a final meeting with each client. (<i>They discuss client's experience with CTI and relationship with CTI worker; client's expectations for the future; long-term support network's contact information.</i>)					
CTI Worker Role					
26. CTI workers use a strengths-based, person-centered approach that incorporates shared decision-making in their interactions with clients. (<i>e.g., they relate to clients in a genuine way; ask about topics not related to treatment; share their own experiences as a way to normalize client's feelings</i>).					
27. CTI workers take a harm-reduction approach to planning with clients, when applicable.					
Use of Team Supervision					
28. The team uses supervision to reinforce practices that are consistent with the CTI model and to correct practices that are not.					
29. CTI workers give a case presentation at the supervision meeting for each new client.					
30. Team continuously updates community resource list and shares latest information during supervision meetings.					

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Supervisor Role	Score
31. Some (~6-8) high priority clients are selected prior to each supervision meeting for in-depth discussion by the team.	
32. Supervisor monitors CTI workers' documentation regularly to ensure high quality and timeliness.	
33. Supervisor identifies community resource deficits to inform advocacy efforts at the system level.	
34. Supervisor oversees a CTI Team of no more than 10 workers	
Documentation	
Phase Plan form	
35. CTI workers complete a <i>Phase Plan</i> form close to the start of each phase. (~2 weeks before to ~2 weeks after the due date for the phase to start)	
36. Selected focus areas are based on their relevance to long-term housing stability, which is reflected in the "Reasons" section of the <i>Phase Plan</i> .	
Progress Notes form	
37. A progress note is completed for each meeting or phone call (the form is up to discretion of agency)	
Phase-Date form	
38. At weekly supervision meetings, team members discuss clients in context of clients' current phase.	
Team Supervision form	
39. The clinical supervisor completes a <i>Team Supervision</i> form for each weekly team meeting.	
Caseload Review form	
40. The supervisor completes a <i>Caseload Review</i> form for each monthly caseload review meeting.	

A	Total of scores for items 1 through 40	
B	AVERAGE CTI IMPLEMENTATION SCORE (A divided by 40)	

Not implemented	Poorly Implemented	Adequately Implemented	Well implemented	Ideally Implemented
1.0-1.4	1.5-2.4	2.5-3.4	3.5-4.4	4.5-5.0