Structure for Consultation/Coaching Calls E3 Project

A total of 10 consultation calls will be made during the course of this project with a required participation rate of 80% (8) for Victim Advocates (VA). A make up call will be offered toward the end of the project for those VAs who need an additional call to achieve an 80% participation rate.

Calls will be every other week for the first month, then weekly for three weeks to provide support during the implementation of screening, and then every other week until the end of the project. **Please refer to the consultation call schedule that has been provided to you.**

The Purpose for the calls during the first month is to demonstrate to the VA participants a variety of engagement strategies as we work to engage their participation in the process/protocol. The calls will offer more opportunities for VA engagement and for the VAs to implement strategies to engage families early in the process.

* + - All calls will be 60 minutes in length.
    - Each of the participating CACs has been assigned to one of three call groups. All Victim Advocates will participate in their assigned call group.
    - For timing of the calls, please review the schedule previously provided.

**The structure of the consultation calls:**

The purpose of the consultation calls is to support VAs as you implement the skills introduced during the three webinars. Each call will include the participants sharing metrics regarding the number of “clients” served, the contacts, purpose and outcome of those contacts, concerns, observations and questions regarding those interventions.

Each Victim Advocate will identify barriers they have encountered and have an opportunity to get feedback and critical thinking from others on the call regarding problem solving those barriers. The focus of the initial consultation calls will be on the use of the Family Engagement strategies described in Webinar 1 as well as identifying and answering questions regarding the E3 project.

Webinar 2 will provide training on the use of the Child Behavioral Health Screener. VAs will be informed on how to introduce, administer and use the information elicited from the Screening as well as what is involved in making a referral for a Trauma specific assessment including how to communicate with the family and the mental health professionals regarding expectations. How to understand and use the information elicited from the trauma specific assessment in the treatment planning process with the MDT will be punctuated. Following Webinar 2, the consultation calls will include reinforcing the use of the screening tool to identify and document trauma history and to engage the client in the process.

* Identified barriers if any
* Identified resources needed if any, purpose and outcome
* Each additional session of treatment attended documented by date and participants
* Date treatment was terminated by client if applicable
* Barrier/s to completion (specific/s)
* Treatment completion date
* Post treatment assessment
* Celebration of completion

Training for VAs as brokers for treatment will be provided in Webinar 3 and will include TF-CBT; AF-CBT; CFTSI; PSB-CBT; PCIT; CPP and any other EBT’s used by CACs that meet the evidence-based or evidence supported NCA MH Accreditation Standard.

Desk cards have information on target criteria for each of the identified treatments; components of the treatment; structure of the treatment; qualifications for delivery of that treatment and criteria when that treatment is not indicated.

In addition, the desk cards that will be used by the VA to identify what Evidence Based/Supported Trauma Focused treatments are available in their community and in making a list of the treatments provided through linkage agreements. This information can be used to inform the CAC and MDT if there is a need for expanding resources for EB MH treatments.