

Transitional Living Program

Special Population Demonstration

PROCESS STUDY REPORT
APPENDICES



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Transitional Living Program Special Population Demonstration Process Study Report: Appendices

OPRE Report 2021-35

February 2021

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Bellefaire Jewish Children's Bureau (JCB) | UBU Program

Shaker Heights, OH

Bellefaire Jewish Children's Bureau (JCB)'s UBU program provided housing in scattered-site apartments, case management, clinical services, life skills training, and other supportive services to LGBTQ youth who were experiencing homelessness.

Each youth received services from a clinical supervisor and a case manager who assisted youth to identify life skill needs, improve their physical and psychological health, develop a positive support network, finish their secondary education, and build their job readiness skills. The UBU program was youth driven, and youth were responsible for setting their own personal and service plan goals while in the program (including whether or not to participate in mental health or any other referral services); determining whom to include in their social support network; and what educational activities to complete.

Bellefaire clinical staff and case managers were trained in trauma-informed care and de-escalation as part of their continuing education. They regularly met with youths' full service team to discuss youths' individual needs.

Challenges and Lessons Learned

Partnerships. Bellefaire was initially challenged to find appropriate referral and service partnerships for the UBU program. When Bellefaire began the Demonstration TLP, it anticipated most referrals would come from the local LGBTQ center. However, after the UBU program launched, it became clear that the LGBTQ center was mostly attended by adults, not youth. As a result, Bellefaire received very few referrals from the LGBTQ center and had to rethink its major referral sources.

The most popular referral sources for the program became a local charter school, Invictus (which serves several LGBTQ youth who exited the public school system), Bellefaire's street outreach program, and a Bellefaire-run hotline. To encourage youth to disclose their LGBTQ status, Bellefaire tailored its street

Populations Targeted: *Unstably housed LGBTQ youth ages 17-21.*

Number of Youth Served: *Maximum of 18 youth at a time.*

Housing Model: *Up to 18 scattered-site one-bedroom (for individuals) and two-bedroom (for parenting youth) apartments. Each youth received his/her own private apartment leased directly through the building's landlord.*

Top Referral Sources: *Charter schools, self-referral/hotline, street outreach, and adults or other youth.*

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Adult Needs and Strengths Assessment-Transition to Adulthood (ANSA-T):* an individual case planning and service needs assessment.^a
- *Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Casey Life Skills LGBTQ Supplemental Assessment:* a life skills assessment with a focus on LGBTQ issues and terminology.
- *Ohio Scales for Adults:* a tool to measure youths' satisfaction, health and medications, problems, and functioning.^a
- *O*Net:* a career exploration tool.
- *Psychiatric Diagnostic Evaluation:* a TLP-developed toll to collect youths' history of psychiatric treatment and evaluate needs.
- *Psychosocial History Questionnaire:* a TLP-developed questionnaire to collect youths' history of psychosocial treatment and evaluate needs.
- *Schwarzer Self-Efficacy:* a self-efficacy assessment.^a

^a Evidence-based or evidence-informed tool.

outreach campaign to include an icon of a rainbow hand to indicate the program was LGBTQ friendly, and outreach staff wore a similar pin to indicate they were safe to approach.

The local LGBTQ center was also intended to serve as a major partner in providing weekly group sessions for youth in the UBU program. However, shortly after the UBU program launched, staff turned over at the LGBTQ center; the remaining staff were not trained in how to engage with youth with trauma histories. As a result, managing the group sessions became and remained a significant challenge for TLP and LGBTQ center staff.

Physical and Psychological Well-Being. The youth who enrolled in the UBU program presented with more significant levels of trauma than Bellefaire anticipated. Bellefaire originally intended to refer youth with mental health service needs to service providers in the community. Over time, however, it became apparent to staff that youth were not attending these community services. Bellefaire then redesigned the UBU program to include additional in-house clinical service options for youth.

Spotlight on Promising Practices

Stable Housing and Financial Literacy. Bellefaire allowed youth to select what neighborhood they would like to live in (subject to landlord acceptance) so that upon program exit, youth could continue living in their apartment and be established in a neighborhood (i.e., connected to services, employment, education, a social network, etc.). While in the program, youth signed a lease directly with their landlord, which helped to establish a rental history for the youth. An additional agreement was signed with the landlord stating that Bellefaire would subsidize the youth's rent for the duration of the youth's stay in the program; Bellefaire also paid the security deposit. Youth were only responsible for paying for utilities not already included in the rent.

While in the program, youth were encouraged to save money so they could afford to pay rent upon exit from the TLP. Bellefaire also encouraged youth to develop the skills necessary to keep an apartment well maintained by allowing youth to keep whatever portion of the security deposit the landlord returned upon their move out. Though few youth had left the TLP at the time of the site visit, Bellefaire anticipated that upon exit from the TLP, youth would likely continue to live in their apartment and take over paying the rent (if the landlord agreed to renew the lease) or move in with a roommate.

Social and Emotional Well-Being. TLP case managers worked with youth to seek services based on the needs identified in the youths' intake and screening assessments. Because of the immediate trauma and mental health needs of the youth served in the Demonstration, the TLP added additional clinical service staff to its internal programming. Once the TLP clinical staff developed a relationship with the youth, staff were encouraged to help youth access and develop relationships with other clinical providers in the community prior to the youth's exit from the TLP. This process helped connect youth to a system of care that they could access after exit from the TLP.

Bellefaire JCB TLP Demonstration Project Logic Model			
Inputs	Activities	Annual Outputs	Outcomes
Strategy 1: UTILIZE SCREENING AND ASSESSMENT TOOLS TO GUIDE EVALUATION, ASSISTANCE, AND REFERRALS			
Demonstrated Experience with RHY and LGBTQ: RHY Continuum (TLP, SOP, BCP); BJCB array of programs; Cultural sensitivity and competency; Alliance w/ Community Partners.	Culturally Competent <i>Direct & Indirect Outreach</i> to RHY & Stakeholders, Referral Sources/ Partners; <i>Intake & Assessment, Screening</i> : Confidential LGBTQ Self-Identification; RHY's Needs Addressed; <i>ISP</i> ; Service Coordination Plan; Transitional Living Plan; Referral and Engagement to Continuum of Service Linkages.	300+ exchanges with RHY: 200+ receive Gateway Services; Linkages; Safety Plans; 60-120 RHY self-identify as LGBTQ, referred to appropriate services/supports; 11%-15% (15-16) of LGBTQ RHY, 16-21, engaged in TLP Demo ; 100% receive services for mental health, substance abuse, sexual risks.	100% of self-identified LGBTQ youth are directed to LGBTQ services/linkages; 90% participate and find strengths, connectedness (PC); 100% of engaged TLP youth identify feeling physically & emotionally safer and more hopeful for the future w/ fewer risks & mental health/substance abuse issues (SEW-B).
Strategy 2: PROVIDE COMPREHENSIVE SERVICES TO HELP RHY MAKE A SUCCESSFUL TRANSITION TO SELF-SUFFICIENCY			
Identify best practices/innovations for LGBTQ RHY that build life skills/protective factors; Relationships with Community (Continuum of Care), State & National Partners; Commitment to & experience with Evidence-Based, Trauma-Informed Practices & PYD.	Gateway Services; Case Management: Individual Service Plan (<i>ISP</i>); Counseling; Basic Life Skills/TLP Group; Education, Employment; Motivational Interviewing, <i>PYD</i> ; Social Support & Relationship Building; Permanent Connections; Service Linkages; Aftercare.	<i>Case Management and Individual Counseling</i> : 5+ hours/week per youth; <i>Group Life Skills</i> (1.5 hours/ week); <i>Education/Employment</i> : 100% of youth enrolled in school, GED, vocational program, or employed; 85% earn high school diplomas or GEDs in TLP.	90% of engaged TLP youth will re-engage/stay engaged and value education or vocational program (EE); 90% of TLP youth show progress on skill building geared towards school, home, work, community & social/emotional success (EE, PC, SEW-B); 95% of TLP youth report a stronger community network with 1+ safe, permanent connection (PC).
Strategy 3: PROVIDE SAFE, STABLE, AND APPROPRIATE SHELTER			
Scattered-site apartments for LGBTQ RHY.	TLP Case Managers; Self- sufficiency/ outcomes goals; 24/7 Staffed TLP number provides direct assistance; Life Skills Program/Group Counseling/PYD Peer Support; Continuum Service Linkages.	100% of TLP RHY are removed from street dangers, provided safe, appropriate housing; 90% of engaged LGBTQ RHY will maintain independent housing following exit from TLP.	90% of engaged LGBTQ RHY will achieve and value safe, stable living conditions (SH); 85% complete TLP & value self-sufficiency & stable housing (EE, SH).

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Bridge Over Troubled Waters | Apartment Living Pathways Service (ALPS) Program

Boston, MA

Bridge Over Troubled Waters' (Bridge) Apartment Living Pathways Service (ALPS) program provided housing in a single-site shared bedroom facility and 24/7 youth monitoring and support in a dorm-style residence.

ALPS gave youth access to Bridge's array of on-site services, including mental health counseling, education and employment services, and medical care. Mental health counselors and residential counselors worked with youth at intake to complete a series of assessments that informed youths' service plans while in the TLP. Based on the results of the assessments, youth were given some voice in setting goals, such as which life skills they were most interested in developing.

Bridge's mental health counselors were trained in trauma-informed care approaches and worked to integrate these into mandatory counseling sessions with youth. ALPS staff had regular peer practice training on counseling and case management. Staff were also given the opportunity to work with an external consultant who came in once a week to train on cognitive behavioral therapy and dialectical behavior therapy.

Challenges and Lessons Learned

Referrals. Although Bridge already had an existing relationship with the Massachusetts Department of Children and Families (DCF), the program initially found it difficult to expand that relationship into a direct referral model for ALPS, mostly due to challenges in overcoming DCF bureaucracy. For example, DCF was legally unable to share information, such as case notes or assessments, on any of the youth referred. These issues were largely addressed over the course of the Demonstration, and staff reported that the relationship with DCF had strengthened due to the ALPS partnership.

Housing. Bridge was unable to secure a property that would serve as an off-site residence for participants in ALPS. To overcome this challenge, the ALPS program was brought in-house and integrated with Bridge's existing emergency residence program on the building's third floor. Staff reported that this was a

Populations Targeted: Young adults who left foster care after age 18 (up to age 24).

Number of Youth Served: A maximum of six youth at a time.

Housing Model: Site-based group housing located on the third floor of Bridge's downtown administrative building. Youth shared bedrooms in a dorm-style hall.

Top Referral Sources: All youth were referred by the Massachusetts Department of Children and Families (DCF). However, if Bridge identified youth who were already using its services and had left foster care after age 18, it contacted DCF about those specific youth to receive an official referral.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Behavior and Symptom Identification Scale-24 (BASIS24):* a mental health assessment.^a
- *Patient Health Questionnaire (PHQ9):* a mental health assessment.^a
- *Preparing Adolescents for Young Adulthood (PAYA):* a life skills assessment.

^a Evidence-based or evidence-informed tool.

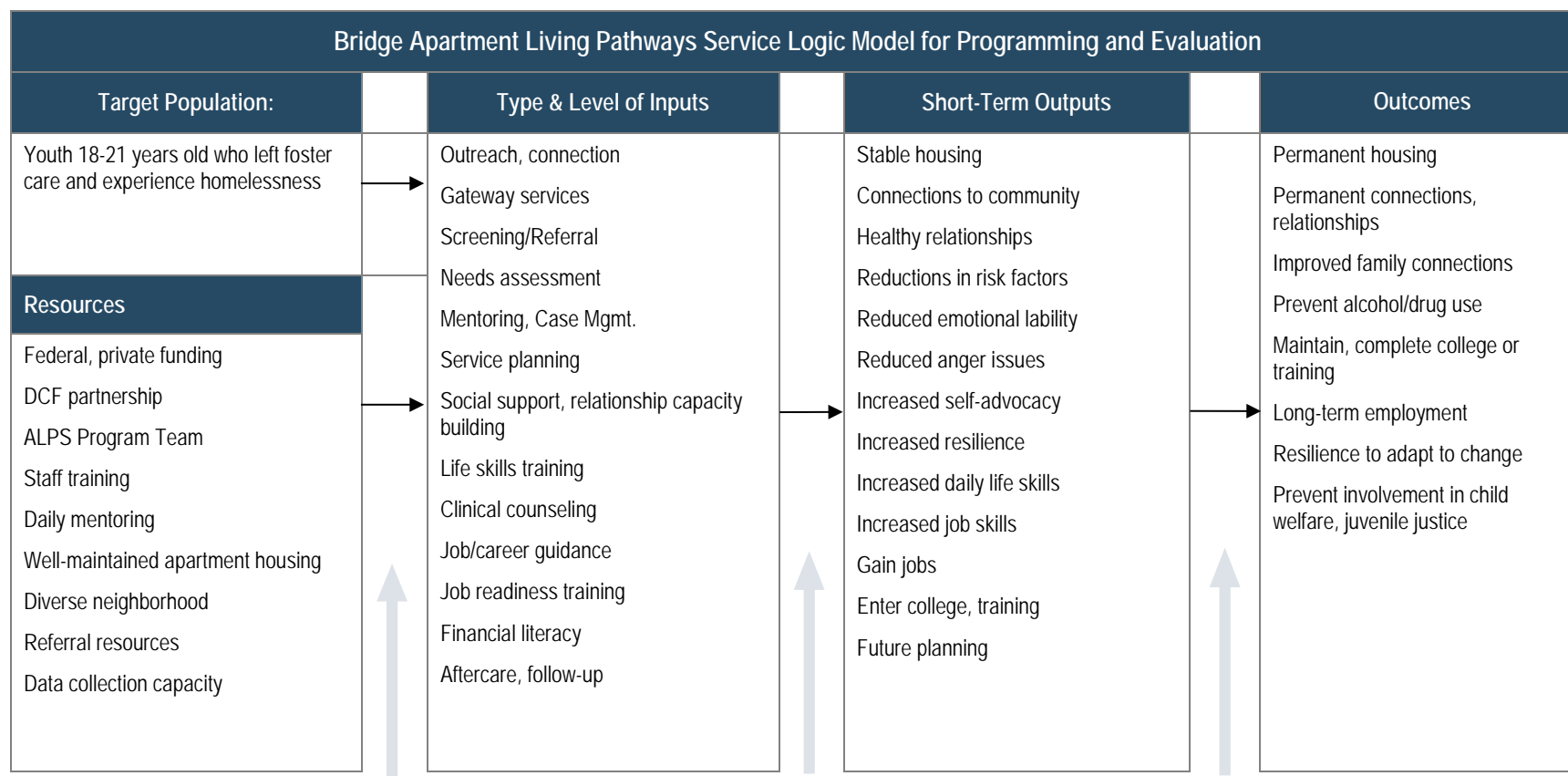
positive outcome for the program in some ways, as locating ALPS on-site made Bridge's services more easily accessible to youth.

Spotlight on Promising Practices

Education/Employment. All ALPS residents worked with a residential counselor on a weekly basis to discuss their service plan and goals. Youth chose a number of different goals to work towards, including educational or employment goals. Youth who wished to work towards those goals were either connected to in-house resources (provided in the same building they lived in) or referred to a number of external partners based on partnerships already well established at the time of the program's development. Bridge had an on-site education coordinator and provided High School Equivalency Test (HiSET) preparation in-house, in which the program estimated about 20 percent of ALPS youth participated. In addition, an on-site employment coordinator regularly sent youth emails with job listings and met with youth one-on-one to work on job readiness skills and provide referrals for additional services.

Permanent Connections. Youth in the ALPS program were expected to attend a weekly community dinner held on Tuesday evenings. Each week, a staff member took a different youth to go grocery shopping, plan the meal, and cook dinner for the rest of the group. The dinner also served as a community meeting, a youth advisory opportunity, and a time to discuss life skills, goals, and any challenges that came up that week. On Wednesdays, youth went on (voluntary) group outings (e.g., sporting events, movies, etc.) with staff—occasions intended to help youth develop relationships with their community outside of Bridge. Most youth in the program were also engaged in education or employment services or training, which gave those youth an opportunity to build positive connections with other adults in a context outside of the ALPS program.

Social and Emotional Well-Being. All ALPS residents were required to participate in regular counseling sessions with the certified mental health team at Bridge. These mental health professionals were involved in service planning and goal-setting discussions with other program staff members so that youths' needs were addressed in an integrated and comprehensive way. The mental health counselors conducted motivational interviewing and used cognitive behavioral therapy to help youth identify their traumas and work through them. To complement this, the ALPS residential counselors' role combined case management and supportive therapy to work through topics of importance in youths' day-to-day lives, from filling out the Free Application for Federal Student Aid (FAFSA) to relationships with a roommate or family member.



Antecedent Variables	Mediating Variables
Risk levels and types: Length of time in foster care; length of time out of care; alcohol/drug use; mental health; education level; experience of abuse/neglect, health, executive function, employment history Demographic characteristics: Age, neurological development level, ethnicity, family background, pregnant/parenting	Level & type of program utilization Perception of opportunities Access to resources Social norms and attitudes Cost of housing

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Family Resources | Safe Place 2B Too Program

Pinellas Park, FL

The Safe Place 2B Too program provided group housing and supportive services to homeless LGBTQ youth. Youth worked with a case manager and 24/7 in-house staff to gain education or employment, improve mental health and relationships, and build daily living, money management, self-care, and communication skills.

Youth provided input to staff about the program in weekly house meetings. TLP staff also took an “open door” approach that allowed youth to provide program feedback outside of the house meetings. However, the program expected youth to agree and adhere to house rules governing conduct and participation. The program was well connected to the local LGBTQ community, including to individuals who mentor youth and organizations that provide programming and services to the LGBTQ community.

TLP staff received training from the TLP program supervisor on topics such as trauma, daily living skills, and cultural sensitivity. Staff also completed a training on trauma-informed care annually.

Challenges and Lessons Learned

Staff Turnover. The program employed a 24/7 program staffing model, which was a challenge for the program. It was difficult for the TLP to find and retain staff given the demands of the position and the program’s financial limitations to increase staff salaries. The program also realized after launch that it needed staff more focused on case management than on therapeutic services. This shift contributed to additional staff turnover and inconsistent case management for youth.

LGBTQ-Only Focus. Although the program served LGBTQ youth exclusively and had built strong relationships with that community, some youth in the program expressed an interest to expand programming to include more non-LGBTQ activities. Youth saw themselves and wanted to be seen by others as more than their sexual identity alone.

Populations Targeted: Homeless LGBTQ youth ages 16-21.

Number of Youth Served: Maximum of 12 youth at a time.

Housing Model: Site-based group house with six bedrooms. Depending on service volume, youth may share a bedroom with one other youth.

Top Referral Sources: Self-referrals; often youth learned about the program from another shelter or school staff.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Beck Depression Inventory:* a screener for depression.^a
- *Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Custom needs assessment:* a TLP-developed assessment to collect youths’ level of family involvement, reason(s) for seeking TLP intervention, legal history, medical/psychiatric/counseling history, educational history, peer relationships/social supports, family history, history of violence/abuse, history of child welfare involvement, financial history, drug/alcohol use history, mental/physical/emotional health status, suicide assessment, and strengths of the client/family.

^a Evidence-based or evidence-informed tool.

Congregate Care Model. Program staff reported that the shared living housing model created a tension between providing important structure and support for youth and being overly restrictive. TLP staff reported it was challenging to house and serve both underage/minor youth (ages 16-17) and adult youth (ages 18-21) in the same program, in part because rules, laws, and expectations differed for the two age groups. For example, youth age 18 and older can legally smoke, but minors cannot; and the older youth had a later curfew and bedtime than did the younger youth.

Engaging Youth in Mental Health Services. There was a need for youth in the program to seek mental health services and counseling, and youth were encouraged by TLP staff to seek support; however, they rarely used the services available. Youth expressed they were often fearful, or they appeared reluctant, to face their mental health challenges. Additionally, the program's mental health counselor worked off-site, which may have contributed to the low take up of services by youth.

Spotlight on Promising Practices

Permanent Connections. TLP staff worked with youth in the program to develop positive relationships with three adults the youth could depend on after their exit from the program. These adults were often a parent, relative, friend, coach, or mentor from another service provider. To further support the development of permanent supportive connections, the TLP partnered with a community LGBTQ service organization to connect youth with its mentoring program that matches youth to LGBTQ community members. The TLP also developed a relationship with a local LGBTQ-friendly church, which was positive for the youth.

Social and Emotional Well-Being. TLP case managers worked to connect youth to services based on the needs identified in the youths' intake and screening assessments. The case manager developed individual service plans for each youth, which were amended throughout the youth's time in the program. The program staff also provided nightly "groups" meetings, which included programing on relationships and communication skills. One curriculum used in the groups is *Love Notes*, which was designed to help youth develop positive relationships with adults and peers, whether those relationships are professional, familial, or romantic.

SAFE PLACE 2B TOO – THEORY OF CHANGE / LOGIC MODEL				
Inputs	Activities	Outputs	Outcomes-Proximal	Outcomes-Distal
<p>Funding- Federal, State, Local, Donations</p> <p>Facility – 12-bed Facility, Owned, Furnished, Licensed, On major bus route, Close to schools and social services</p> <p>Staff -24 hour Youth Care Workers, On-site residential supervisor, Case manager, Counselor III, Overseen by COO, Program Dir.</p> <p>Partners/linkages – McKinney-Vento liaisons, Substance abuse/mental health providers, law enforcement, physical/dental health providers, job readiness, housing services, LGBT-specific services</p> <p>Evidence-based, evidence-informed practices – Positive Youth Development, Trauma-Informed Care, Harm Reduction, Motivational Interviewing, Cognitive Behavioral Therapy, Why Try</p> <p>Reliable and valid screening and assessment tools</p> <p>Staff training – Comprehensive training program:</p> <ul style="list-style-type: none"> • Orientation • On-the-job training • Online training • Workshops and conferences • Staff meeting training <p>Best practices for LGBTQ youth – Nat. Center for Lesbian Rights HHS-SAMHSA, Lambda Legal</p>	<p>Gateway services- Outreach, Harm Reduction</p> <p>24-hour access to services</p> <p>Housing – Safe and stable shelter</p> <p>Intake & assessment– Comprehensive</p> <p>Intensive case management</p> <p>Counseling–Individual, group & family</p> <p>Life skills - Health, goal setting, interpersonal, relationships, building permanent connections, substance abuse/mental health, trauma impact</p> <p>Recreational outings</p> <p>Educational activities</p> <p>Aftercare/follow-up – 1, 3, 6 month follow-up, Support services as needed</p> <p>Program assessment – Ongoing quality improvement:</p> <ul style="list-style-type: none"> • Document • Report • Analyze • Revise • Document • Reassess 	<p>Age 16 up to 21 young people will receive safe, stable shelter, counseling, case management, and aftercare services</p> <p>30 youth will be served over 2 years</p> <p>Individual Service Plan – within 14 days, develop with youth and Family Resources</p> <p>Psychosocial and life skills assessment within 14 days of intake</p> <p>Appropriate referrals for additional services</p> <p>Counseling – Individual, group, and specialized issue counseling:</p> <ul style="list-style-type: none"> * Daily Life Skills Training: Life planning, Goal setting, Problem-solving, Budgeting * Interpersonal skill, Building critical thinking, Conflict resolution * Health * Educational, vocational * Networking and mentoring opportunities/activities, Increased number of permanent connections 	<p>100% of young people served in the program for at least 30 days will have a complete and comprehensive assessment using reliable and valid screening and assessment instruments.</p> <p>100% of youth will have written individual service plans, service coordination, and transitional living and aftercare.</p> <p>Encompassing the four core outcomes.</p> <p>100% of young people served will gain improved skills in money management, interpersonal skills, goal setting, refusal skills, educational/vocational skills, mental and physical health care.</p> <p>100% of youth will be involved with educational and/or vocational activities during their stay in the program.</p>	<p>75% of young people served will improve 90% of independent living skills identified in their service plan for improvement.</p> <p>90% of young people served will be transitioned to safe and stable permanent housing upon a planned exit.</p> <p>80% of young people will have improved functioning and feelings of well-being as measured by the Mood and Feelings Questionnaire after six months in program.</p> <p>60% of young people served will demonstrate a reduction in symptoms of depression as measured on the Beck Depression Inventory upon discharge.</p> <p>75% of young people served will report improved relationships with family members upon discharge.</p> <p>80% of young people served will be able to identify three responsible adults in their aftercare plans that they can rely on as they move into independent living.</p>

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Lighthouse Youth Services | BrightLife Program

Cincinnati, OH

Lighthouse Youth Services's (LYS) BrightLife program provided housing in scattered-site apartments, case management, life skills training, and other supportive services to LGBTQ youth experiencing homelessness. The program aimed to help youth improve their physical and psychological health, develop a positive support network, and build the skills necessary to be successful in school, social situations, and work.

While in the program, youth were encouraged to make decisions regarding their social support network, their service plans and goals while participating in the TLP, and the services they received from LYS and other providers.

BrightLife staff practiced trauma-informed care and had been trained in the STARR Global Learning Network's *Trauma and Loss in Children* program. Staff strove to make BrightLife a safe and affirming environment for the youth served. When interacting with youth, staff sought to recognize the interrelationships between trauma and symptoms of or responses to trauma.

Challenges and Lessons Learned

Referral Partnerships. When BrightLife began, LYS staff realized they could not rely on their typical referral partners and strategies, such as emergency shelters and the local continuum of care's coordinated entry process, to recruit homeless LGBTQ youth. In Cincinnati, this population tended to be uncomfortable engaging with the homeless service system, and systems and institutions generally, and thus did not seek assistance from traditional homeless service providers. LYS attempted to partner with established LGBTQ organizations, such as GLSEN and Parents, Families, and Friends of Gays and Lesbians (PFLAG). However, LYS staff found that these organizations were not well connected to LGBTQ youth—the population LYS served in the Demonstration.

Group Dynamics. Initially, LYS held weekly group life skills classes for youth in the TLP to help develop youths' social network and life skills. However, most of the youth knew one another before entering BrightLife and some had problematic interpersonal histories. As a result, staff had to disband the group meetings because of tensions and high conflict among participants.

Populations Targeted: Homeless LGBTQ youth ages 18-21.

Number of Youth Served: Maximum of 16 youth at a time.

Housing Model: 16 scattered-site one-bedroom apartments located off-site. Each youth received his/her own private apartment leased through the building's landlord.

Top Referral Sources: Self-referrals (via the public library and social media), emergency shelters, other homeless service providers, and other LYS departments.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Daniel Memorial Life Skills Assessment:* a life skills, physical and mental health, support services, and receipt of services assessment.
- *Diagnostic Assessment Form:* an in-depth mental health assessment for those who have a history of trauma or other indications of mental health issues.^a
- *Lethality Assessment:* a tool to assess whether youth may be in danger from an intimate partner.
- *Mental Status Exam:* a mental health assessment.

^a Evidence-based or evidence-informed tool.

Physical and Psychological Well-Being. The population BrightLife targeted for the Demonstration had experienced significant trauma. This is typical of youth served by LYS, but the extent of trauma experienced by BrightLife youth exceeded that of youth in LYS's traditional TLP. TLP staff often observed behaviors from youth that could have benefited from mental health counseling. However, LYS staff were challenged in successfully encouraging youth to seek mental health treatment because youth were very distrustful of systems and institutions. As such, fewer youth received mental health services than staff had hoped.

Spotlight on Promising Practices

Stable Housing and Financial Literacy. When enrolling in BrightLife, youth signed a lease directly with the landlord of their selected apartment complex. Youth also signed a rental agreement between LYS and their landlord stipulating that LYS would be part of the rental process. LYS paid the security deposit and the full rent for each youth's apartment, at first. Over time, youth were expected to pay an increasing amount of their rent, so that upon exit they would be able to pay rent without the TLP subsidy. After one year in the program, youth were expected to pay at least 50 percent of their rent. Staff reported that when youth exited BrightLife, some would be able to access housing subsidies to replace that paid by the TLP, whereas others would likely move in with friends.

Permanent Connections and Cultural Responsiveness. Many youth were estranged from their families because of their sexual identity. As a result, case managers worked with youth to help them develop a dependable social network to support them upon program exit. This network included friends, relatives who were affirming, or other supportive individuals. The core BrightLife staff were LGBTQ-identifying men who were uniquely sensitive to the needs of and challenges faced by youth in the program. Male youth, in particular, developed close connections with the staff and saw them as role models. Female youth in BrightLife, who were all African American, told staff they wanted similar support and role models. In response, LYS started a mentoring program through which three lesbian-identifying African American women volunteered to be mentors. The mentorship program was still in development at the time of the site visit, but LYS staff planned to have mentors and mentees meet at least once per week, with the goal of building a long-term mentoring relationship.

LIGHTHOUSE YOUTH SERVICES LOGIC MODEL				
Activities	Outputs	Short-Term Outcomes	Longer-Term Outcomes	12 Months from Exit
<p>A1: Engage 20 or more youth from streets by enrolling them in program services and housing.</p> <p>A2: House up to 16 youth.</p> <p>A3: Identify and implement reliable screening and assessment tools.</p> <p>A4.1: Deliver services that are informed by and incorporate the principles and activities of trauma-informed care and positive youth development.</p> <p>A4.2: Train direct service providers in LGBTQ cultural competence.</p> <p>A4.3: Provide behavioral health interventions as dictated by individual need.</p> <p>A4.5: Provide individual curriculum of independent living skills, delivered through individual and group instruction, based on assessed skills (Daniel Memorial Life Skills Assessment) for each individual.</p> <p>A4.6: Provide educational interventions as needed, including high school graduation, GED and entry to postsecondary education and training.</p>	<p>Number of:</p> <ul style="list-style-type: none"> • Hard-to-engage LGBTQ who leave the street for housing, as recorded in agency VESTA data. • Youth who continue engagement with housing and services at 30, 60, and 90 days, and at 90-day intervals thereafter (retention rate). • Youth who exit program to positive as compared to negative or unknown destinations as determined by local HMIS VESTA database. • Evidence-based screening and assessment tools implemented. • Proportion of identified service needs for which appropriate service recommendations can be made. • Youth who increase positive scores on assessment scales pre/post services. • Youth who increase their assessed life skills using the Daniel Memorial Life Skills Assessment. • Youth who demonstrate increase in income from entry to exit (excluding illegal or exploitative sources of income). • Youth who maintain stable housing with no recurrence of homelessness in region during 12 months from program exit. 	<p>A1: An increased number of target LGBTQ youth engage with staff to access harm-reduction services.</p> <p>A2: Target group youth and young adults maintain stable housing during term of program services.</p> <p>A3: Youth and young adults are screened for needs and enrolled in needed services.</p> <p>A4: Youth and young adults enroll in services and participate in treatment planning and treatment.</p> <p>A4.5: Youth demonstrate a gain in knowledge and mastery of independent living skill.</p>	<p>A1: More street youth are willing to be connected with housing and housing-based services.</p> <p>A2: Target group youth and young adults are transitioned to a safe and stable permanent exit within 18 months that appropriately matches their level of need after leaving TLP.</p> <p>A3.1: Youth and young adults are linked to appropriate services and interventions based on screening and assessments.</p> <p>A4: Refine model for culturally competent services for the hard-to-serve LGBTQ homeless youth.</p> <p>A4.3: Youth who engage with housing and services for a minimum of six months improve assets, skills, supports, and connections necessary to ensure their social and emotional well-being and satisfactory life circumstances.</p> <p>A4.5: Youth increase their skills, capacities, and financial resources to effectively maintain stable housing and live independently</p> <p>A4.6: Target homeless youth increase skills for self-sufficiency that will keep them stably housed.</p>	<p><u>Long-Term Outcome A:</u> Achieve Stable Housing – defined as placement in culturally relevant, safe, and developmentally appropriate housing.</p> <p><u>Long-Term Outcome B:</u> Establishing Positive Permanent Connections – defined as improved ability to develop and maintain healthy relationships.</p> <p><u>Long-Term Outcome C:</u> Improve Education & Employment – defined as increased employability; and/or increased connection to the workforce; and/or increased academic success.</p> <p><u>Long-Term Outcome D:</u> Establish and Maintain Well-Being – defined as physical and mental health status.</p>
<p>Resources: Funding from U.S. DHHS and agency general funds; 2 vice-presidents, 2 program directors, 1 project director, 2 case managers, 1 youth outreach worker; harm reduction and gateway services and supplies; emergency shelter & crisis services; scattered-site apartments; case management and supportive services, individual service plan; independent evaluator; aftercare services.</p>				

Source: Logic Model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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New Day Youth & Family Services | Adams Program

Albuquerque, NM

New Day's Adams program provided housing in clustered studio apartments, case management, life skills training, and other supportive services to homeless LGBTQ youth and young adults who left foster care after age 18. Each youth received services from a TLP coordinator and a TLP specialist. New Day used a care coordination service model, meaning staff met with youth one to two times a week and held monthly comprehensive "Wraparound" meetings that included the youth's larger care network. Additionally, New Day operates a Life Skills Academy, which youth were required to attend. In addition to the Academy, youth were expected to attend weekly group sessions hosted by the TLP coordinator and TLP specialist that covered other life skills topics relevant to the current needs of youth.

The program was youth driven. During their time in the TLP, youth developed a vision plan with the help of the TLP coordinator to identify their needs under three domains: *Functional* (i.e., housing, education, employment), *Interpersonal* (i.e., developing positive relationships), and *Inside* (i.e., identity and emotional development). The vision plan was discussed and updated at regularly scheduled "Wraparound" meetings.

All TLP staff were trained in the Nurtured Heart approach and trauma-informed care.

Challenges and Lessons Learned

Partnerships. When the Demonstration began, New Day envisioned that a local group home for LGBTQ youth ages 16-17 would refer younger youth into the TLP. However, this partnership between New Day and the group home resulted in very few referrals and the program needed to develop other referral sources such as the state child welfare agency and a local emergency shelter.

Trauma. New Day served mostly Native American and Hispanic youth who were LGBTQ or had left foster care after age 18. Both of these populations presented with deep, complex trauma histories. Many of the youth served had family or personal histories of substance use, poverty, and/or sexual abuse and tended to

Populations Targeted: Homeless LGBTQ youth ages 16-21 and young adults who left foster care after age 18 (up to age 21).

Number of Youth Served: Maximum of six youth at a time.

Housing Model: Six clustered studio apartments located off-site. Each youth received his/her own private apartment leased through New Day. New Day held the lease with the landlord, and the youth held a housing agreement with New Day.

Top Referral Sources: State child welfare agency, a local emergency shelter, and self-referrals.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Adverse Childhood Experiences Survey (ACES):* a history of trauma screener.^a
- *Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Dominance, Influence, Steadiness, Compliance (DISC):* a tool to collect youths' personality and work styles, career strengths, and areas for improvement.^a
- *Progress Pathways:* a TLP-developed assessment tool that covers a range of domains.
- *Psychosocial Behavioral Health Assessment:* a mental health assessment.

^a Evidence-based or evidence-informed tool.

score very high (around a 9 or 10) on the Adverse Childhood Experiences Survey (ACES). This level of trauma is higher than youth served in New Day's traditional TLP.

System Fatigue. Youth entering the TLP directly after leaving foster care at age 18 experienced more fatigue from being in the child welfare system than did youth who entered the TLP after having transitioned out of foster care for some time. Though youth who entered directly from foster care often left the TLP soon after entering, New Day kept the door open, and several did reenter the TLP.

Spotlight on Promising Practices

Stable Housing and Financial Literacy. While youth were enrolled in Adams, New Day held their lease agreements on the TLP apartments and youth held a housing agreement with New Day. Youth paid rent to the TLP, which was set as a percentage of income depending on how much income youth made and their other financial responsibilities. New Day subsidized the remainder of the rent. Upon exit, the rent youth had paid was returned to them. The TLP coordinator worked with each youth to develop a budget and discussed techniques to maximize savings. Each youth had his or her own apartment, which fostered independent living. The TLP coordinator occupied one apartment in the building as an office, something new to the Demonstration and something that made youth feel safe and comfortable while adjusting to living by themselves. When youth exited the program, they were expected to rent another apartment (New Day offered financial support for the first few months and youth could also use their returned rent for initial costs), move in with friends or a significant other, or reunite with family.

Permanent Connections. The TLP conducted "Wraparound" sessions with youth monthly. Youth were encouraged to invite family members, friends, or other adults in their life to attend their session. During the "Wraparound" sessions, youth highlighted their progress towards reaching the goals set in their vision plan. The intent of the "Wraparound" sessions was to promote strengths-based thinking and to build a support network of people outside of the TLP that the youth could access after their exit from the TLP. Building positive relationships was part of the *Interpersonal* domain of youths' vision plan. The TLP coordinator also worked with the youth to help identify ways to build healthy relationships. The TLP's Life Skills Academy also included coursework on developing healthy relationships.

NEW DAY'S SPECIALIZED TLP LOGIC MODEL					
Target Population: 1) LGBTQ young people experiencing homelessness who are 16-21 years of age and 2) young people who left the foster care system after age 18, up to age 21.					
Assumptions	Goals	Inputs	Activities	Outputs	Outcomes
1. Basic needs must be met before other goals can be achieved.	1. All basic needs are met: including housing, food, and basic hygiene products.	Well-trained culturally sensitive staff.	City, county, and statewide outreach.	Increased services for target populations. Needs are addressed and met.	Young people develop an understanding/ expectation of safety and security.
2. Obtaining a GED or high school diploma provides a broader range of professional opportunities, access to higher paying jobs, and is a key benchmark for moving out of long-term poverty.	2. Increase functional skills knowledge and success—with a particular focus on education and employment.	Community-based services, resources, and trainers/educators.	Complete needs assessment. Educational engagement.	Increased academic success. Increased employment skills and experiences.	Education and employment.
3. Navigating and building healthy relationships is essential to developing meaningful connections.	3. Increase interpersonal skills—to navigate and build healthy relationships with family members, friends, intimate partners, coworkers, and supervisors.	Business support.	Life skills development: employment, daily living, healthy relationships, and sense of self.	Increased healthy relationship knowledge.	Permanent connections.
4. Internal wellness and self-love are crucial to long-term self-sufficiency.	4. Increase internal wellness and self-knowledge.	Technology and appropriate materials.	Wraparound meetings.	Increased self-esteem/ positive sense of self.	Social and emotional well-being.
5. Stable housing is the foundation for safety and stability across many life indicators, and increased aftercare support helps maintain housing stability.	5. Discharge from the program to safe and stable living environment and receive ongoing aftercare support.	Consistent strengths-based relationship-focused services.	Discharge planning. Aftercare services.	High rates of safe and stable discharges. Increased safety net supports through aftercare.	Stable housing.

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Nexus4Kids | Acceptance, Compassion, Equity (ACE) Program

Auburn, WA

Nexus4Kids (Nexus) provided clustered, two-bedroom (shared) apartments for LGBTQ youth ages 16-22. The service model in the ACE TLP drew on both a trauma-informed and a positive youth development approach.

The program's staffing model, which included specific staff roles for case management, life skills, and mental health, was designed to support participating youth across the full spectrum of their needs and allowed youth to establish durable and supportive relationships both with adults on staff and with their peers in the program. Youth were expected to attend weekly group meetings with other program participants and weekly one-on-one case management sessions.

Nexus4Kids's partnership with the Lavender Rights Project allowed TLP staff to access a training specific to working with LGBTQ youth. Multiple staff noted this training was of particular help during the process of working with youth in the Demonstration.

Populations Targeted: LGBTQ youth ages 16-22.

Number of Youth Served: Maximum of eight youth at a time.

Housing Model: Four clustered two-bedroom apartments located off-site; youth shared units and gender-neutral bathrooms, but not bedrooms. Youth signed a housing agreement with Nexus, which held the master lease.

Top Referral Sources: Other programs operated by Nexus (i.e., shelter and drop-in programs) and other transitional and emergency housing providers in the community.

Screening and Assessment Tools: The TLP used the following screening and assessment tool during eligibility and intake:

- *Casey Life Skills Assessment:* life and independent living skills assessment.^a

^a Evidence-based or evidence-informed tool.

Challenges and Lessons Learned

Partnerships. Nexus4Kids encountered significant difficulty in establishing positive partnerships with local employers and housing providers, which affected the ability of youth to secure employment with employers near their ACE TLP apartment. As a result, youth in the TLP often commuted to Seattle, in the northern part of the county, in order to access services and employment opportunities. Nexus encountered similar challenges in identifying an apartment complex willing to accommodate its population of homeless youth.

Nexus4Kids also encountered difficulty working with King County's coordinated entry system. Initially, the TLP was required to only accept referrals through the coordinated entry system, but struggled to get a sufficient number of referrals to fill the program. To overcome this challenge, staff at Nexus4Kids negotiated with the coordinated entry staff to allow for the program to enroll youth directly in the TLP if a bed remained unfilled for more than one week. Once this was negotiated, Nexus4Kids was able to quickly fill the TLP through internal referrals (such as youth who had accessed the agency's drop-in center) and referrals from partner agencies.

Eligibility Screening. Nexus4Kids had to make programmatic changes in response to challenges that arose among the youth initially enrolled into the TLP. When it began operating the ACE program,

Nexus4Kids did not conduct extensive mental health assessments before enrolling youth. As a result, several youth with mental health needs were enrolled into the program but program staff were unable to properly serve them. The TLP modified its processes to both (1) increase mental health screening during the eligibility process to assess applicants' readiness for the program, and (2) add a more structured approach to setting behavioral expectations and monitoring behavior.

Nexus4Kids reported that its experience with the Demonstration allowed it to successfully apply for an additional TLP grant that staff believe will allow it to overcome some of the challenges encountered during the Demonstration.

Spotlight on Promising Practices

Education/Employment. All youth who entered the TLP were required to establish some form of educational and employment goals. The goals were defined broadly and could include working on a résumé, obtaining a school transcript, or exploring school enrollment by attending an open house. Through its goal-setting process, the program provided in-house educational and career planning support.

Although the TLP did not have a specific employment requirement, it aimed to help youth gain work experience. The program expanded its existing partnerships with Seattle-based organizations to provide youth with foundational work experience that allowed them to safely and securely enter the labor force. For example, the program expanded its relationship with New Horizons's barista training program in Seattle, through which youth earned a stipend, learned a skill, and developed soft skills for long-term employment. Nexus4Kids also fostered employment opportunities in South King County by reaching out to its board members, many of whom are large business owners in the region. This resulted in several youth gaining employment at an Amazon distribution center. Additionally, the TLP also contracted with a human resources specialist to help connect youth to jobs available at local businesses.

Permanent Connections. The Demonstration TLP was designed to encourage youth to build strong connections with other youth—particularly their roommates, but also other program participants. One way this occurred was through group meetings held one evening per week. The focus of the group meetings was peer support and bringing in outside resources and group training. Youth took significant ownership over the tone and content of the meetings and established clear ground rules for what behavior would and would not be tolerated in those spaces through a "comfort agreement." Staff reported that youth found spending time with others who had been through similar experiences to be validating, and that the time helped to reduce the feeling of isolation and difference with which youth entered the program. Youth in the TLP also developed relationships with the TLP staff, some of whom also identified as LGBTQ, which helped to strengthen staff's connection to youth.

NEXUS4KIDS TLP FOR HOMELESS LGBTQ YOUTH LOGIC MODEL				
Program Requirements	Activities	Outputs	Outcome	Measures
Increase comprehensive and effective identification of youth needs.	<ul style="list-style-type: none"> Implement the Casey Life Skills Assessment tool as part of all case management in program. Ensure that all staff are trained on Casey Life Skills Assessment, motivational interviewing, trauma-informed care, and youth development approach. Ensure that all youth have a strong voice in setting their own goals and objectives. 	<ul style="list-style-type: none"> Case management incorporates Casey Life Skills Assessment as a base for ensuring that all youth life domains are assessed. Case management plans are developed with each youth resident. Case management plans include specific goals defined by youth to address identified needs. 	Youth served in the program are linked to appropriate services, resources, and interventions.	Review of case management records and outcomes against screening/assessment results.
Increase transition of homeless LGBTQ youth to self-sufficiency.	<ul style="list-style-type: none"> Shelter as needed to stabilize Transitional housing Case management Basic life skills education Employment/education planning and linkage Counseling Substance abuse services Aftercare Leadership development activities with youth in the program. 	<ul style="list-style-type: none"> Provide 12 youth with transitional housing services. 12 youth gain work experience, complete a pre-employment program or internship. 12 youth participate in substance abuse prevention and/or treatment. 12 youth participate in education and/or employment-related case management. Youth develop a youth leadership team to inform program goals and activities. 	100% of RHY will engage in supportive services (i.e., case management, counseling, substance abuse prevention, education/employment readiness services).	<ul style="list-style-type: none"> Exit Survey. Internal data tracking. % of youth who meet two or more case management goals.
Increase the number of RHY in safe & stable housing.	<ul style="list-style-type: none"> Street outreach Shelter Transitional housing Case management Individual assessments 	<ul style="list-style-type: none"> 12 youth will participate in transitional housing program. 12 youth will participate in housing-linked case management. 12 youth will increase their skills for independent living. 	<p>75% of youth exit program with safe & stable housing.</p> <p>75% will remain in safe and stable housing six months later.</p>	<ul style="list-style-type: none"> Internal data tracking. 6-month aftercare follow-ups. Exit interviews.

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Promise House | Lifestyles Program

Dallas, TX

Promise House's Lifestyles program provided LGBTQ youth and young adults who left foster care after age 18 housing in one of two congregate settings. Youth lived in either the "LGBTQ House" or the "Aging Out House," depending on their personal circumstances, and they received either a single or shared bedroom. Lifestyles staff provided housing and services aimed to help stabilize youth, address trauma, build self-esteem, and prepare youth for independent, self-sufficient living.

All youth received intensive hands-on case management and psychological counseling (both individual and group therapy) that was tailored to their needs based on intake assessments and ongoing informal needs assessment. Completion of these assessments occurred as part of case management, which was provided by a trained counselor. Upon program entry, youth also received a full physical check-up (including a STI screening and a tuberculosis test), a mental health evaluation from local health care professionals; they received follow-up care based on findings.

Promise House staff received monthly training on a broad range of professionally relevant topics such as LGBTQ inclusivity, trauma, and trauma-informed care.

Challenges and Lessons Learned

Partnerships. Making inroads with the foster care community was a challenge for Promise House. In addition, young adults who left foster care after age 18 were harder to attract to the program than were LGBTQ youth because they tended to distrust systems/institutions and were inclined to avoid formal programming after exiting foster care. As a result, Lifestyles had more success serving LGBTQ youth.

Identifying a good job training partner that would accept youth from the program, provide job training, and build employment readiness was another challenge for the TLP. Ideally, the TLP would have liked to build a pipeline from Lifestyles into employment, but nothing materialized. Instead TLP staff connected youth with the Texas Workforce Commission, brought in guest coaches to help with résumés and interview skills, and worked with youth one-on-one to link them to employment.

Populations Targeted: Youth ages 18-22 who are LGBTQ or left foster care after age 18.

Number of Youth Served: Maximum of eight youth at a time.

Housing Model: Two group homes – one for LGBTQ youth and one for young adults who left foster care after age 18. Each home had four beds (two single- and one double-occupancy rooms) and two shared bathrooms.

Top Referral Sources: Self-referrals due to word-of-mouth or internet searches (for LGBTQ youth), referrals from a resource center (for foster care youth), and a variety of local organizations.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Ansell-Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Informal trauma screener:* an abuse and neglect screener.
- *Substance Abuse Subtle Screening Inventory (SASSI):* a screener for alcohol and drug issues.^a
- *Teate Depression Inventory (TDI-2):* a screener for depression.^a

^a Evidence-based or evidence-informed tool.

Spotlight on Promising Practices

Permanent Connections. Staffing was an important part of the program's efforts to help youth build permanent connections. Key program staff had lived experience as members of the LGBTQ community. The program was managed by a licensed social worker who identified as a lesbian, and all youth in the program were provided in-house counseling by a therapist who was transgender. Staff reported that having adult role models helped youth feel connected to the program and to the staff. Moreover, staff were able to help youth emotionally process difficult experiences and suggest strategies to handle challenges they faced based on staff's own personal experience.

To help youth develop additional permanent supportive connections, TLP staff encouraged youth to establish a "created family" and to understand that family didn't have to be the one they were born into, they could create it. Staff linked youth to local resource centers and support groups geared towards the LGBTQ community, and connected interested youth with a church that was welcoming to the LGBTQ community. These resources offered youth fellowship and mentoring that supplemented that provided by the staff and peers in the program and would remain available to youth after program exit.

Social and Emotional Well-Being. Staff reported that feeling included and accepted for who they are, being part of a community, and building a "created family" all helped youth build self-esteem. All youth in the TLP received weekly case management from the program manager, who was a trained counselor; they also received individual and group therapy from in-house counselors. Through these services, youth had the opportunity to get regular professional mental health care free of charge. The care youth received was tailored based on formal needs assessments at intake and on knowledge gained informally as staff interacted with youth. The program staff reported working as a team to identify and inform one another of needs to be addressed.

PROMISE HOUSE TLP LOGIC MODEL			
Goal: Help youth create permanent connections.			
Target Population: LGBT youth ages 16-21 and young adults ages 18-21 who had left foster care.			
Objective: Connect 100% of program participants with a supportive family member, Promise House staff, or community group.			
Assumption: Youth who have healthy communication skills and strong connections to adults who care about them will be more prepared to face a crisis situation (i.e., loss of job or housing).			
Inputs	Outputs/Activities	Outcomes	Indicators
<ul style="list-style-type: none"> • Counseling interns • Case managers • Volunteers • Partners at local community groups • Parenting classes • Services available in Spanish 	<ul style="list-style-type: none"> • Connect 100% of clients to support groups; that is, churches, extra-curricular activities, special interest groups • Provide family therapy to 100% of eligible clients 	<ul style="list-style-type: none"> • 85% of teens in transitional living services, for six months or longer, will improve safety in relationships and communication skills by demonstrating a 20% improvement on pre- and post-test competencies on the Ansell-Casey Life Skills Assessment: Relationship and Communication Skills Subtest 	Ansell-Casey Life Skills Assessment; ClientTrack service delivery data
Goal: Help youth improve their social and emotional well-being.			
Target Population: LGBT youth ages 16-21 and young adults ages 18-21 who had left foster care.			
Objective: Provide ongoing medical and psychiatric care to 100% of program participants.			
Assumption: Meeting the physical and mental health needs of youth will result in their increased well-being. It will also allow them to focus on obtaining housing, employment, or education.			
Inputs	Outputs/Activities	Outcomes	Indicators
<ul style="list-style-type: none"> • Parkland med van • Metrocare psychiatric services • Case managers • Direct care staff • Volunteers (individual and group) • Counseling interns 	<ul style="list-style-type: none"> • 100% of clients will receive a medical/psychiatric screening • 100% of transgender youth will receive specialized medical care • Offer information about mainstream resources to 100% of clients • 100% of clients will receive life skills training 	<ul style="list-style-type: none"> • 95% of youth will improve self-esteem • 70% of youth will improve depressive symptoms • 95% of youth will be connected to mainstream resources 	Rosenberg Self Esteem Scale, Beck Depression Inventory; ClientTrack service delivery data

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Preble Street | Maine Transitional Living Collaborative (MeTLC)

Portland, ME

The Maine Transitional Living Collaborative (MeTLC) was a partnership between Preble Street in Portland and New Beginnings in Lewiston, together serving much of the state. The program model employed two housing types: community-based rapid re-housing and supervised apartments (supportive housing) with 24/7 supervision. Each partner organization had four units of supportive housing (for a total of eight units) that were used for youth with chronic patterns of homelessness, history of considerable trauma, and mental health and/or substance use disorders. These youth were provided intensive services and case management. The remaining youth were provided rapid re-housing assistance and a lighter touch of services, though regular case management was still required.

For all youth, MeTLC master-leased apartments and gradually reduced the amount of rent it contributed over time. In keeping with a commitment to a positive youth development model, MeTLC prioritized youth access to housing and services, implementing a “low barrier” model of care with built-in flexibility around rent payments and other program requirements. “Keeping youth housed” was identified as its primary goal; however, youth were also expected to secure or work towards securing employment.

TLP staff were required to complete training on trauma-informed care, mental health, substance use disorders, and harm reduction.

Challenges and Lessons Learned

Self-Identification. During the initial stages of implementing the Demonstration grant, staff had a difficult time appropriately assessing service needs through the Casey Life Skills GLBTQ Supplemental Assessment, as youth they encountered were not comfortable revealing their sexual or gender identity. Youth, particularly those from asylum-seeking communities, were hesitant to self-identify as LGBTQ and it took several meetings with case managers before they would identify as such. To help overcome this challenge, program staff employed motivational interviewing and other trauma-informed and positive youth

Populations Targeted: LGBTQ youth ages 18-21.

Number of Youth Served: Maximum of 8 youth at a time in supportive housing and 20 youth at a time in rapid re-housing.

Housing Model: Tenant-based housing in scattered-site units.

Top Referral Sources: An affiliated teen center, the local drop-in center, street outreach staff, and word-of-mouth (self-referral).

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *AC-OK Adolescent Screen for Co-Occurring Disorders:* a screener for mental health, trauma-related mental health issues, and substance abuse.^a
- *Adolescent Alcohol and Drug Involvement Scale:* a tool to measure youths' level of drug involvement.
- *Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Casey Life Skills GLBTQ Supplemental Assessment:* a life skills assessment with a focus on LGBTQ issues and terminology.
- *Human Trafficking Assessment:* a tool to identify potential victims of trafficking.

^a Evidence-based or evidence-informed tool.

development framework practices to actively navigate youths' fear of stigma based on their gender or sexual identity.

Intense Service Needs. Another challenge encountered by MeTLC was the rise in serving youth with significant mental health issues. Significant mental health issues complicated the ability of youth to live independently. Although MeTLC connected youth with such needs to mental health providers, issues of apartment cleanliness routinely manifested and threatened youths' and the program's positive relationships with landlords. To try to overcome this challenge, TLP staff held monthly meetings with youth in their units, assessed their living conditions, and helped them clean and address other basic needs, as necessary. This allowed TLP staff to have early insight into whether a youth was struggling with mental health, and it provided the opportunity to connect youth with services in addition to preventing the apartment from becoming unhealthy.

Spotlight on Promising Practices

Stable Housing and Financial Literacy. Both Preble Street and New Beginnings developed strong relationships with local landlords that they were able to rely on to house youth through the Demonstration. As such, the MeTLC provides master-leased apartments directly with the landlords, which alleviated the pressure of finding landlords that would rent to homeless youth. Youth enrolled in the Demonstration signed a "bill of rights" with the TLP, which outlined their responsibilities as tenants. Youth paid 10 percent of the rent for the first three months; 20 percent of the rent for the next three months; and 30 percent of the rent thereafter. TLP staff met with youth once per month in their housing unit, which allowed case managers to gauge whether youth were keeping up on basic housekeeping, such as laundry, cleaning, and dishes. Issues of cleanliness were of particular concern to landlords, so the home visits served the dual purposes of assessing and addressing youth needs and managing relationships with landlords.

Education/Employment. Youth enrolled in MeTLC identified education and employment goals as a part of their individual service plans. Both Preble Street and New Beginnings had programs located on-site to help with education-related services, such as GED preparation, and referrals to an alternative high school. Due to the age of the population, most youth were working to either secure employment or gain more stable employment. To assist youth with their employment goals, TLP staff connected youth to Goodwill Industries to receive hands-on vocational experience. All youth who were interested were also provided in-house job readiness assistance, such as résumé building, communication assistance, and guidance on how to dress for a job interview.

PREBLE STREET TLP LOGIC MODEL

The following chart represents the framework for the Maine Transitional Living Collaborative. All activities will be performed by Preble Street and New Beginnings skilled case managers, life skill workers, social work supervisors, and collaborative partners.

Goals	Inputs	Activities	Outputs	Outcomes
STABLE HOUSING: To increase physical and emotional safety for runaway and homeless youth through the provision of safe, stable housing and trauma-informed supportive services	Program Director and Supervisor, Case Managers, and Life Skills Workers and collaborative partners: i.e., Day One (mental health and substance abuse); Homeless Health Teen Clinic (health care); the Street Academy (education and employment)	<ul style="list-style-type: none"> Individual service plan with holistic short- and long-term goals including education, employment, substance abuse, mental health, physical health, family, and social/ recreational. Goals revised every three months Referrals for support within Teen Center and community providers Transitional Living Plan using life skills assessment and skills-building activities Life Skills Workers teach, support, mentor 	<ul style="list-style-type: none"> Youth meet goals in significant life areas through treatment, programming, and activities offered Youth gain independent living skills through work on service plans and experiential learning in apartments using Transitional Living Plan 	<ul style="list-style-type: none"> 85% remain in the program past the first 30 days of apartment residence. 80% of full participants will find and remain in permanent housing and successfully complete the program.
WELL-BEING: To develop relationships with promote increased well-being through evidence-based assessments and interventions, counseling, referrals, and positive activities	<ul style="list-style-type: none"> Case Manager and Life Skills Workers support treatment and service goals Day One provides low-barrier mental health and substance abuse services Homeless Health Teen Clinic offers health care daily at Teen Center 	<ul style="list-style-type: none"> Individual service plans completed by TLP Supervisor with each youth include goals in all areas as possible Outreach by providers at meals and the drop-in establishes relationships with street youth Crisis and ongoing treatment available on-site and with flexibility 	<ul style="list-style-type: none"> Youth eliminate or decrease substance abuse and maintain a plan for continuing services Youth develop relationship with mental health counselors as needed Youth demonstrate improved control over substances, mental health, and physical health through updated service plans that meet short- and long-term goals 	<ul style="list-style-type: none"> 100% of participants will complete an evidence-based screening tool assessment. 80% of full participants will make progress on their living skills goals as measured assessment. 80% of full participants will utilize referrals to resources for physical health, income support, and other services. 75% of full participants will participate in mental health and/or substance abuse counseling. 75% of full participants will participate in sexual identity support groups. 90% of full participants will have a primary care physician upon exit.

Goals	Inputs	Activities	Outputs	Outcomes
				<ul style="list-style-type: none"> 75% of full participants will participate in positive youth development framework activities that promote protective factors
EDUCATION AND EMPLOYMENT: To expand opportunities for youth to become self-sufficient and contributing members of society through education and the development of vocational and life skills	Entire team with primary support by Life Skills Workers and support from collaborative partners, including the Street Academy	<ul style="list-style-type: none"> Individualized Assessment and Transitional Living Plan Individual and group life skills sessions Mentoring and experiential learning in apartment and community Use of collaborative partners and community resources to develop career planning and community service involvement 	Youth gain independent living skills through combination of work on service plans and experiential learning in apartments using their Transitional Living Plan	<ul style="list-style-type: none"> 80% of full participants without a diploma will obtain a high school or HiSET by the time of exit from the program 75% of full participants without a diploma or GED will earn credits towards a diploma, pass pre-GED tests, and/or obtain a diploma/GED by the time of exit 70% of full participants will obtain a job or volunteer placement while in the program
PERMANENT CONNECTIONS: To increase permanent connections for runaway and homeless youth through the strengthening of family and peer relationships, stable housing, and other protective factors	TLP case managers, Life Skills workers, Teen Services staff, Teen Center volunteers, collaborative partners, and community resources	<ul style="list-style-type: none"> Individual and group sessions focused on life skills Mentoring and experiential learning in apartment and community Transitional Living Plan using life skills assessment and skills-building activities Life Skills Workers teach, support, and mentor Individual service plan including holistic short- and long-term goals including social and recreational activities Use of community resources and collaborative partners 	<ul style="list-style-type: none"> Youth gain skills and community connections through work on service plans and experiential learning in apartments using their Transitional Living Plan Youth develop and maintain relationships with TLP staff Youth develop positive peer relationships 	<ul style="list-style-type: none"> 75% of participants completing the program will show progress or improvement in their natural supports and permanent connections, to be recorded at time of discharge 90% of full participants identify a positive support network that acknowledges and accepts their sexual identity 60% of youth completing the program will agree to ongoing aftercare

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

Volunteers of America Los Angeles (VOALA) | Stepping Stones Program

Los Angeles, CA

Volunteers of America Los Angeles's Stepping Stones program provided private bedrooms to LGBTQ youth ages 16-21 within a single-site facility. The goals of the Stepping Stones program were to create a safe environment for youth while providing services to prepare youth for exit to independent living.

The program partnered with community service providers to connect youth to employment, legal, medical, educational, and mental health services. In addition, youth had to be willing to work or go to school and devote 70 percent of their earned income towards a savings account to support a successful transition to permanent housing.

Stepping Stones case managers received formal training in trauma informed care. Staff also completed training on a variety of other topics, such as sensitivity training.

Challenges and Lessons Learned

Creating a Safe Environment. The program identified two initial challenges: (1) high turnover, and (2) youth who struggled with adequate communication and relationship skills associated with their trauma histories, prior system involvement, and lack of acceptance from family and others related to their identity. To help overcome these challenges, the TLP redesigned some core aspects of its programming. Initially, the program was designed to house two youth per bedroom; however, staff determined that youth would benefit from additional privacy to support their perceptions of safety, promote healthy relationships, and reduce conflict (i.e., conflicting work/sleep schedules). Staff reported that perceptions of safety improved after youth were given private bedrooms and the program implemented a healthy relationship curriculum where youth could learn to better understand their thoughts and feelings. These improvements cultivated a sense of safety and decreased the rate of turnover.

Populations Targeted: LGBTQ runaway and homeless youth ages 16-21.

Number of Youth Served: Maximum of eight youth at a time.

Housing Model: Duplex consisting of a total of eight bedrooms where youth received their own private bedroom and shared common living areas.

Top Referral Sources: Word-of-mouth/other youth, LA LGBTQ, Long Beach Youth Centers, and Child Welfare/Child Protective Services agencies.

Screening and Assessment Tools: The TLP used the following screening and assessment tools during eligibility and intake:

- *Casey Life Skills Assessment:* a life and independent living skills assessment.^a
- *Casey Life Skills GLBTQ Supplemental Assessment:* a life skills assessment with a focus on LGBTQ issues and terminology.
- *TLP Pre-Screening Questionnaire:* a TLP-developed tool to collect youths' general information, education history, employment history, medical/psychiatric/ substance abuse history, legal/gang history, life skills knowledge, and personal goals.

^a Evidence-based or evidence-informed tool.

Spotlight on Promising Practices

Permanent Connections. TLP staff recognized that the youth coming into the program had a history of high mobility and transitory living arrangements, and they lacked supportive connections and acceptance. TLP staff worked with youth to develop a trusting relationship that laid the groundwork for youth to be able to build permanent connections with others. The TLP staff used formal and informal opportunities to interact with youth to understand their family history and potential for promoting positive adult connections. The individual service plan (ISP) TLP staff developed with youth guided staff to help identify individuals with whom youth were connected in regard to their education, employment, housing, and personal goals that could serve as a support network for the youth. Staff and youth revisited and updated the ISP throughout youths' stay in the TLP.

The staff modeled unconditional acceptance while acknowledging the unique contributions of each youth and encouraged youth to develop greater self-acceptance and less social isolation. The TLP welcomed alumni to visit and share personal stories of growth and connection after their program exit. Youth often initiated and stayed connected to the TLP team after program exit for continued support and assistance while youth navigated their aftercare plans.

Creating a group identity and sense of belonging was also an important component to the development of healthy relationships among those living together at the TLP. The TLP designed a collaborative activity called the "Living Promise," which created a list of positive affirmations that youth could support and model with one another and foster skills for developing meaningful relationships within and external to Stepping Stones.

Social and Emotional Well-Being. The TLP placed a strong emphasis on social and emotional well-being and monitored the program climate to ensure youth felt safe both physically and psychologically. Stepping Stones adapted the Effective School Battery (Gottfredson, 1984) to measure the climate of the residence in areas of general attitude, fairness and respect, and safety. The feedback assisted in real-time decision making for implementing improvements in TLP policies. For example, a suggestion box was added to the common area to give youth a safe opportunity to voice any concerns without fear of negative consequences.

Stepping Stones also provided trauma-informed training to its staff using the *Community Connections* curriculum sponsored by Volunteers of America and the Casey Foundation to support youth who have experienced trauma. Recognizing that trauma can be triggered at any time, the team provided a comfortable "processing chair" in the case manager's office where youth could sit without an appointment and as often as needed to receive support from the TLP staff.

Stepping Stones also partnered with the state's Department of Mental Health for referrals to both individual counseling and a peer support group, both of which youth could continue to access after youth exited the TLP.

VOLUNTEERS OF AMERICA LOS ANGELES – TLP LOGIC MODEL				
Target Population <ul style="list-style-type: none"> LGBTQ runaway and homeless youth ages 16-21 in LA County, California 	Activities	Outputs	Transitional Living Program (TLP) Goals: To create a pathway that helps <i>LGBTQ runaway and homeless youth (RHY)</i> ages 16-21 in LA County, CA transition from homelessness to self-sufficiency through stable housing, education/employment supports, permanent connections, and social & emotional well-being. <i>*Outcome percentages are based on the program's capacity to serve a max of 20 youth at any given time. Anticipated length of stay in program is 18 months.</i>	
Resources	Outreach: <ul style="list-style-type: none"> Conduct outreach strategies that are culturally, linguistically, gender/LGBTQ appropriate Target: LGBTQ RHY ages 16-21 	<ul style="list-style-type: none"> # of community outreach events # of social media posts #/types of outreach materials shared with youth # of youth contacts made # of gateway items provided Types of referral sources given for evidence-based and trauma informed services 		
Sustainable Funding <ul style="list-style-type: none"> Local, state & federal grants Agency, in-kind volunteers 	Intake <ul style="list-style-type: none"> EB assessment ASI/Casey Assessment (Strengths, needs, life skills, mental, trauma, substance abuse) 	<ul style="list-style-type: none"> # of assessments completed 		
Facilities <ul style="list-style-type: none"> Accessible, safe, and stable residential facility Staff on-site 24/7 	Positive Youth Development <ul style="list-style-type: none"> Collaborate on Individual Transitional Living Plans (ITLP), Individual Service Plans (ISP), Service Coordination Plans (SCP) Participate/set agenda for biweekly program meetings Participation in community service Participate in Motivational Interviewing (MI), Thinking For A Change (T4C), Seeking Safety (SS), and Attachment, Self-Regulation, and Competency (ARC) 	<ul style="list-style-type: none"> # of ITLPs, ISPs, SCPS developed # of biweekly meetings attended # of weekly service hours # who complete T4C, SS, ARC 		
Program Referrals <ul style="list-style-type: none"> Outreach teams Local shelters Community Partners Los Angeles County courts, probation, and other facets of criminal justice system 	Wraparound Supportive Services <ul style="list-style-type: none"> Safe housing with on-site staff Mental care Medical/Dental care Legal aid/assistance Substance abuse counseling Connection to insurance and eligible benefits Other services (e.g. pregnancy services) as needed 	<ul style="list-style-type: none"> # of program graduates # who receive mental health services # who receive medical/dental health services # who receive substance abuse services/ SA counseling # who are connected to insurance and eligible benefits # & types of other services used (e.g. LGBTQ, pregnancy) # reporting safety in survey 		
Organizational Readiness <ul style="list-style-type: none"> Existing, trained supervisors Staff training program Bilingual staff Cultural, linguistic, gender competent P&P (Confidentiality, Anti-harassment, LGBTQ) Disaster Plan 	Life Skills <ul style="list-style-type: none"> Health Promotion & Education Goal setting/ Life planning Household management/budgeting Interpersonal Skill Building PYD skills/protective factors 	<ul style="list-style-type: none"> #/types of life skill classes attended # of pre/post life skills tests # of positive adult connections made 		
Program Design <ul style="list-style-type: none"> Evidence-based Trauma-focused COI process/evaluation 	Education <ul style="list-style-type: none"> Diploma, GED preparation Post-secondary enrollment 	<ul style="list-style-type: none"> # who receive diploma/GED # in post-secondary options 		
Partners/Services Linkages <ul style="list-style-type: none"> Journey Out/ Children of the Night El Centro de Amistad Our House LA LGBT Center Village Family Services LA Police/ Sheriff's Department LAUSD HEP/McKinney-Vento/ LA Mission College Kedren/ LA Christina Health Center Substance abuse prevention, education, & treatment Workforce Centers/ Local Employers Housing services Benefits (i.e. SSI, WIC, TANF, SNAP, Medicaid) Legal Aid 	Job Readiness <ul style="list-style-type: none"> Résumé writing/ interviewing Job referral/ placement Job maintenance skill-building 	<ul style="list-style-type: none"> # job readiness classes provided/ attended # of job referrals made # employed 		
Best Practices/Research <ul style="list-style-type: none"> Evidence-based practices/ training ACF training/TA Local & national evaluation 	Aftercare <ul style="list-style-type: none"> 3, 6, 12-month follow-up Alumni network & reunions Alumni groups & activities 	<ul style="list-style-type: none"> # successfully discharged # aftercare plans and progress # locator forms # connections 3, 6, 12 month # attended groups and activities # gift incentives provided # who maintain independence at 12 months post discharge 		
			Short Term Outcomes	Long Term Outcomes
			Improve Access to Stable Housing <ul style="list-style-type: none"> 91% feel safe in an environment that is free from violence, abuse, bullying, harassment, or trauma 75% transition to a safe and stable permanent housing placement at exit (matched to need) 	Improve Safety <ul style="list-style-type: none"> 75% remain in safe and stable housing up to 12 months post discharge
			Improve Social and Emotional Well-Being <ul style="list-style-type: none"> 75% demonstrate knowledge in coping strategies & use of protective factors 83% in need of evidence-based, trauma informed wraparound services (health, mental, etc.) receive appropriate care and follow-up 	Improve Well-Being <ul style="list-style-type: none"> 75% achieve and/or are progressing in their individualized aftercare plans within 12 months 75% are able to independently access wraparound supports as needed
			Increase Participation in Education/Employment <ul style="list-style-type: none"> 83% complete their diploma, GED and/or enroll in post-secondary education program 83% demonstrate improvement in job readiness skills and/or receive job referral or placement 83% demonstrate improvement in basic life skills 	Improve Self-Sufficiency <ul style="list-style-type: none"> 75% maintain enrollment in an educational program and/or graduate from educational program 75% maintain employment and/or is placed in a higher job classification
			Increase Permanent Connections <ul style="list-style-type: none"> 83% increase their Positive Youth Development skills (e.g. increase resiliency, community service, pro-social norms) 83% report having a positive relationship with at least one caring adult 	Increase Permanent Connections <ul style="list-style-type: none"> 75% who reported having a positive relationship with at least one caring adult maintain that relationship

Source: Logic model extracted from the grantee's TLP Special Population Demonstration application for federal assistance and will differ from original version due reformatting.

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Appendix B. Interview Guides

TLP EXECUTIVE DIRECTOR INTERVIEW GUIDE

TLP Program Overview Survey: Executive Director Interview Guide

Name of the agency: _____

Name of the TLP: _____

Location (City and State): _____

Name of Interviewee(s): _____

Title(s) of Interviewee(s): _____

Introduction

This interview is intended to gather information about your TLP Demo program and how you've implemented it. We know that TLP Demo programs differ with regard to the target population, proposed model, and program activities. So I want to spend a little time with you today to understand the design and implementation of the TLP Demo. And for clarity, the focus is on the TLP Special Population Demonstration program ONLY (or what we'll simply call the TLP Demo). This interview is not about other forms of transitional housing, or any other programs, that your agency may provide to youth.

Agency/TLP Overview

- 1) Can you describe your agency's overall mission?

- 2) How does the TLP Demo fit into your overall mission?

- 3) What were the main reasons for pursuing the TLP Demo program for the target population? *[Probes, if needed: were you trying to address a specific service gap for the program? Did you feel that a segment of youth were under-served in the community?]*
- 4) How do you see the role of transitional housing in serving this population, especially given broader shifts that we see nationally, e.g., the increasing use of rapid-rehousing models?

Program Philosophy

- 5) When you think about the TLP Demo's overall design—for example, how it's structured, its program rules and requirements, the service delivery approach, and its general philosophy towards youth—what do you consider to be key features that really make a difference in helping young adults who have left foster care after age 18/LGBTQ youth? Please describe why these features are essential.

Partnerships

- 6) In your view, which partnerships between your agency and other organizations or entities are essential to properly serving young adults who have left foster care after age 18/LGBTQ youth? Please describe why these are critical partners.
 - a) Have these partnerships been created for the Demo or are they existing partnerships?
 - b) Are the partnerships formalized through an MOU or something similar?
 - c) Do you foresee, or have you experienced, any challenges in working with these partners to support the TLP Demo?

Staffing

- 7) When it comes to serving youth who age out of foster care/LGBTQ youth, what staffing positions and skills do you think are essential? How did you go about recruiting staff with these skills for the demo program?

Services

- 8) When it comes to program services—either those you provide directly or those provided by your referral network—which services do you consider to be most important in serving young adults who have left foster care after age 18/LGBTQ youth? Please describe why these services are most important.
- 9) How do you know they are the most important services (e.g., experience, needs assessment, it's what youth ask for, etc.)?

Program Outcomes

- 10) How do you define success for the TLP Demo? *[Interviewer, probe for what success means at the program-level, organization/agency level, and community-level]*
- 11) Do you conduct an internal evaluation of your program in order to measure performance? Please describe—e.g., how are they measuring success/successful outcomes.
- 12) What factors seem to contribute to a youth's likelihood of success after exiting the TLP Demo and how do you know?
- 13) And what factors seem to contribute most to the possibility that a youth will fall short of becoming independent and how do you know?

Closing

- 14) We're just about finished. Before we end, is there anything else that you feel it is important for us to understand about the program or community that we haven't asked about?

TLP PROGRAM MANAGER INTERVIEW GUIDE**TLP Program Overview Survey: Program Manager Interview Guide**

Name of the agency: _____

Name of the TLP: _____

Location (City and State): _____

Name of Interviewee(s): _____

Title(s) of Interviewee(s): _____

Introduction

This interview is intended to gather information about your TLP Demo program and how you've implemented it. We know that TLP Demo programs differ with regard to the target population, proposed model, and program activities. So I want to spend a little time with you today to understand the design and implementation of the TLP Demo. And for clarity, the focus is on the TLP Special Population Demonstration program ONLY (or what we'll simply call the TLP Demo). This interview is not about other forms of transitional housing, or any other programs, that your agency may provide to youth.

Agency/TLP Overview

- 1) What are the characteristics and needs of the youth targeted for and served by the TLP Demo? (Examples include LGBTQ youth, young adults who have left foster care after age 18, both.)

Partnerships

- 2) *[If the program targets foster care youth]* In your view, which partnerships between your agency and other organizations or entities are essential to both properly serve youth who age out of foster care and place them into stable (or permanent) housing?

Ask:

- a) Please identify the organization/entity.
 - b) What role do they play in the TLP Demo?
 - c) Is this a new partnership created explicitly for the TLP Demo? If so, what necessitated it?
 - d) Is this partnership working the way you had hoped? Why or why not?
 - e) [If it hasn't come up already] Does your program work directly with the local child welfare agency? If yes, ask same set of questions. If no, tell me more about why you're not working directly with the child welfare agency.
 - f) Are there any agencies or organizations that you think would be important partners, but have not established a partnership with yet?
 - a. If yes: Which agencies or organizations? What function would they perform?
 - b. If yes: Why do you think those partnerships have not been established yet?
- 3) *[If the program targets LGBTQ youth]* In your view, which partnerships between your agency and other organizations or entities are essential to both properly serve LGBTQ youth and place them into stable (or permanent) housing?

Ask:

- a) Please identify the organization/entity.
- b) What role do they play in the TLP Demo?
- c) Is this a new partnership created explicitly for the TLP Demo? If so, what necessitated it?
- d) Is it formalized through an MOU or something similar?
- e) Are data on youth shared between partners?
- f) Is this partnership working the way you had hoped? Why or why not?
- g) *[If it hasn't come up already]* Does your program work directly with programs that primarily serve LGBTQ youth in the area?
- h) Are there any agencies or organizations that you think would be important partners, but have not established a partnership with yet?
 - a. **If yes:** Which agencies or organizations? What function would they perform?
 - b. **If yes:** Why do you think those partnerships have not been established yet?

Staffing

- 4) Are Demo staff provided formal trainings as a part of their orientation, in administering program procedures, or as a matter of routine?
 - a) If so, what specific trainings are provided?
[If not explicitly stated under a...]
 - b) Are they trained on how to administer any of the assessments?
 - c) Are they provided training on physical or sexual harassment?
 - d) Are they trained on how to recognize and prevent bullying?
 - e) Conflict resolution?
 - f) Cultural competence, including youth with limited English proficiency, youth from diverse cultures and racial/ethnic backgrounds, and LGBTQ youth?
 - g) The effects of trauma and trauma informed approaches?
 - h) How to partner with youth and their families in providing input on the program?
- 5) Are there any specific staffing challenges in implementing the TLP Demo? Examples might be staff turnover, issues of motivation, burnout, finding staff with the right skill set.

Outreach and Referral

- 6) What outreach strategies do you feel are especially effective in increasing awareness of the TLP Demo and encouraging eligible youth to participate?
- 7) What referral sources do you feel are especially important to the TLP Demo? Probe on referrals from child welfare agencies or programs that work with LGBTQ youth.
- 8) Has your program intentionally recruited referral sources that serve hard-to-reach youth or youth you do not ordinarily serve? For example, partners that conduct outreach and recruitment in a variety of geographic areas, engaging street-involved youth who are resistant to structured programs, traditional and alternative schools, cultural centers, religious institutions, etc.

Service Approach

- 9) We're interested in learning about your outreach strategies, if any. This includes anything that you're doing to attract youth who may be eligible to participate in the TLP Demo. Can you tell me about your outreach strategies?
- 10) We're also interested in learning about the gateway services that you may or may not provide, such as food, drink, clothing, transportation, and hygiene. Can you tell me about any gateway services that you provide?
- 11) Case management is typically an important component offered by TLPs. Can you describe your approach to offering case management services to youth in the TLP Demo, including any kinds of planning or counseling that you offer as part of your approach?
- 12) Aftercare services can be challenging to design and implement. Can you describe the aftercare services that you offer, if any?
- 13) In keeping with the idea of creating a system of care, projects are developing ways to coordinate with other service providers throughout the community, ranging from government and nonprofits to outreach teams and homeless youth providers. Can you describe your approach, if any, to coordinating services throughout the continuum of care?
- 14) Does your program offer services or coordinate activities that...
Please describe.
 - a) Help youth build the skills necessary to be successful in school, social situations, and at work.
 - b) Help youth improve their sense of overall self-worth and efficacy.
 - c) Create a sense of belonging in the program, and help youth develop positive relationships with adults and peers
 - d) Foster respect for society and cultural rules and help youth recognize, understand, and appreciate multiculturalism
 - e) Help youth foster/develop sense of sympathy and empathy for others.
 - f) Promote active participation and leadership in the program and in the community.

- 15) Let's talk about the physical space of the program. Where are most of the services provided to youth?
[Interviewer, note that some programs have scattered site units, will need to dig in on shared spaces in buildings, whether youth return to a single place for services.]
- a) Are there clearly marked "safe spaces?" Describe.
 - b) What spaces are used when youth need privacy?
 - c) Are there spaces or areas that allow youth to get to know each other or ask advice of each other? Describe.
- 16) I'm going to ask you some questions about program features that are sometimes a part of TLP projects. For each, I want to understand how important the feature is for your program and then a few examples of how the feature is implemented in the program.
- Please describe importance and in what ways the program accomplishes this.
- a) Ensure that both staff and youth feel physically, psychologically, and emotionally safe?
 - b) Communicate organizational decisions as it relates to the TLP demo project to both staff and youth?
 - c) Organize peer support groups for youth who have undergone traumatic experiences?
 - d) Have a youth-directed approach to service planning and/or empower youth to make choices about their own program experience?
 - e) Ensure that the organization addresses and eliminates biases based on race, ethnicity, gender identity, sexual orientation, age, and culture?
 - f) Incorporate policies and processes that are responsive to the racial, ethnic, gender-based, sexual orientation-based, and cultural needs of all youth?
- 17) *[If the program targets foster care youth]* Does the TLP Demo incorporate specific evidence-based or best practices when serving youth aging out of foster care?
- a) Which ones?
 - b) In what ways are those practices incorporated into your program?
 - c) How do you assess fidelity to these practices?
- 18) *[If the program focuses on LGBTQ youth]* Does the TLP Demo incorporate evidence-based or best practices when serving LGBTQ youth?
- a) Which ones?

- b) In what ways are those practices incorporated into your program?
- c) How often do you assess fidelity to these practices?

Program Outcomes

- 19) What do you consider success for the TLP Demo? *[Interviewer, probe for what success means at the program-level, organization/agency level, and community-level]*
- 20) Do you conduct an internal evaluation of your program—that is, track your program outputs and youth outcomes? If so, how do you measure outcomes? Please describe.
- 21) Do you include youth feedback or feedback of families of young people in any internal assessment activities?
 - a) How is this feedback collected? *[One-on-one conversations, focus groups, evaluation forms, etc.]*
 - b) What do you do to ensure youth have the ability to provide feedback? *[Probe around transportation assistance, food provision, staff time for outreach, coordination, etc.]*
- 22) What factors seem to contribute to a youth's likelihood of success after exiting the TLP Demo?
- 23) And what factors seem to contribute most to the possibility that a youth will fall short of becoming independent?

Closing

- 24) We have just one more question. Is there anything that we have not yet talked about that you feel it is important for us to know and understand about the program?

TLP PROGRAM STAFF INTERVIEW GUIDE**TLP Program Overview Survey: Program Staff Interview Guide**

Name of the agency: _____

Name of the TLP: _____

Location (City and State): _____

Name(s) of Interviewee(s): _____

Title(s) of Interviewee(s): _____

Introduction

This interview is intended to gather information about your TLP Demo program and how you've implemented it. We know that TLP Demo programs differ with regard to the target population, proposed model, and program activities. So I want to spend a little time with you today to understand the design and implementation of the TLP Demo. And for clarity, the focus is on the TLP Special Population Demonstration program ONLY (or what we'll simply call the TLP Demo). This interview is not about other forms of transitional housing, or any other programs, that your agency may provide to youth.

Session One**TLP Overview**

- 1) What would you say are the primary objectives of the TLP Demo?

- 2) Please describe the characteristics and needs of the youth targeted for the TLP Demo? Example could be LGBTQ youth, young adults who have left foster care after age 18, or both.

Staffing

- 3) How is the TLP Demo staffed? Interviewer: please capture the title, primary role in the agency, and the proportion of time spent on the Demo. Make sure that you capture staff who focus on working with child welfare agencies or other programs that serve LGBTQ youth, as appropriate.

	Title	Role*	% of time on the demo program	# of years working with homeless youth	# of years working with the target population
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

* Make sure that you capture staff who focus on working with child welfare agencies or other programs that serve LGBTQ youth

Youth Engagement and Enrollment

Outreach and Referral

- 4) Does the TLP Demo participate in a coordinated entry process through the CoC?

If YES,

- i) Can you walk me through the coordinated entry process—so, how does it begin, what are the key steps in the process, and how are youth eventually referred/placed into the TLP Demo?
- ii) How does the CoC (or other entity) prioritize individuals for referral?
- iii) What are the eligibility criteria for youth used by the coordinated entry process guiding referrals to the TLP Demo?
- iv) How has the coordinated entry process worked for the TLP Demo so far?

- 5) For the TLP Demo program, do you conduct outreach to local social service agencies, schools, the CoC, or other groups to identify youth who may be eligible for the TLP Demo? Please describe.
- 6) What referral sources send youth to your TLP Demo, and what percent of youth come from each source (roughly)? Interviewer: identify the source and an estimate of the percentage of youth coming from that source.

Category	X	Description	%
Self-Referral		Self-Referral	
Individual		Parent or legal guardian	
		Relative or friend	
		Other adult or youth	
		Partner or Spouse	
		Foster parent	
		Host home adult	
Street Outreach		Street outreach program	
Shelter		FYSB Basic Center Program (BCP)	
		An emergency shelter	
		Homeless family center	
Residential Program		FYSB TLP	
		Other transitional housing program	
		Group home	
Systems		Coordinated entry system from CoC	
		Child welfare/CPS	
		Juvenile justice	
		Law enforcement/police	
		Mental hospital	
		Drug or treatment center	
		Education (e.g., school)	
Other		Independent living	
		Religious institution	
		LGBTQ support services	
		Other:	
		Other:	
		Other:	

- 7) Has your agency established new relationships with new referral sources to support the TLP Demo?

If YES:

- a) Which ones?
- b) Can you describe the new relationship?

- 8) What are the eligibility requirements for your TLP Demo program?

Intake and Enrollment

Now I want to understand the intake and enrollment process, essentially mapping the whole process out, step-by-step, from the point of initial contact with youth through the enrollment into the TLP Demo. And then I'll ask a few specific questions about each step. I'll also have a few additional questions later about the assessment process specifically.

Interviewer: Focus on getting the steps identified first (i.e., answer Question 9 in its entirety) before moving on the questions 10 through 12. Complete questions 10 through 12 for each step before moving to the next step.

9) Please walk me through the intake and enrollment process, step-by-step.	10) Who is involved in this step?	11) Please describe the main activities that occur during this step.	12) How long does this step take before moving to the next step?
Step 1			
Step 2			
Step 3			
Step 4			
Step 5			
Step 6			
Step 7			
Step 8			
Step 9			
Step 10			

- 13) Do you use a specific screening tool to determine eligibility for the TLP Demo?

Interviewer: If program participates in coordinated entry, ask the following questions about further eligibility determination that may occur after the youth is referred from the coordinated entry process.

If YES:

- Who conducts the screening?
- What tool is used?
- What topics are covered by the screening tool?
- Is the screening tool administered to all youth?

e) Are there any challenges in administering the screening tool?

f) Can you share a blank copy of the assessment tool?

IF NO:

a) How do you determine eligibility for the TLP Demo?

b) In what ways do you ensure that all youth are screened for eligibility based on the same criteria?

14) Once youth complete the intake process, is there a separate needs assessment that is administered by the agency to identify the needs, wants, and the appropriate services to offer youth?

15) Do you use a specific assessment tool to identify the needs of youth in the Demo?

If YES:

a) Who conducts the assessment?

b) What tool is used?

c) Is this tool different than the one used for your more general (population non-specific) TLP program?

d) What topics are covered by the assessment tool? [Probe here around housing history, mental health, substance use, trauma, protective factors, and risk factors.]

e) Is the assessment tool administered to all youth?

f) Are there any challenges in administering the assessment tool?

g) Can you share a blank copy of the assessment tool?

If NO:

h) How do you identify the needs of youth you serve in the Demo?

i) Are there challenges in ensuring the needs of all youth are identified?

16) Can you describe what the program does to ensure that youth are able to feel safe to voluntarily self-disclose sensitive information around risks, experiences, and service needs during the needs assessment process?

17) Are staff trained on the use and administration of the screening and assessment tools?

If YES:

- a) What are the goals of the training(s)? *[Probe here around content of training, whether they are trained on how to handle traumatic experiences that come up, whether they are trained on practices that ensure the youth feel safe, and on assessing sensitive topics around gender identity and sexual orientation.]*
- b) How often are staff trained (e.g., once only, annually, multiple time per year)?
- c) Is the training(s) required?
- d) Who conducts the training?
- e) Who receives the training?
- f) Is there some form of certification that happens at the end?
- g) How long is the training? Does it occur in a single or in multiple sessions?

IF NO:

- h) How do you ensure program staff are able to accurately capture the needs of youth?
- i) How do you ensure program staff are able to screen and assess needs of youth in a way that assesses their needs accurately and makes youth feel safe and comfortable?

18) How do you use the results from the initial needs assessment? *[Probe here around how needs identified inform service plans; whether they use both the risk factors and the potential strengths/protective factors of youth to tailor services.]*

- a) Is information learned during the assessment process used to tailor the program for each youth? *[Probe use of needs and risk factors to develop service plan and whether strengths/protective factors are used in service planning]*

19) Does your program conduct any other assessments after you initially identify the needs of youth?

If YES:

- a) What assessments?
- b) When are the assessments conducted?
- c) What are these assessments used for?
- d) Do all youth receive additional assessments?

Program Structure, Policies, and Rules

Now I'd like to ask you some questions about how the program works on a day-to-day basis and how certain issues and decisions are handled.

20) Do youth have chores or daily responsibilities within the TLP Demo?

If YES:

- a) What types of chores/responsibilities are they?
- b) How are these particular chores/responsibilities assigned to youth?
- c) What happens when a youth fails to complete a given chore/responsibility?

21) In what ways (if any) are youth (and families of youth when applicable) involved in program design, implementation, and governance/decision making? Please describe.

Examples:

- *Youth advisory committee*
- *Resident constitution or peer covenant*
- *TLP Youth involved in service delivery within the agency*

Privileges and Rules

22) Do youth gain more privileges during their time in the TLP program? Please describe.

Examples:

- *Use of personal car*
- *Cellular phone use*
- *Increased free time*
- *Overnight/weekend passes*
- *Later curfew or later wakeup*
- *Increased program allowance*
- *Visitor privileges*

23) What, if any, rules must a youth follow while staying at the TLP? Please describe.

Examples:

- *Curfew*
- *Visitor restrictions*
- *Weapons prohibited*
- *Alcohol or drugs prohibited on program property*

- *Random drug screening*
- *Smoking prohibited on program premises*
- *Sexual activity between residents prohibited on premises*
- *Cell phone restrictions*
- *Searching of youth property by staff*
- *Borrowing/lending of possessions among youth*
- *Chores/cleanliness*
- *Savings or budgeting requirement*

24) How is age and/or developmental stage considered when developing rules for youth or informing youth of rules and requirements? Please describe.

25) How are youth informed about the requirements and rules of the program? *[Probe on whether youth are explicitly informed about rules at enrollment; whether youth are consistently reminded of rules.]*

26) What happens when a youth fails to adhere to a given rule?

- a) Can you walk through a typical process when a youth fails to adhere to a given rule?
- b) Does the program tailor its response based on the age of youth?

Examples:

- *The program uses therapeutic time outs*
- *Sanctions or punishments*

27) Are there any rule violations that result in an automatic discharge? Explain.

Examples:

- *Fighting/assaulting on premises*
- *Destroying property*
- *Possession of weapon*
- *Pregnancy*
- *Substance use on premises*
- *Positive drug test*
- *Verbal aggression*
- *Anything else*

28) Are there grievance procedures for youth who feel unfairly treated? Explain.

- 29) Think about the last time a youth was expelled from the program. Can you walk through what happened when the youth was expelled?
- a) What was the reason for expulsion?
 - b) How did program staff inform the youth of this decision?
 - c) Were program staff involved in finding another place for the youth to stay? If yes, how?
 - d) What else did program staff do to prepare the youth for exiting?
 - e) Was this a normal case? If not, what made it different?

Housing

Okay, let's talk about the configuration of the housing for the Demo program.

- 30) I'm interested in learning about the type(s) of physical accommodations (housing options) that are available to youth in the TLP Demo, and the capacity of each type. Can you describe them?

X	Housing Type	Capacity (# of youth)
	Youth live in host family homes	
	Youth share bedrooms in group home with house parents	
	Youth share bedrooms in one facility	
	Youth have private bedrooms in one facility	
	Youth share apartments, units clustered in one building	
	Youth have private apartments, units clustered in one building	
	Youth share scattered site apartments	
	Youth have private scattered site apartments	
	Other:	
	Other:	

[IF RESIDENTS ARE IN **NON-FACILITY BASED APARTMENTS**, ASK:]

- a) Are TLP units clustered in buildings (meaning more than one unit per building)?

If YES:

- i) How many buildings?
- ii) How many units in each building?
- iii) Do youth share apartments?
- iv) Do youth share bedrooms?

- b) If TLP units are not clustered, how are they configured? (Examples: Single units in various buildings that program owns/manages; single units leased from private landlords).
 - i) Do youth share apartments?
 - ii) Do youth share bedrooms?

[IF RESIDENTS SHARE APARTMENTS, ASK:]

- a) How many bedrooms does each unit have?
- b) How many youth per unit?
- c) Do youth share bathrooms?
 - i) If yes, are bathrooms gender neutral?
- d) How is gender considered when placing youth in units?
- e) Are there rules around how youth behave in common spaces of units? *[Probe here around explicit policies around physical and sexual harassment, violence, bullying, cultural sensitivity]*

[IF SHARED BEDROOMS ASK:]

- a) How many residents per room?
 - i) How is gender identity considered in placing youth in shared bedrooms?
- b) Does each room have an adjoining bathroom?
- c) Are bathrooms gender-neutral?

[IF THE PROGRAM SERVES BOTH YOUTH UNDER AND OVER THE AGE OF 18, ASK:]

- d) Are living units segregated by age? Please describe.

[IF FACILITY-BASED HOUSING ASK:]

- a. Who manages the facility *[probe for TLP agency, other agency, and private entity]*?
- b. Do youth share bedrooms? *[If yes, ask Shared Bedroom questions]*
- c. Do youth share bathrooms? Please describe.
 - a. Are bathrooms gender-neutral?

- d. Are youth housed in the same location where most of the services are provided?
 - e. Are there clearly marked “safe spaces?”
 - f. Are there spaces that allow youth privacy when needed?
 - g. Are there spaces that allow for collaboration between youth or promote bonding?
- 31) *[If more than one physical accommodation is used]* Does the TLP Demo have a phased approach to housing in which youth move from supervised to more independent living as they move through the program?
- If YES:**
- a) Which housing option is the most supervised?
 - b) Which housing option provides the greatest level of independence?
 - c) Is the housing progression based on a set timeline or set benchmarks that youth need to achieve? Explain how this works.
- 32) Are youth required to pay for any portion of their housing expenses, such as part of their rent or a security deposit?
- If YES:**
- a) What do they pay for?
 - b) How much?
 - c) Does the amount of payment change over time? Explain.
 - d) Is this money saved for youth and returned at exit?
 - e) Are there any requirements tied to how the saved money is used?
- 33) Do youth sign a lease or housing agreement?
- If YES:**
- a) Who is the lease/housing agreement with?
 - b) What is in the lease/housing agreement?
 - c) What happens if youth violate the lease/housing agreement?

Session Two

We are going to spend the majority of this session discussing the services offered to youth. First, I'd like to hear what a typical day is like in the life of a youth in the Demo program.

Typical Day in TLP

- 34) In the last session we talked a lot about the program structure, policies, and housing. Taking a step back, can you give me a sense of what a typical day or week would be like for a youth who has been in the TLP for some time?

Individual Service/Action Plans

Before we talk about the specific services offered through the TLP Demo, I'd like to understand the service planning process that guides the delivery of services for each youth.

- 35) (Confirm if necessary). Do you develop an individual service or action plan for each youth?

If YES:

- a) What service areas and/or topics does the individual service plan cover? *Interviewer: examples include educational goals, employment goals, personal goals, housing goals, etc.*
 - b) Who participates in the service planning process and what are their roles? *Interviewer: probe for the involvement of youth and partners outside the TLP.*
 - c) Does each youth participate in the development of the plan? Explain.
 - d) Can you share a copy of a blank individual service plan?
- 36) How much choice do youth have in the services youth are offered or how youth receive them? Could you provide some specific examples?
- 37) Are plans updated at some point after the initial assessment?
- If YES:
- a) How often?
 - b) What would prompt a change to a youth's plan? Please provide examples.

- c) Must there be agreement between TLP staff and the youth, or anyone else, to make a change? Please explain.
- 38) How is progress towards service plan goals and objectives/action steps monitored and tracked?
- 39) *[If the program targets LGBTQ youth]* In thinking about your approach to providing comprehensive services to LGBTQ youth, are you doing anything differently to serve this particular group of youth? Please describe.
 - a) If yes, how did you arrive at this different approach?
- 40) *[If the program targets young adults who leave foster care after age 18]* In thinking about your approach to providing comprehensive services to young adults who have left foster care after the age of 18, are you doing anything differently to serve this particular group of youth? Please describe.
 - a) If yes, how did you arrive at this different approach?

TLP Services

I'd like to learn about all the other types of services that are offered as part of the TLP Demo.

Let's start with gateway services. These are services that meet the urgent and basic needs of youth in part to gain trust and eventually help them access a broad range of services. I'm interested in learning which gateway services are offered, a short description of each, how youth are connected to the service, and how often youth access the service?

41) Which of these gateway services and other services that engage youth do you provide...	X	42) Please describe the service.	43) How are youth provided/connected to this service?	44) How often do youth access this service?
Gateway Services				
Food assistance				
Clothing				
Hygiene (showers, laundry)				
Transportation (taxis; bus and train passes)				
Basic needs goods (soap, toothbrushes, etc.)				
Other Services to Engage Youth				
Human trafficking assistance/Safe Place				
Outreach services				
Other (specify): _____				
Other (specify): _____				

Now I'd like to learn a little more about the education services you provide. Again, which education service is offered, a short description of each, how youth are connected to the service, and how often youth access the service?

45) Which of these education services do you provide...	X	46) Please describe the service.	47) How are youth provided/connected to this service?	48) How often do youth access this service?
GED classes				
Alternative high school classroom				
Education planning/counseling				
Education scholarships				
Education application and enrollment assistance (high school or post-secondary)				
Education center with access to computers, internet, and other education resources				
Other (specify): _____				
Other (specify): _____				
Other (specify): _____				

49) Does your program identify how youth best learn and respond to information? For example, some people learn visually, some through multimedia, some orally, experientially, etc.

a) If so, how is that information used to tailor services for education services to youth?

50) Does your program assess the person's ability to attend/stay in school (as applicable)?

- a) Does the program determine whether there's a longer history of education challenges and whether other factors contribute to these challenges?
- b) If yes, how does the program determine this? For example, does the program work with current school or youth's prior school to identify challenges?

And now I'd like to learn a little more about the employment services you provide, using the same approach.

51) Which of these employment services do you provide...	X	52) Please describe the service.	53) How are youth provided/connected to this service?	54) How often do youth access this service?
Employment readiness preparation (e.g., résumé development, presentation and interviewing guidance, job search strategies and resources)				
Employment/career center with access to computers, internet, online job search, etc.				
Job training (e.g. certificate programs in entry level career track fields)				
Employment internships				
Transitional jobs program (i.e. time-limited, subsidized employment with services to address employment barriers)				
Employment placement				
Employment retention support				
Other (specify): _____				

51) Which of these employment services do you provide...	X	52) Please describe the service.	53) How are youth provided/connected to this service?	54) How often do youth access this service?
Other (specify): _____				
Other (specify): _____				

55) Does your program assess the person's ability to secure/maintain employment (as applicable)?

- a) Does the program determine whether there's a longer history of employment challenges and whether other factors contribute to these challenges?

And lastly, I'd like to learn a little more about the other services you provide, using the same approach. And then I'll ask a few specific questions about life skills specifically.

56) Which of these other services do you provide...	X	57) Please describe the service.	58) How are youth provided/connect ed to this service?	59) How often do youth access this service?
Case management				
Life skills classes/training				
Mental health counseling				
Substance abuse counseling				
Services to address trauma or traumatic stress				
Health screening				
Health care treatment/nurse				
Alternative medicine clinic/services				
Nutrition counseling				
Legal services				

Aftercare				
Family mediation				
Other (specify): _____				
Other (specify): _____				

- 60) In terms of life skills, can you please describe the methods or ways the program helps youth develop life skills?
- a) Who is involved?
 - b) Do you use group-based instruction (for example, a life-skills class or program)?
 - c) Do you use one-on-one instruction?
 - d) Do you use hands-on experiences? (e.g., staff shop or cook with participants)
 - e) Where do lessons and activities take place? (e.g., classroom only, outside classroom/real world experiences)
 - f) Are there opportunities for skill use or practice?
- 61) Does your program include specific activities or groups for peer-to-peer engagement? *[Probe around programming that allows youth to discuss questions and concerns they have in a safe space, with a TLP staff person present to facilitate.]*
- a) Are program staff involved?
 - b) Are there any peer mentoring/education programs for LGBTQ students?
 - c) Are there any peer mentoring/education programs for young adults who left foster care after the age of 18?
- 62) Does your program have individual or group sessions or activities that allow for open conversations about cultural diversity in order to learn about each individual?
- a) If yes, could you describe the goals of these sessions?
 - b) Do conversations include ways the program could improve in its responsiveness to cultural diversity?
- 63) *[If the program targets foster care youth]* In thinking about all of these services that are offered by the TLP Demo, does it offer services specific to the needs of youth who left foster care after the age of 18?
- a) Which services are provided to young adults who left foster care after the age of 18?
 - b) Why did you choose these particular services?
 - c) How often are these services offered to youth?
 - d) Do youth regularly access these services?

64) *[If the program targets LGBTQ youth]* In thinking about all of these services that are offered by the TLP Demo, does TLP Demo offer services specific to the needs of LGBTQ youth?

- a) Which services are provided to LGBTQ youth?
- b) Why did you choose these particular services?
- c) How often are these services offered to youth?
- d) Do youth regularly access these services?

65) In working with youth who have experienced trauma, how do program staff...

Element	Please Describe.
Recognize the interrelationship between trauma and symptoms of, or responses to, trauma?	
Recognize the survivor's sense of physical and emotional safety?	
Create safe and comforting physical environments?	
Learn about and understand survivor's history with trauma?	
Identify and support a survivor's trauma-related needs (supporting and guiding the heal process, while promoting wellness and resiliency)?	
Collaborate with and empower survivor in their treatment?	
Collaborate with family members to: <ul style="list-style-type: none"> • learn about and understand the family's history with trauma, and/or learned methods of coping that may cycle from generation to generation • promote family wellness and resiliency (as appropriate) • support the survivor in their treatment and the healing process? 	
Collaborate with survivor's friends and peers to support the survivor in their treatment and the healing process?	
Recognize survivor's need to be respected, informed, connected, and hopeful regarding their own recovery and healing?	
Offer effective, evidence-based treatments for trauma?	

Element	Please Describe.
Partner with other agencies/organizations serving the survivor?	

Trauma Screening

66) Do you conduct a trauma screening as part of your normal intake or enrollment procedures?

If YES:

- a) Do all youth who enroll receive the screening – or just some? Please explain.
- b) Do you use a specific screening tool?
 - i. If YES: May I have a blank copy of the tool?
- c) Can you please describe the key areas that are covered in your screening tool?

Interviewer: Use the check list below to indicate the areas covered by the screening tool.

Screening Checklist:

Domain Assessed	Description/Explanation of What Would Be Assessed	Program response if youth screens positive:
Violence, Abuse, and/or Neglect at Home	Assess extent to which witnessed or experienced violence, abuse (physical, verbal, or sexual), or neglect at home.	
Relationships at Home (Positive and/or Negative)	Determine if relationships at home are supportive or contribute to the trauma. (Looking into whether there is emotional support from the family, if family members are good caregivers?)	
Social Engagement (school, clubs, etc.)	Gauge social supports that provide connectedness, build resilience, and foster healing.	
Ability to Engage in Employment and/or Education	Assess the person's ability to gain and maintain employment and/or attend/stay in school (as applicable). (Determine whether there's a longer history of employment/education challenges and if trauma could be a contributing factor)	
Relationships/Friends (Positive or Negative)	Inquire about ability to connect with individuals in friendships or relationships, or if isolation is more prevalent. Consider whether relationships provide emotional support.	

Domain Assessed	Description/Explanation of What Would Be Assessed	Program response if youth screens positive:
Frequency of Relationship Turnover	Examine how often close or trusted relationships/friendships end, which can be an indicator of attachment concerns and trust issues.	
Change in Residence	Determining how often and how many times the person has moved residences	
Reason for Homelessness	Determine the circumstances that led to homelessness (run away, throw away, etc.)	
Smoking	Determine whether the person smokes cigarettes and if so the frequency of use (Prevalence of smoking is significant with young trauma survivors)	
Substance Use (alcohol and drugs)	Determine whether the person uses substances, and if so, the frequency of use and age of onset. (This can be helpful to address trauma as a co-occurring condition.)	
Parental Substance Use	Inquire about parent history of substance use. (This can indicate learned coping behavior and intergenerational substance abuse concerns that can complicate healing and recovery).	
Exercise	Ask how often, for how long, and the kind of exercise the individual engages in. (Exercise is useful to assess stress management and anxiety reduction.)	
Mental Health	Evaluate for prior mental health treatment and/or diagnosis. This should include a query about family members that may have struggled with mental health or depression. This area could also explore suicide attempts as a serious risk factor.	
Criminal Activity	Determine if the individual and/or anyone in his/her household committed a crime.	
Sexual Activity	Explore if promiscuous and self-destructive or abusive factors come out in intimate relationships. (This can be related to childhood sexual abuse)	
Aggression	Determine if the individual has a pattern of anger and aggression and if there was/is a family history of this.	

Domain Assessed	Description/Explanation of What Would Be Assessed	Program response if youth screens positive:
Safety	Determine whether there was a place the individual felt safe during childhood and if so how often they could be there. (Safe place does not have to be home)	
Self-Value	Determine whether there was a person or activity that boosted the survivor's esteem or who made them feel important or valued.	

67) Do program staff receive any training in trauma or trauma-informed care?

If YES:

- a) Please describe the training.
- b) Who receives it?
- c) When does it occurs and how frequently?

Transitioning Out of TLP

Transitional Living Plan

68) Does the program develop a transitional living plan for all youth in the Demo?

If YES:

- a) What is in a typical transitional living plan?
- b) When are these plans developed?
- c) Who works with youth to develop their transitional living plan?
- d) Do youth identify the services they need to help them transition out of the TLP or how they receive them?

Program Discharge

69) How does the program define a safe exit?

70) What criteria are used to determine when a youth has successfully completed the program and is ready to be discharged?

- 71) What process does the program follow for making discharge decisions?
- 72) What process does the program follow for making and carrying out voluntary early departure decisions?

Aftercare

- 73) What, if any, aftercare services are provided to youth who exit the TLP? Please describe.

Examples:

- *Staff-initiated check-in/follow-up phone calls*
- *Home visits*
- *Staff available as needed for follow-up support (youth-initiated)*
- *Alumni aftercare group*
- *Participation in other agency services*

- 74) Do all, some, or none of exiting youth receive aftercare services? Explain.

- 75) What are the most common services youth access during their aftercare period?

- 76) In what, if any, ways do youth remain involved with the TLP once they have exited the program? Please describe.

Examples:

- *Participate in alumni group*
- *Serve on program committee or advisory group*
- *Share their experiences at community meetings, life skills groups, or other program events*
- *Invited to holiday events and graduation ceremonies*
- *Serve as peer mentors*
- *Speak at agency events (e.g., annual fundraisers)*
- *Attend other program alumni events*

Program Outcomes

- 77) How do you measure the program's level of success or effectiveness?

- 78) Are there factors that seem to contribute to a youth's likelihood of success, or the likelihood that they will exit to a safe housing location? Please describe.
- 79) Are there factors that seem to increase the likelihood that youth will become homeless again or leave the program without completing it? Please describe?

Closing

- 80) Is there anything else that you feel it is important for us to understand about the program that we haven't asked about?

Appendix C. Major TLP Partnerships

Grantee	Key Partners and Role
Bellefaire JCB	<ul style="list-style-type: none"> • Boy Scouts of America Explorers Program: explored leisure activities and created mentorships • College Now: helped students complete FAFSA, apply for scholarships • Frontline Services: provided mental and behavioral health services • Invictus Charter School: an online alternative high school* • LGBTQ Center: hosted group sessions and mentoring* • Pride Center Clinic: provided LGBTQ-friendly health services*
Bridge Over Troubled Waters	<ul style="list-style-type: none"> • Clearinghouse: provided legal services • College Pathways: provided college preparation/career pathways • Mass Rehab: provided employment training • My Life, My Choice: provided counseling and support around sexual violence and human trafficking • Year Up: provided career training and internships
Family Resources	<ul style="list-style-type: none"> • Clearwater JobNetwork: provided job assistance and enlistment into the military • HEAT: the local homeless education alternative team • Local LGBTQ-friendly church: provided religious services* • Metro Wellness (Local LGBTQ Center): provided counseling, STI/HIV testing, youth groups
Lighthouse Youth Services	<ul style="list-style-type: none"> • Caracole: provided housing, care, and preventative services to people living with HIV/AIDS • Children's Hospital in Cincinnati: a transgender clinic* • Cincinnati State: provided help with FAFSA and other financial aid paperwork • Cincinnati Works: provided career readiness assistance, such as developing a résumé, mock interviewing, certificate counseling • Library: provided referrals*
New Day	<ul style="list-style-type: none"> • Casa Q: a group home for LGBTQ youth ages 16-17 and intended referral source* • Local Schools: provided GED completion and tutoring • New Mexico Transgender Center: provided physical exams for youth and access to hormone therapy • NMCAN: a local advocacy organization that provided legislative action for foster care youth; also included a mentor program, match program, and financial literacy program • Workforce Connection (TRIO program): provided help with résumé development, guidance counselors, and assistance with college enrollment

Grantee	Key Partners and Role
Nexus4Kids	<ul style="list-style-type: none"> • HopeLink: provided public transportation assistance to individuals with publically funded medical insurance • Lavender Rights Project: provided staff training specific to working with LGBTQ youth* • Local medical provider: provided medical care for transgender youth* • Northwest Network: provided staff training on LGBTQ issues and cultural sensitivity* • New Horizons: a coffee shop based in Seattle that provided job placements for youth*
Preble Street	<ul style="list-style-type: none"> • Maine Trans Net: provided transgender services* • New Beginnings: provided food, clothing, and transportation • Outright: LGBTQ support groups* • Street Academy: provided GED assistance and an alternative high school
Promise House	<ul style="list-style-type: none"> • JC Penny: provided a life/career skills course on résumé writing and interview skills • Outlast Youth and True Colors for LGBTQ: provided staff training • Texas Workforce Commission: provided a career readiness and internship program • Transgender Clinic: provided medical care for transgender individuals* • Various medical and counseling partners
Volunteers of America Los Angeles	<ul style="list-style-type: none"> • Five Star: provided an independent studies program for youth • Legal services: provided referrals to help with legal name changes • LGBTQ Center* • Long Beach Youth Center: provided support groups • St. Johns: a transgender clinic* • The Coalition for Responsible Community Development (CRCD): provided college coursework for youth in partnership with LA Trade Technical College

* New partnership with the Demonstration