

Thank you for taking the time to complete this QPI survey. Your feedback is important to us and will let us know how QPI is working in your county. This survey should only take about 5 minutes of your time. Your answers will be completely anonymous.

1. Name of Foster Parent Being Evaluated

2. Does the foster parent take his/her child to health and mental health appointments?

Always transport and participate	Always transport and doesn't participate	Some times transport and participate	Some times transport and doesn't participate	Rarely transport or participate
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Does the foster parent participate in his/her child's education by going to school conferences, meetings, IEPs and functions and helping with homework?

Always	Most of the time	Half the time	Once in a while	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Does the foster parent interact with the birth parents? (Select all that apply.)

In person	By phone	In writing	Rarely communicate	Never communicate
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Does the foster parent interact with other members of the birth family? (Select all that apply.)

Siblings	Extended family	Certain siblings and extended family	No
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Describe interactions and relationships and if foster parent doesn't, why?

6. Does the foster parent participate in case planning by attending or sending information to staffings, court hearings?

Always	Most of the time	Half the time	Once in a while	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If the foster parent doesn't participate, why?

7. Does the foster parent attend and participate in foster parent training?

Monthly	Quarterly	Some	Just the required hours	Never
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Why or why not?

8. Please fill in your name, what you do, and your county. If someone is helping you with this survey, please list their name and position, too.

Name:

Position

County

9. Please fill in the date.

MM DD YYYY

Date of survey:

 / /

10. Any comments? Thank you for completing this survey!