Advocate Handbook

ELECTRONIC CASE FILE DOCUMENTATION AND GUIDE TO ETO® (EFFORTS TO OUTCOMES)

Updated: January 2017

TABLE OF CONTENTS

1 WELCOME

1.1 ABOUT CASA LA

CASA of Los Angeles strives to improve the lives of children in the dependency court system by pairing them with trained volunteer advocates. Volunteer advocates—empowered directly by the courts—offer judges the critical information they need to ensure that each child's rights and needs are being attended to while under court jurisdiction.

1.2 PURPOSE OF THIS HANDBOOK

The purpose of this handbook is to support CASAs in their advocacy work as a significant part of the role is documenting monthly progress and interventions made on a case. This handbook provides guidance for documenting advocacy work and entering it into CASA/LA ETO® software. The handbook is presented in two parts including:

a) **Advocacy Documentation guidelines**: the notes you will be providing on your case that will be entered into the child's CASA legal file.
b) **ETO software system basics**: these will guide you through the ETO software system as you review and input information into your child's case.

1.3 ABOUT THE ETO® SOFTWARE

CASA of LA's programs are documented through a web-based software called ETO®, Efforts to Outcomes. Social Solutions, the creator of Efforts to Outcomes (ETO®) software, is the leading provider of performance outcomes software for human service and is used by over 3,900 organizations.

1.4 CONFIDENTIALITY & SECURITY

In accordance with the CASA Oath of Confidentiality, CASAs shall "maintain the integrity and confidentiality of all information pertaining to this matter from whatever source obtained". This includes all records and electronic files to which you have access.

ETO software is secure and meets current HUD DV, HMIS, FERPA, Social Security Administration and HIPAA data management and security protocol. The application is accessed by users via a secure HTTPS connection to the ETO software web application server.

The ETO software utilizes user name and password functionality to prevent unauthorized application access and provide an automated audit trail of that user's interaction with the software. Security is further established by role-based access control – and therefore not all users will have access to the same menus and information in ETO®. The ETO software is configured to detect user inactivity and will terminate a session after 60 minutes.

However, please consider additional duties of care:
- Password protect your phone, tablet, computer in case of theft or loss
- CASAs may not share their ETO® login information with **any** other parties

2 ADVOCATE DOCUMENTATION

Advocate documentation refers to the progress notes and records you as a CASA are **required** to create while active on a case.

Why is Advocate Documentation important?

- **Legal File Record Keeping:** CASA advocacy work and progress must be documented in the child's CASA legal file.
- **Measuring Impact**: Understanding the individual and congregate impact of CASAs on children cases.
- **Guidelines and Standards:** Ensuring quality and best practices of CASA advocacy work as per CASA national and state standards.

Required Advocate documentation has several different components: Some documentation is only completed once, like the Baseline Scale (Section 5.1.1) and Outcomes Scale (Section 5.4.1), while others like your Progress Notes (Section 5.2.1) (Case Note Log, Child Visit Log, Goals Update) and Volunteer Hours (Section 5.2.2) are required to be completed each month. The Advocate Documentation Checklist provides a summary of CASA's advocate documentation.

Advocate Documentation Timeline Table
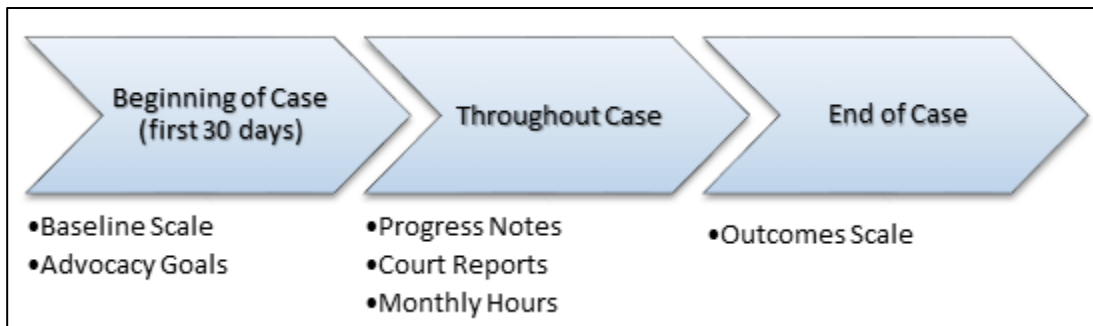
2.1 BEGINNING OF YOUR CASE (FIRST 30 DAYS)

2.1.1 Baseline Scale

The Baseline Scale uses the Child Baseline and Outcome Scale to assess risk in the areas of *Safety*, *Permanency* and *Well-Being (Physical Health, Mental Health, and Education)* for each child at the onset of their case. Baseline Scale ratings are informed by the information you gather during review of files, interviews, meetings, calls and other appropriate activities with the child and case parties during the first thirty (30) days of advocacy.

The Baseline Scale is only completed once and **is completed in mutual discussion with your Senior Program Coordinator** at the end of the first thirty (30) days of your appointment to a case. Your SPC will complete the TouchPoint during this discussion.

Here is what the Baseline Scale TouchPoint looks like in ETO:

Baseline Scale for Andrew Fake on	10/3/2016	🔲

Baseline and Outcomes Rating Scale

SAFETY

High risk danger or urgent safety concerns for immediate intervention include:

- **safety risk in placement or home, or**

- **safety risk in school or in immediate environment, or**

- **safety risk in well being areas of physical, developmental, or mental health**

Indicate child's current level of safety: *

○ **0 Not Applicable:**
No areas of concern

○ **1 Minimal or very low risk:**
Injury/illness, risk of harm from self or others, shelter

◉ **2 Slight or low risk:**
Injury/illness, risk of harm from self or others, shelter

○ **3 Moderate risk:**
Injury/illness, risk of harm from self or others, shelter

○ **4 High risk:**
Serious, but not life threatening - injury/illness, risk of harm from self or others, shelter

○ **5 Critical or very high risk:**
Life threatening - injury/illness, risk of harm from self or others, shelter

PERMANENCY

Level of permanency in current living situation/risk for lack of permanency.

Indicate level of current permanency in current living situation/risk for lack of permanency: *

○ **0 - Not Applicable:**
No areas of concern or case not yet adjudicated.   **NOTE: If case not adjudicated, case must be re-rated at time of legal plan.**

○ **1 - Minimal or very low risk:**
Plan is to remain in family or reunification imminent and likely; adult long term connections appear highly likely

○ **2 - Slight or low risk:**
Family unification plan is likely and low risk; plan is in adoption phase or adoptive home identified and adoption likely; adult long term connections appear highly likely.

◉ **3 - Moderate risk:**
Family reunification plan is possible but has moderate risk; plan is for adoption, home may or may not be identified and adoption is moderately likely; plan is for legal guardianship and likely or moderately likely to occur; adult long term connections appear moderately likely

○ **4 - High risk:**
Family reunification plan is at high risk; plan is for adoption, home may or may not be identified, and adoption is highly unlikely; plan is for legal guardianship and highly unlikely to occur; child in long term foster care/group home care/residential care and may or may not have had multiple placements; adults long term connections are minimal to non-existent

○ **5 - Critical or very high risk:**
Family reunification plan is at very high risk; plan is for adoption, home may or may not be identified, and adoption is very highly unlikely; plan is for legal guardianship and very high risk and highly unlikely to occur; child in long term foster care/group home care/residential care and may or may not have had multiple placements; short term shelter or no substantive plan; adult long term connections are non-existent

WELLBEING

Level of well being/quality of life. Meeting developmental milestones in areas of physical health, mental health, and education.

A. Physical health and physical developmental milestones. *

- ○ **0 - Not Applicable** - No areas of concern
- ○ **1 - Minimal or very low risk:** Minimal injury/illness of minimal concern or very slight physical developmental delays that are being managed appropriately
- ◉ **2 - Slight or low risk**: Acute injury/illness or slight physical developmental delays that are being managed appropriately
- ○ **3 - Moderate risk:** Chronic injury/illness or moderate physical developmental delays that may need ongoing treatment, and/or further assessment
- ○ **4 - High risk:** Serious, but not life threatening injury/illness or significant physical developmental delays that may need ongoing treatment, and/or further immediate assessment
- ○ **5 - Critical or very high risk:** Life threatening injury/illness or extreme physical developmental delays that may need urgent treat and assessment

B. Mental Health and Social/Emotional developmental milestones.

Behavioral/emotional areas that lead to healthy adjustment. Areas include: daily living, adaptability/coping, aggression, anxiety, attention/hyperactivity issues, conduct problems, depression, functional communication, basic social skills, study skills, mental health diagnosed disorders *

- ○ **0 - Not Applicable:**
No areas of concern
- ○ **1 - Minimal or very low risk:**
Minimal adjustment issues in any of the above social/emotional health areas that are being managed appropriately and little effect on overall well being
- ○ **2 - Slight or low risk:**
Slight or low level adjustment issues in any of the above social/emotional health areas that are being managed appropriately had little effect on overall well being
- ◉ **3 - Moderate risk:**
Moderate adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having moderate effect on overall well being; may need mental health or neuropsychological assessment for further treatment and/or other resources to assist in increasing functional adjustment in social/emotional areas
- ○ **4 - High risk:**
Serious but not life threatening adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having significant effect on overall well being; may have significant mental health issues/diagnosis, or developmental trauma experiences that are untreated
- ○ **5 - critical or very high risk:**
Critical and potentially life threatening adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having very significant effect on overall well being; may have significant mental health diagnosis that is untreated and may lead to harm to self or others; may be involved in treatment, but treatment has not significantly reduced symptoms; well being has not been stabilized; may be evidence of extreme social skills deficiets, communication disorder or other social/emotional delays that require immediate further assessment and/or other resources to assist in increasing functional adjustment.

C. Education and learning developmental milestones *

- ○ **0 - Not Applicable:**
No areas of concern
- ○ **1 - Minimal or very low risk:**
At grade level, and in appropriate educational setting with little concerns overall; may or may not have moved schools multiple times, but doing well
- ◉ **2 - Slight or low risk:**
Slightly below grade level (less than 1 year); in appropriate educational setting or some learning delays that are affecting grade level, that are being managed appropriate or may need minimal additional resources; may or may not have moved schools multiple times, but doing fairly well overall
- ○ **3 - Moderate risk:**
Moderately below grade level (more than one year); variance between cognitive ability and academic ability may indicate learning disability; may not be in appropriate educational setting or may have had moved schools multiple times which may be affecting grade level; potentially sporadic attendance or evidence of learning disability that may not be managed appropriately and may need more specific resources to assist; may not have IEP and may need educational assessment; or has IEP but has not progressed with current level of resources
- ○ **4 - High risk:**
Seriously below grade level (more than one year); variance between cognitive ability and academic ability may indicate learning disability; or unstable/multiple school placements may have affected grade level; or sporadic attendance or evidence of significant learning disability, that may not be managed appropriately and may need significant additional resources to manage; may not have IEP and may need educational assessment; or has IEP but has not progressed with current level of resources
- ○ **5 - Critical or very high risk:**
Significantly below grade level (more than one year); variance between cognitive ability and academic ability may indicate learning disability; or minimally attending school, unsuitable educational setting, or unstable/multiple school placements may have affected grade level; or significant learning disabilities that may not have been managed appropriately; may not have IEP and may need educational assessment; or has IEP but has not progressed with current level of resources

Please see Appendix A. Child Baseline and Outcome Scale Descriptions for a more detailed description of the scales used for a child's Baseline and Outcome Scale TouchPoint.

2.1.2   Goal Setting

Once you and your Senior Program Coordinator (SPC) complete a Baseline Scale for a child, you will move on to establishing Advocacy Goals. The Advocacy Goals are set along with your SPC during an in-person or phone discussion and are recorded in an **Advocacy Goals TouchPoint**. These goals will be based on your understanding of the child's current needs in the areas of *Safety*, *Permanency* and *Well-Being (Physical Health, Mental Health, and Education)*.

Here is what the Advocacy Goals TouchPoint looks like in ETO:

Advocacy Goals for Fake, Andrew on 5/25/2016 ← **Don't edit this date!**

Advocacy Goals

The purpose of this TouchPoint is to set advocacy goals for a child.

This TouchPoint should be completed:

• for each individual child

• within the first 30 day of an appointment of a CASA

• updated, as appropriate, in conjunction with SPC/CASA case review

Physical health and/or physical well being goal relevant?

○ No physical well being goal is appropriate at the moment
Clear Selection

Well-Being - Physical Health & Physical Development goal(s):

```
1. CASA will advocate for child to be seen and assessed by a specialist
to address ongoing stomach pains reported by child.
```

Mental health or social/emotional goal relevant?

○ No mental health or social/emotional goal is appropriate at the moment
Clear Selection

Well-Being - Mental health & Social/Emotional developmental goal(s):

```
1. CASA will observe child in foster home to assist in assessing
potential factors contributing to child's aggressive behavior in home.

2. CASA will assess and recommend that CSW identify age-appropriate
resources that address mental health concerns of child and encourage
CSW to refer.
```

*Note: When a Goal is accomplished or you need to add or change a goal, you and your SPC will discuss and your SPC will record a <u>new</u> **Advocacy Goals TouchPoint**. Do not edit your existing Goals!*

2.2 THROUGHOUT YOUR CASE: REQUIRED MONTHLY DOCUMENTATION

2.2.1 Progress Notes

Your Progress Notes are an essential aspect of your Advocate Documentation. You are responsible for recording Progress Notes each month. Progress Notes are used to:

- Help you and your Senior Program Coordinator stay focused and on-track to meet your Advocacy Goals and communicate relevant case information to your SPC.
- Have your information ready to assist in writing your Court Reports
- Maintain regulatory CASA court standards for an up to date Child's CASA Legal File.

Similar to your Court Report, Progress Notes should be written in the third person.

Progress Notes are comprised of three separate TouchPoints:
1. Child Visit Log (1 per month minimum)
2. Case Note Log (1 per month minimum)
3. Monthly Goals Update (1 per month only)

2.2.1.1 Child Visit Log (1 per month *minimum**)

The Child Visit Log TouchPoint is used to record notes about your monthly contact (face-to-face visits and other contact) you have with your child. These notes should summarize visit activities and occurrences, crisis-issues and anything note-worthy from the visit. A new Child Visit Log must be recorded **at minimum once per month.**

Here is what the Child Visit Log TouchPoint looks like in ETO:

Note: If you visit or contact your CASA child more than one time in a month, you will **record a separate Child Visit Log TouchPoint for each individual visit or contact. For example, if you visit your CASA child and have a phone call the following week in the same month, you would record two Child Visit Logs that month.*

2.2.1.2 *Case Note Log (1 per month <u>minimum</u>*)*

The Case Note Log TouchPoint is used to record notes about your calls, emails or visits with **other people** (e.g. case parties) in your child's life. Case Notes should be completed as contact is made throughout the month, and must be completed **at minimum once per month**.

Here is what the Case Note Log TouchPoint looks like in ETO:

Note: If you contact more than one case party in a month, you will **record a separate Case Note Log TouchPoint for each individual visit or contact. For example, if you have a phone call with the Child Social Worker and a visit with a teacher in the same month, you will record two Case Note Logs for that month.*

2.2.1.3 Monthly Goals Update (1 per Month)

The Monthly Goals Update is **one of the most important areas of progress notes**. This TouchPoint is used to record a quick summary of what progress you have made towards your Advocacy Goals at the end of each month. **Your current goals will pre-populate into this section each month for you to easily record your progress.** Monthly Goals Updates must be recorded **once per month.**

Here is what the Monthly Goals Update TouchPoint looks like in ETO:

Monthly Goals Update for Fake, Andrew on 11/9/2016

> **Don't edit this date!**

Identifier: October Goals Update

> Use the "Identifier" field to give your Log a title. This is a great tool to help you organize and sort through your Log!

Monthly Goals Update

The purpose of this TouchPoint is to record a monthly case summary with respect to the child's advocacy goals and case characteristics.

This TouchPoint can be used for the individual participant/child or for the collection/sibling group.

Date of Monthly Report: *
10/31/2016

> Goals Updates should be recorded at the end of each month.

For each case goal area (Safety, Permanency, Well-being) please document progress made towards goal.

Please describe advocacy interventions (efforts made on behalf of case goals) and responses/outcomes from these efforts.

Safety Goal (populated from the child's latest Advocacy Goals TouchPoint):

> **Sample Safety Goal Update**

1. CASA will gather information on alleged bullying taking place in school and the potential need for further action to be taken by school staff.

Please indicate if:

○ **Safety goal** is not applicable and/or there were no interventions made this month
[Clear Selection]

Updates for **Safety** Goal(s): Please describe your advocacy efforts and responses/outcomes from these efforts. Example: **"CASA has done X which resulted in Y."**

```
CASA spoke with school personnel and homeroom teacher and determined
that child was being bullied daily and afraid to go to school. CASA
asked school staff to look into behaviors of students identified. The
Assistant Principal met with several students to address the bullying
behaviors and child was moved to a new classroom last week (10/16).
Teacher reports child has been less anxious in class.
```

Permanency Goal (as per this child's latest Advocacy Goals TouchPoint):

> **Sample Permanency Goal Update**

1. CASA with gather information on child's adjustment to foster home and advocate for placement with sibling. 2. CASA will contact DCFS worker to recommend engagement in sports and recreational activities in community outside of foster home to assist in coping skills development and decreasing AWOLS due to depressive episodes.

Please indicate if:

○ **Permanency goal** is not applicable and/or there were no interventions made this month
[Clear Selection]

Updates for **Permanency** Goal(s): Please describe your advocacy efforts and responses/outcomes from these efforts. Example: **"CASA has done X which resulted in Y."**

```
CASA met with child to assist in determining child's adjustment to new placement. CASA gathered
information about child's adjustment and placement needs/wishes. CASA spoke with CSW about
appropriateness of placement and concerns – ensured child's wishes were communicated to CSW. Spoke
with Attorney about placement with sibling. CASA developed court report with placement
recommendations.
```

2.2.2   Volunteer Hours (Monthly)

The Volunteer Hours TouchPoint is used to record the number of hours and time travelled in a month spent advocating for a child. Volunteer Hours must be recorded **once per month.**

Note: The Volunteer Hours TouchPoint is accessed on the <u>My CASA Dashboard</u>, *not* your Child's Dashboard.

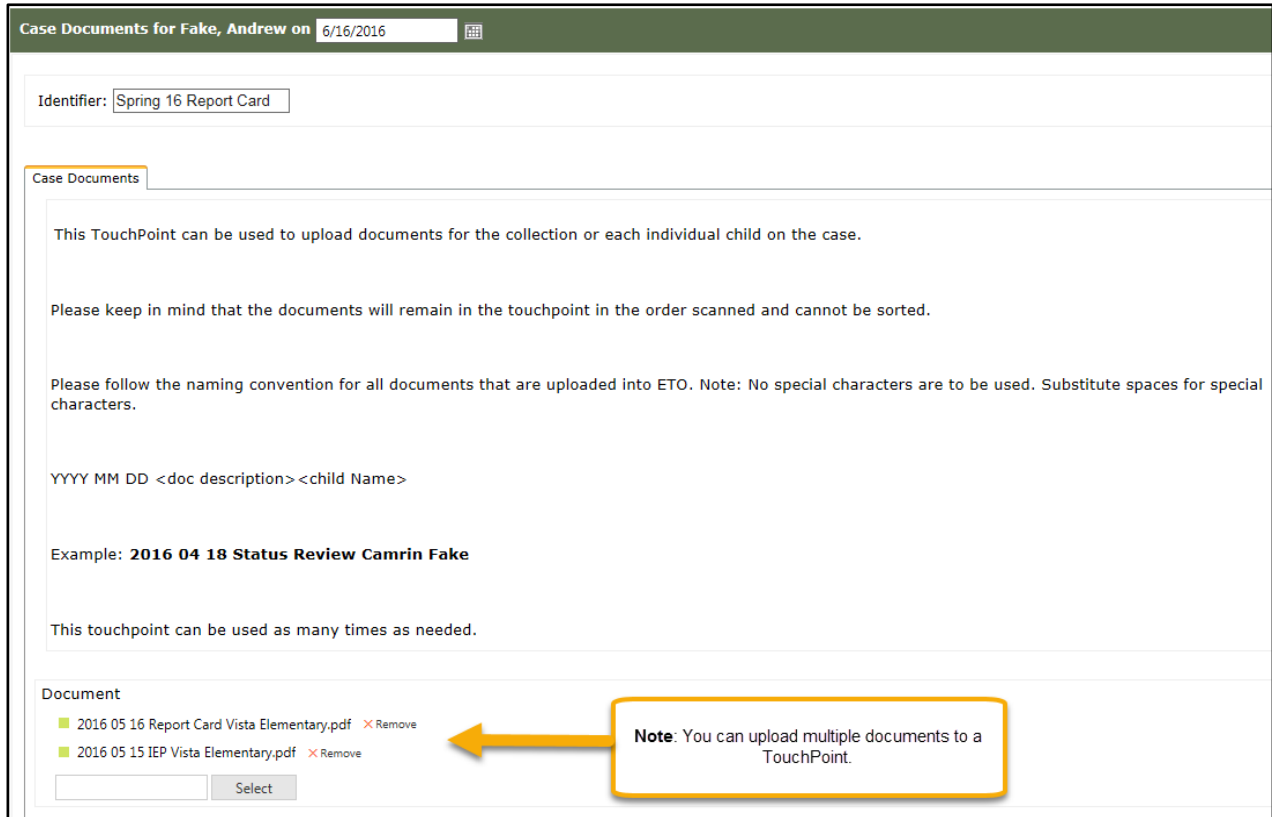**Here is what the Volunteer Hours (Monthly) TouchPoint looks like in ETO:**

2.3 THROUGHOUT YOUR CASE: DOCUMENTATION TO COMPLETE AS NEEDED

2.3.1 Uploading Case Documents

The Case Documents TouchPoint is used to upload and save case-related documents to the child's case file. Case documents may include historical case information, medical or educational records, child birth certificates and/or social security cards. The Case Documents TouchPoint is **only used as needed.**

Here is what the Case Documents TouchPoint looks like in ETO:

2.3.2 Saving Case Contacts

The Contact for Case TouchPoint is used to record case contacts active on a case at a given time. The "All Case Contacts" Report, available on the child dashboard, compiles all Contacts you record into a single, printable address book (see Printing out all Contacts for the Case for more information). The Contact for Case TouchPoint is **only used as needed.**

Here is what the Contact for Case TouchPoint looks like on ETO:

2.3.3   Updating Child Placement

The Child Placement TouchPoint is used to record any changes in your child's placement. The Child Placement TouchPoint is **only used as needed.**
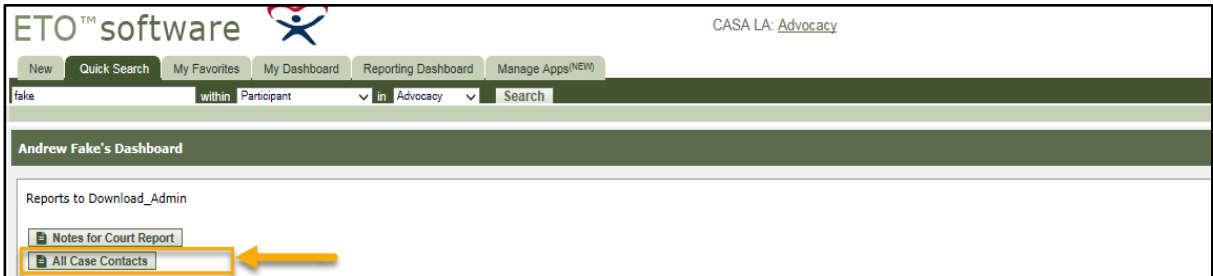
Here is what the Child Placement TouchPoint looks like in ETO:

2.3.4 Helpful ETO Resources for CASAs

2.3.4.1 Printing out all Contacts for the Case

You can download all the child/case Contacts that you have entered into ETO. This file can then be printed, or saved as an electronic file to readily have on hand.

2.3.4.2 Preparing for the CASA Court Report

The report includes the last 12 months of a child's Case Notes, Visit Logs, & Monthly Goals all in ONE FILE. This report can then be copied and pasted into WORD or printed and used as a reference when preparing your Court Report.

To download the report:

1. Click on the "Notes for Court Report" button at the top of the child's dashboard.
Note: If you have just recently added Case Notes, Case Visits, or Monthly Goals updates, they may not appear for 15 minutes in this report.

Emma Fake's Dashboard

Reports to Download

- Notes for Court Report 1
- All Case Contacts

2. You will get a message that the report is opening in a new window. It will usually take you there automatically. If it does not, you will need to go to the new tab in your browser.

ETO™ software   CASA LA: Advocacy

Quick Search | My Favorites | My Dashboard

Enter Search Term(s)   within Participant   in CASA LA (C)   Search

2 Your report is opening in a new window. If the report does not appear, ensure that your browser did not prevent it from opening via a Pop-Up Blocker.
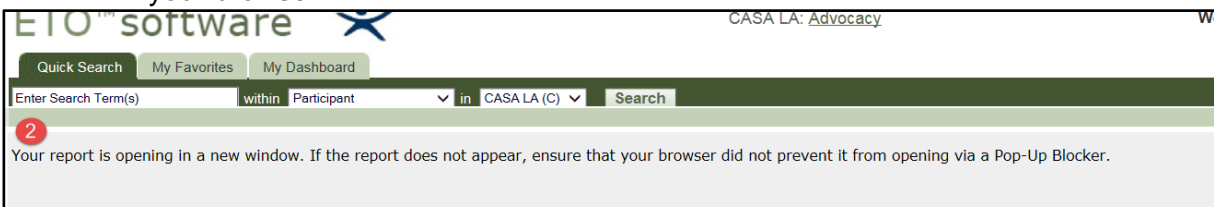
3. To download the report, click on the "Document" drop down.

4. Click on "Save report to my computer as".

5. Select the format you want to save the report into (e.g. Excel, PDF, etc.) We recommend either Excel or PDF to make it easier to copy and paste into your court report template.

Document   3   100%   1   /1+
Close
Save as
Save to my computer as
Save report to my computer as   4   Excel
                                        Excel 2007   5   en: 12/24/15 and 1
                        Case notes logs   PDF
                                        Text
                        Case notes logs   ike, Andrew
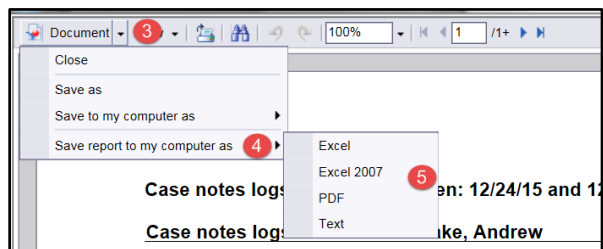
6. At the bottom of your computer screen, a prompt window will appear asking if you would like to Open OR Save the document. Click on Save and NOT the arrow.

EDICATION: They are waiting on what I understand to be a renewal but possibly a

d Visit Log | Monthly Goal Updates

6

Do you want to open or save **Notes for Court Report_Updated.pdf** (68.4 KB) from **liveoffice.etosoftware.com**?   Open   Save ▼   Cancel   ×
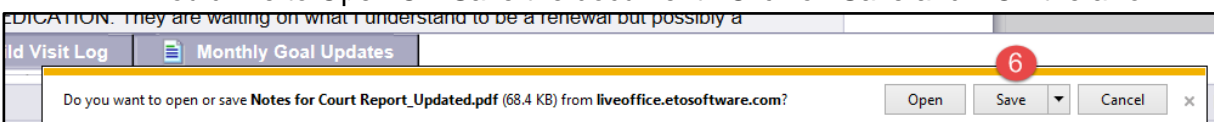
7. Click on Open and the file will open up in your selected format (in step 5).

d Visit Log | Monthly Goal Updates

7

The Notes for Court Report_Updated.xls download has completed.   Open ▼   Open folder   View downloads   ×   D
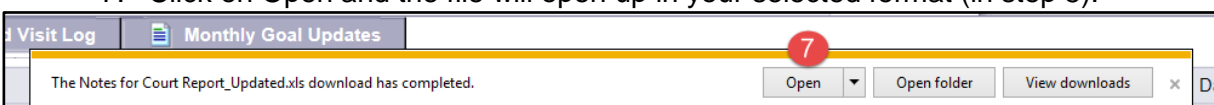
Report format:

The report is separated into three sections: Case Note Log, Child Visit Log and Monthly Goals Update.
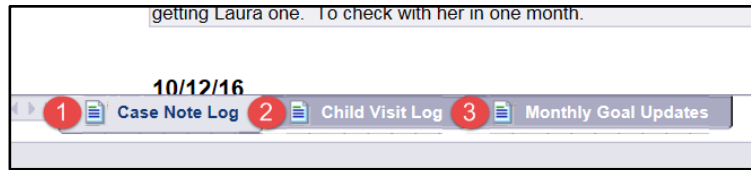
Each section of the report is organized in order of newest to oldest TouchPoints recorded for a particular child. Once you download the report, you will be able to review the TouchPoints recorded in the last 12 months for a child. From here, you will be able to copy and paste the notes you would like into your court report template.

2.4 END OF CASE

2.4.1 Outcomes Scale

Once your case comes to an end and final progress notes and reports have been completed, you and your Senior Program Coordinator will mutually discuss and complete the Outcomes Scale TouchPoint using the Child Baseline and Outcome Scale to provide some closure for the case, review all your advocacy efforts that contributed to stability in the case, and assess the final outcomes with regard to *Safety*, *Permanency* and *Well-Being (Physical Health, Mental Health, and Education)* just as you completed at the onset of the case.   Ideally, the Outcomes Scale will indicate increased stability in each of the goal areas of *Safety*, *Permanency* and *Well-Being*.

Please see Appendix B. Advocate Documentation Checklist for an overview of the advocate documentation including how often it should occur and who is responsible for completing each TouchPoint.

3 ETO SOFTWARE SYSTEM BASICS

3.1 LOGGING IN TO ETO®

Currently ETO software is **only supported fully** in Windows operating systems using **Internet Explorer** or on MACs, including the iPad, using the **Safari** browser. While ETO software may work in other browsers, Social Solutions does not currently support their use.

1. In your web address bar, type in **www.etosoftware.com** and enter your username and password.
2. At the ETO log in screen, type in your username, which will always be your advocatecasala.org email.
3. Type in your password. (Note: the very first time you log in, ETO will prompt you to reset your password. Please do this on your computer, not your phone or tablet.)
4. Click on "Log In"
5. If you forget your password, please call the ETO Help Desk to reset it. The "Forgot your password?" on the log in screen does not always work.

3.2 LOGGING OUT OF ETO®

ETO® will automatically time out after a period of 60 minutes inactivity. Please get into the habit of saving your work and logging out of ETO whenever you leave your computer/device unattended.
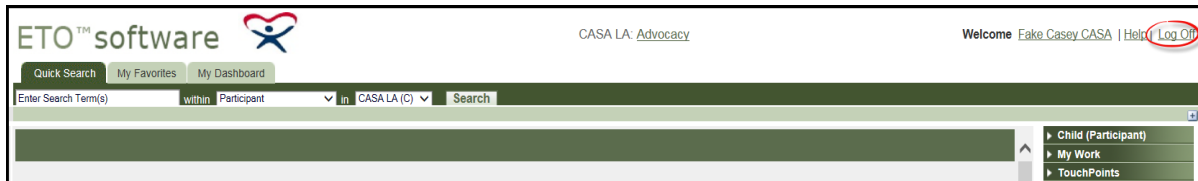
3.3 ETO® TERMINOLOGY

ETO® uses specific terminology. A few key terms to keep in mind and their definition:

- **Participant** – recipients of advocacy, e.g. the child
- **Entity** – third parties that affect the life of a child, e.g. the CASA advocate or CASA LA staff.
- **Collection** – a group of participants (siblings, identified by court case number)
- **Program** – a distinct area of ETO (e.g. CASA LA Programs include Waitlist and Advocacy)
- **TouchPoint** – an electronic 'form' used to capture information about Participants, Collections, or Entities.

3.4 UPDATING MY PASSWORD

To change your password:
1. Click on your name next to "Welcome"
2. Click on "Change My Password & Security Questions"
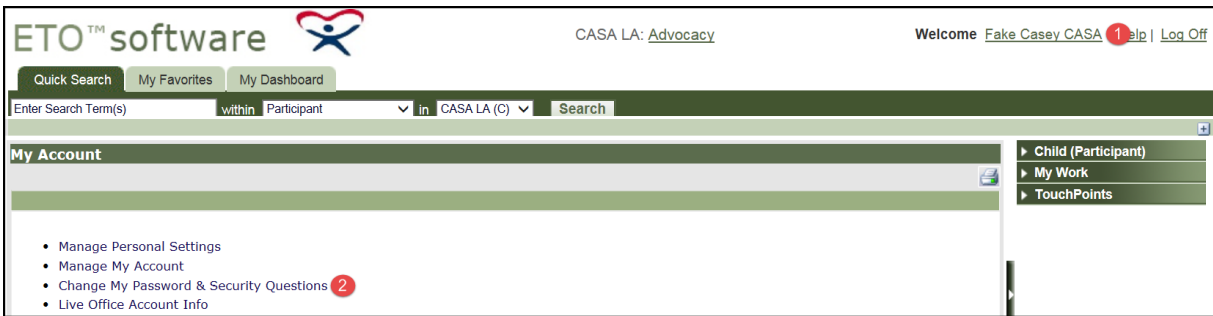
3. Enter your "Current Password"
4. Enter a "New Password" that only you know (and remember to save it in a secure place for future reference)
5. Enter your new password again in the "Confirm Password" field
6. Select three "Challenge Questions" and enter their corresponding responses next to each question.
7. Click on "Save" and you are all set!
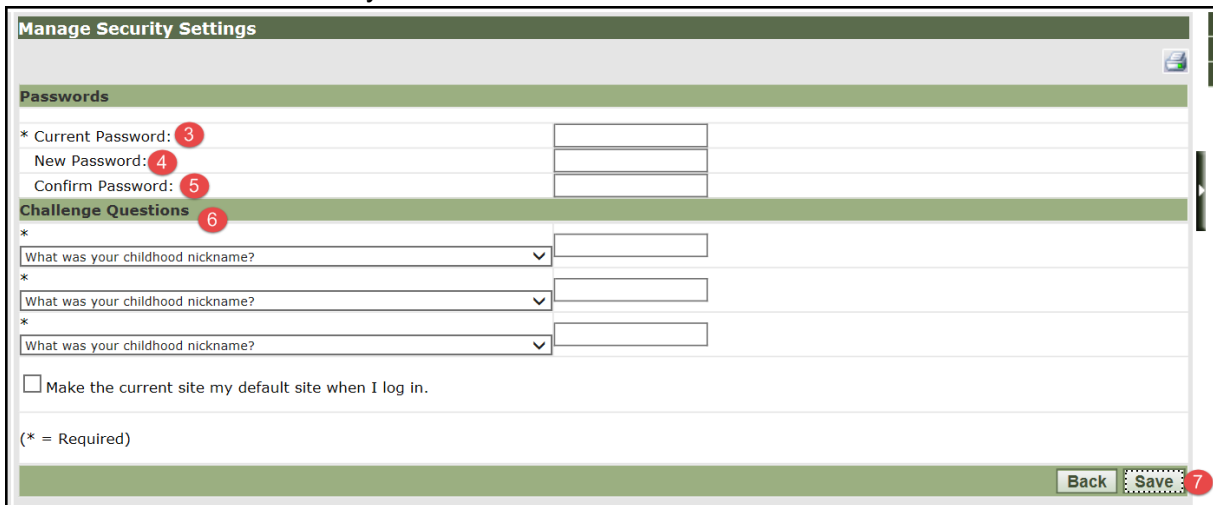
3.5 ETO® HELP

If you get stuck or need assistance:
*   **Skim** the table of contents of this manual to see if it is covered
*   **Call** your Senior Program Coordinator … and catch up on other things too!
*   **Call or email** the ETO Help Desk: (323) 859-2888 x6354 or ETOHelp@casala.org

4 VIEWING A CHILD ON THE WAITLIST

One of the first things you will do as a CASA is review a new case for potential match.

To switch to the Waitlist program:

1. Select "Waitlist" and click on "Go" from the drop down menu in the center top of ETO. You will then have access to the child in the Waitlist.

Note: Don't forget to select "Advocacy" and click on "Go" to get back to the Advocacy program where your assigned children are found.

2. Confirm that you are in the Waitlist program by looking to see that it looks like the image below. From here, you will be able to see the child's name whose case you are to review.
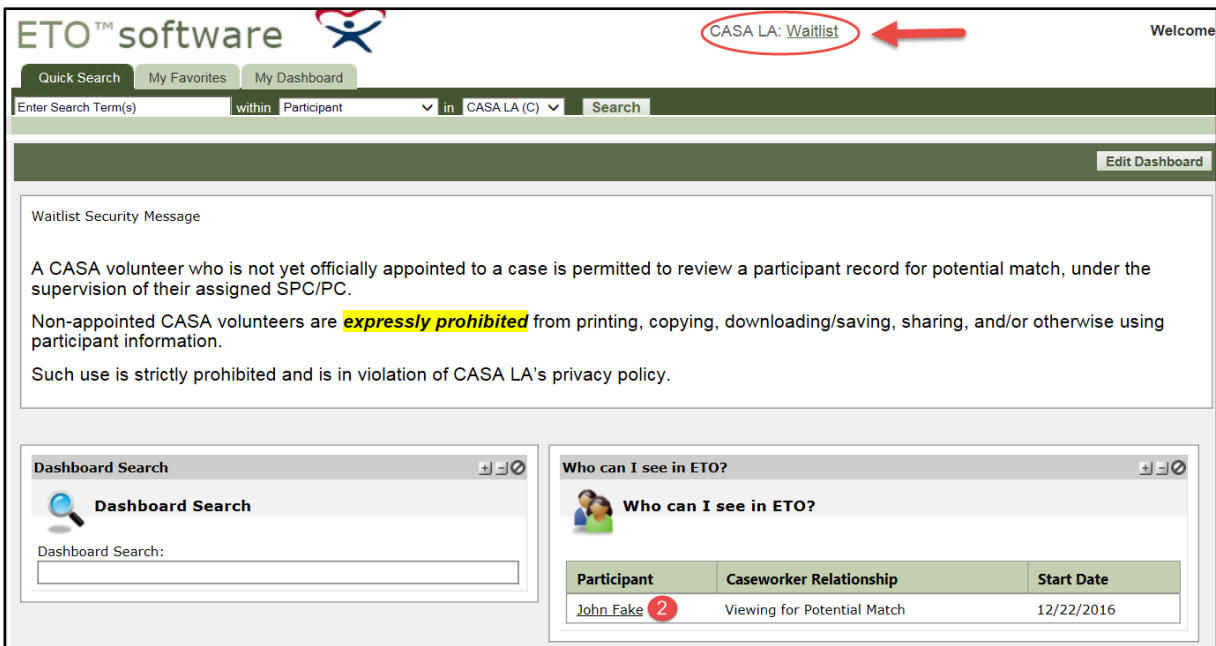
To begin reviewing the child:

1. On your Waitlist Program Dashboard (pictured below), you will see that you have access to a child and that you are "Viewing for Potential Match". Clicking on the child's name will take you to that child's Dashboard.
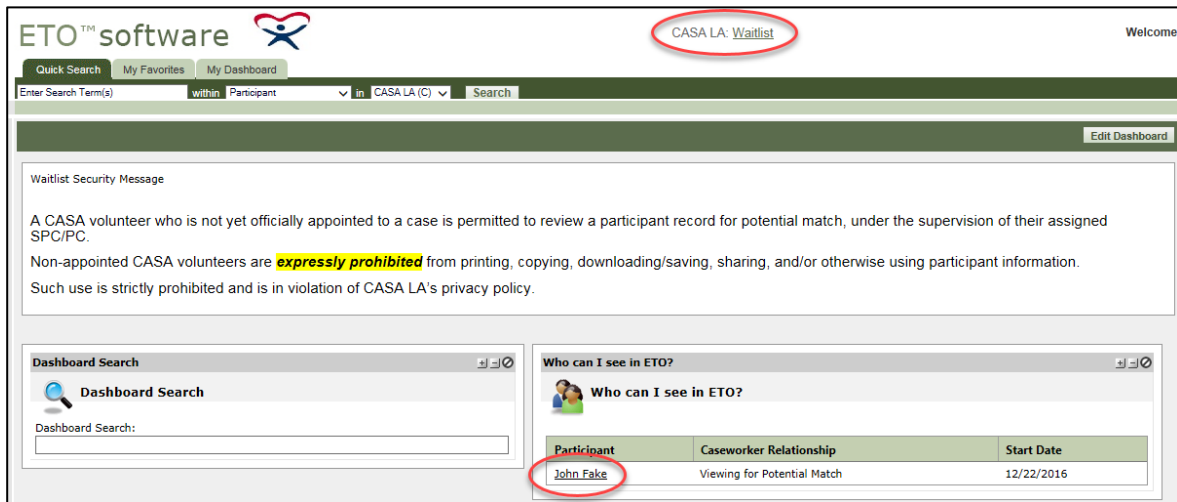
Step 2: Once on the child's Dashboard, you have access to view their full case file. Click on "View Child TouchPoints" to review their case information via the Referral, Initial Case Assessment and Case Documents TouchPoints.
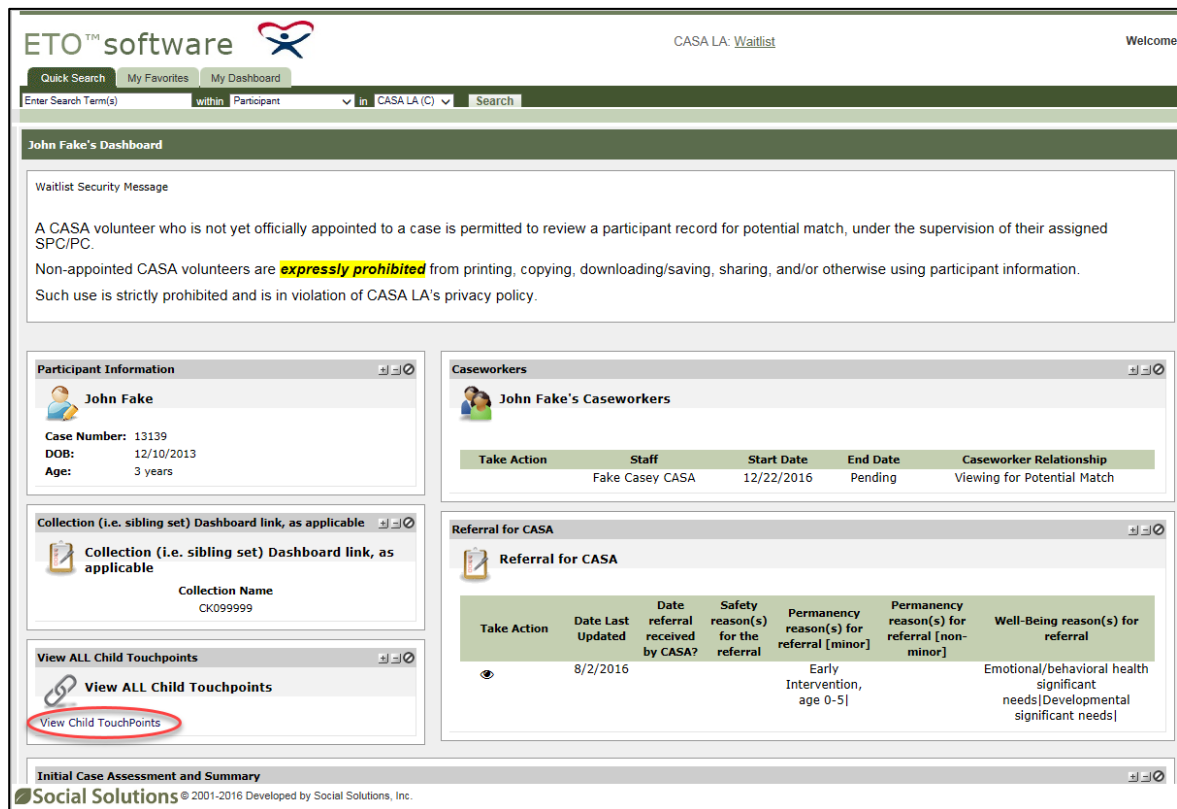
5 USING ETO

5.1 A LOOK AROUND THE HOME PAGE

5.1.1 My CASA Dashboard

Almost everything you need to do in ETO will launch from a Dashboard.

In information technology, a Dashboard is a user interface that organizes and presents information in a way that is easy to read. A Dashboard does not tell us *everything*, but it gives us a summary of key information.

The page you see when logging into ETO is known as "My Dashboard". This is your home page that provides an overview of the child(ren) you are advocating for and much more.

Your Dashboard or Home Page is made up of five primary parts:
1. **Quick Tabs** –
   a. Quick Search – allows you search for a child by entering their first and/or last name.
   b. My Favorites – You may ignore it.
   c. My Dashboard – This page provides a current summary of key information pertaining to your role in ETO including the child(ren) you are currently matched to in ETO and an overview of the most recent TouchPoints you have completed in ETO.
2. **Navigation Dashboard** – allows you to search for a child and view an existing or record a new TouchPoint for the child or yourself.
   a. Child (Participants) –works just like the quick search function.
   b. My Work – click on "My Dashboard" to go back to your home page.
   c. TouchPoints – record a new TouchPoint or view previously recorded TouchPoints for a child or yourself.
3. **View Child/Collection TouchPoints** –view all TouchPoints recorded for a child or a collection of children.
4. **My Caseload** – an overview of the child(ren) assigned to you.
5. **Close side navigation bar** – click on the arrow to close the navigation bar and extend your view of the page you are on.

5.2 CHILD'S DASHBOARD

Most of your advocacy work for a child can be done from the child's dashboard. There are a few ways to get to a child's Dashboard. Either from My Dashboard, the Quick Search Bar, or another way is to use the Navigation Pane.

5.2.1.1 How to find a Child's Dashboard *from 'My Dashboard'*

From 'My Dashboard' simply click on the hyperlink for the name of the child you wish to see:

5.2.1.2 How to find a Child's Dashboard *using 'Quick Search'*

1. Click on the 'Quick Search' tab
2. Type in the last name (or part of the last name) of the child
3. Check that the table you wish to search 'within' is 'Participant'
4. Check that the scope of the search is selected for the appropriate Program
5. Click 'Search'
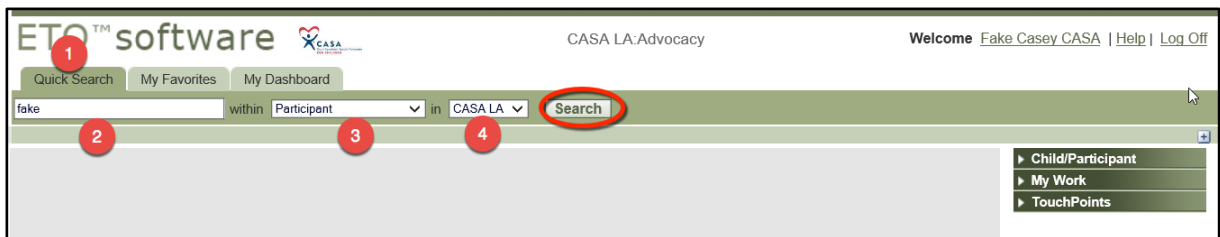
ETO will return children that are a match and that **only you** are currently advocating for (these children also show up under "My Caseload" on your dashboard.)

To view the child's dashboard:

1. Click on the specific child's dashboard you wish to view
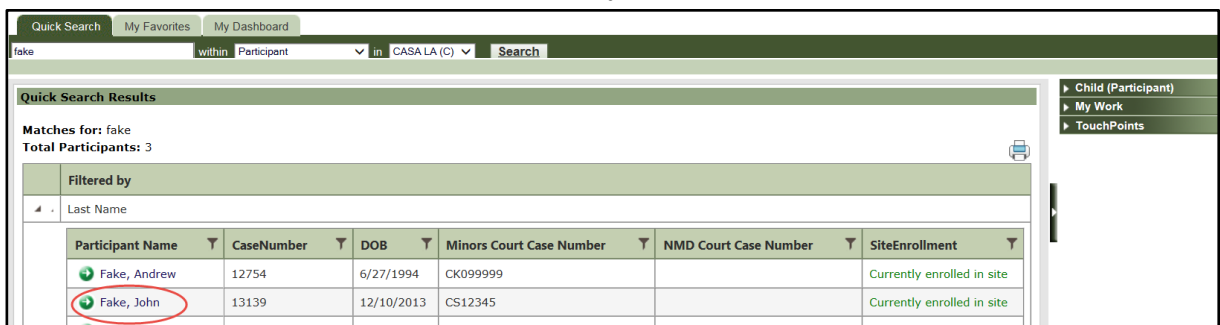
2. Click on "View [child's name] Dashboard"
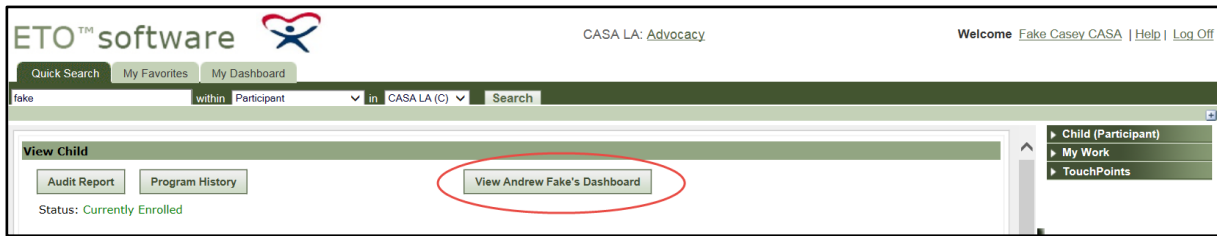
5.2.1.3 About the Child's Dashboard

The child's dashboard provides a summary of the most recent information recorded for the child. It is made up of several sections that provides a CASA an overview of the child's case and helps guide a CASAs work in ETO.

5.2.1.3.1 Dashboard Terminology

On the child's dashboard there are a few key terms to keep in mind and their definition:
- **Collection** – a group of participants (siblings, identified by court case number).
- **Caseworker** – entities who are assigned to the child in ETO including an SPC, CASA and/or Peer Coordinator.

5.2.1.3.2 Child Dashboard Parts

A child's dashboard consists of various parts organized by the type of information they contain:
1. **Child's name**
2. **Reports to Download -** you can download and print to help with preparing your
   a. Court Report – helps with preparing court report
   b. Case Contacts – includes active contacts recorded in ETO
3. **Record New Child TouchPoint -** quickly record a new TouchPoint for the child by clicking on any of the boxes
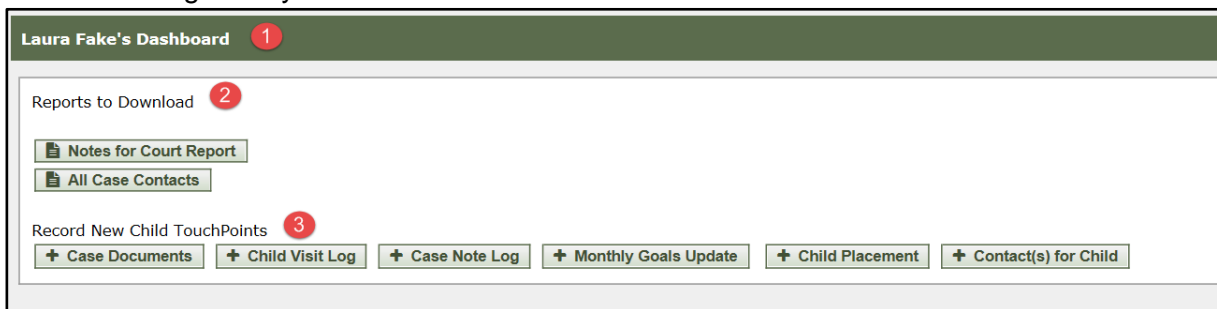
4. **Participant Info –** includes picture of child and some demographics
5. **Caseworkers –** includes individuals who have access to the child in ETO (e.g. CASA, SPC and/or Peer Coordinator)
6. **Record or View Child's TouchPoints**
   a. "Record TouchPoints" - record a new TouchPoint for the child
   b. "View Child TouchPoints" – provide a summative overview of all TouchPoints ever recorded for the child

7. **Collection (i.e. sibling set) Dashboard link, as applicable –** If child is part of a sibling court case they will be assigned to a "Collection" in ETO. Click on the link to go to the Collections dashboard.

8. **Recent Monthly Goals Updates (TO BE COMPLETED MONTHLY) –** list the most recent Monthly Goals Updates TouchPoints recorded for the child.

Take Action	Date Last Updated	Date of Monthly Report:	Updates for Safety Goal(s):	Updates for Permanency Goal(s):	Updates for Well-being goal(s) pertaining to physical health:	Updates for Well-being goal(s) pertaining to mental health:	Updates for Well-Being Education & Learning goal(s):
👁 ✏ ➕ 🗑	6/27/2016	7/31/2016		Spoke with the attorney and he stated Laura is on track for adoption		Spoke to Laura and she seems to understand her behavior is wrong.	
👁 ✏ ➕ 🗑	6/24/2016	6/30/2016		Spoke with attorney and she stated Laura is on track to be adopted		Spoke with Laura and got her to understand she needs to behave.	

9. **Recent Child Visit Logs (TO BE COMPLETED MONTHLY) –** list the most recent Child Visit Log TouchPoints recorded for the child.

Take Action	Date Last Updated	Identifier	Date of Visit:	Notes from Visit:
👁 ✏ ➕ 🗑	8/26/2016	Safiah Visits Andrew & Laura at foster home	8/26/2016	I visited Andrew & Laura today at their foster home. Would include detailed notes here...~Safiah Afify

10. **Recent Case Note Logs (TO BE COMPLETED MONTHLY) –** list the most recent Case Note Log TouchPoints recorded for the child.

Take Action	Collection	Date Last Updated	Date of contact:	Subject of notes as it relates to the child's advocacy goals:	Name(s) of Contact(s):	Notes:
👁 ✏ ➕ 🗑		11/28/2016	11/28/2016	Education	Sara Smith	Spoke with Sara Smith regarding upcoming IEP will be there on Dec. 2

11. **Recent Case Documents –** list the most recent Case Document TouchPoints completed for the child. Uploaded documents are displayed as a hyperlink and may be clicked on to view the document.

Take Action	Collection	Date Last Updated	Identifier	Document
👁 ✏ ➕ 🗑		6/30/2016	DQR 6/30/2016	Copy of Advocacy Data Quality Report.xls
👁 ✏ ➕ 🗑		6/27/2016	Progress Report 6/16/2016	ChatLog New Grads 6_16 3_00 _ 4_30 2016_06_16 16_21.rtf

12. **Recent Hearings –** list the most recent Hearings TouchPoints and displays information about the hearing. Uploaded documents are displayed as a hyperlink and may be clicked on to view the document.

13. **Recent Contacts –** list the most recent Contacts for Case TouchPoints and displays contact information about the contacts.

14. **Recent Child Placements –** list the most recent Child Placement TouchPoints and displays contact information for the placement. It also provides the start and ends dates for each placement.

15. **Recent TouchPoints –** list the most recent TouchPoints recorded for the child.

5.3 COLLECTION DASHBOARD

A collection dashboard provides a summary of the most recent information recorded for the collection. It is composed of several sections that helps a CASA obtain an overview of the collection's case and to help guide a CASAs work in ETO. The layout of this dashboard is very similar to an individual child's dashboard.

Remember that a collection is a group of participants (siblings, identified by court case number).

A collection's dashboard consists of various parts organized by the type of information they contain:

1. **Collection's name**
2. **Collection Information –** provides the court case number for the collection/sibling set and the number of members in the collection/sibling case.
3. **Collection Members –** provides the names of the children in the collection/sibling set. Their names are hyperlinked and you may click on them to go to the individual child's dashboard.

CK099999's Dashboard (1)

Collection Information (2)

👤 **Court Case Number Information**

Court Case Number Name: CK099999
Number of members: 3

Collection Members (3)

👤 **Court Case Number Members**

Name
Fake, Andrew
Fake, John
Fake, Laura

4. **Recent Hearings –** list the most recent Hearings TouchPoints recorded for the collection and displays information about the hearing. Uploaded documents are displayed as a hyperlink and may be clicked on to view the document.
5. **Recent Child Visit Logs –** list the most recent Child Visit Log TouchPoints recorded for the collection.
6. **New –** click on this to record a new TouchPoint. If you click on this in the Recent Child Visit Logs section, a blank Child Visit Log TouchPoint will open.

Recent Hearings (4)

📋 **Recent Hearings**

Take Action	Collection	Status	Date Last Updated	Recorded By	Identifier	Court Room Number/Department	Hearing Date	Hearing Type	Hearing Status	Upload Results of Hearing sheet:
👁	CK099999		11/4/2016	Jessica Vallejo	Testing 1	9038	11/4/2016	File Petition (300)|	Held/Completed	

Recent Child Visit Logs (5)

📋 **Recent Child Visit Logs**

Take Action	Collection	Name	Date Completed	Recorded By	Identifier	Date of Visit:	Notes from Visit:
👁 ✏ ➕	CK099999		8/26/2016	Fake Casey CASA	Safiah Visits Andrew & Laura at foster home	8/26/2016	I visited Andrew & Laura today at their foster home. Would include detailed notes here...~Safiah Afify
👁 ✏ ➕	CK099999		7/18/2016	Fake Casey CASA	Sibling Visit	7/5/2016	test for collection
👁 ✏ ➕	CK099999		7/18/2016	Fake Casey CASA	Andrew, Laura	7/18/2016	(test) here is where I put my notes about my visit with both Andrew and Laura. It was successful.

➕ New (6)

7. **Recent Case Note Logs –** list the most recent Case Note Log TouchPoints recorded for the collection.
8. **New –** click on this to record a new TouchPoint. If you click on this in the Recent Case Note Logs section, a blank Case Note Log TouchPoint will open.
9. **Recent TouchPoints –** list the most recent TouchPoints recorded for the collection.

Recent Case Note Logs (7)

📋 **Recent Case Note Logs**

Take Action	Collection	Date Completed	Recorded By	Identifier	Date of contact:	Name(s) of Contact (s):	Contact's Title (s):	Notes:
👁 ✏ ➕	CK099999	7/18/2016	Fake Casey CASA	7/18/16 Jill Cady	7/18/2016	Peter Gabriel	musician	Fake notes. Lots of fake notes. Court report fake notes.
👁 ✏ ➕	CK099999	3/28/2016	Fake Casey CASA	Case Note 3/28/16	3/23/2016	Pat Benatar	CSCW	
👁 ✏ ➕	CK099999	7/20/2015	Fake Casey CASA		7/6/2015	Andrew Fake		I was there

➕ New (8)

Recent TouchPoints

📋 **CK099999's Recent TouchPoints** (9)

Take Action	TouchPoint	Dashboard Collection	Program	Name	Subject Type	Status	Date Completed	Date Last Updated	Audit Creation Date	Recorded By	Attributed Staff Name	Identifier
👁	Hearings	CK099999	Advocacy		Participant		11/4/2016	11/4/2016	11/4/2016	Jessica Vallejo		Testing 1

5.4 TOUCHPOINTS

TouchPoints are an 'electronic form' used to capture information about children, either individually, or as a Collection.

5.4.1 Recording a TouchPoint for a Child from their Dashboard

To record a TouchPoint for a child, you may do that from the buttons located at the top of a child's dashboard as seen below. Just click on the button of the TouchPoint you would like to record. To get more step-by-step instruction on completing these TouchPoints please refer to section 5.2 THROUGHOUT YOUR CASE: DOCUMENTATION TO COMPLETE MONTHLY
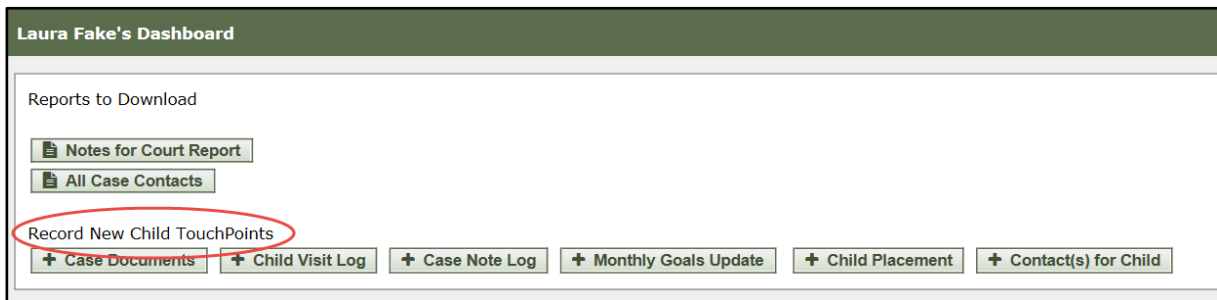
### 5.4.2 Recording a TouchPoint for Collection (e.g. siblings)

Recording a TouchPoint for a collection, a sibling set identified by court case number, makes it easier to record the **same information** once for a ground of children rather than having to record a TouchPoint for each child.

Begin from any one of the collection member's/child's dashboard:

1. Scroll down, below "Participant Information", in the "Collection (i.e. sibling set) Dashboard link, as applicable" section, click on the collection name.

2. Click on "New" to record a new TouchPoint. Each section of the dashboard displays this text at the bottom of the section. Click on "New" on the section (e.g. Case Note Log, Child Visit Log or Recent TouchPoint) for which you want to record a TouchPoint.
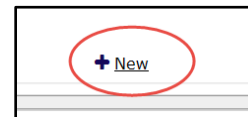
3. If you click on "New" in the "Recent TouchPoints" section, you will be asked to select the type of TouchPoint you want to record. Select the type of TouchPoint you want to record and a window will appear with a blank version of the TouchPoint you selected.
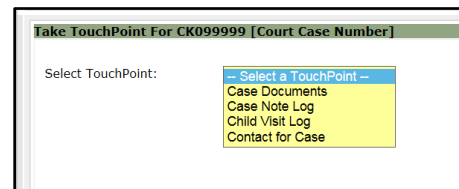
4. On the left side of the TouchPoint you will see the names of the children that form part of the collection. If you would like to remove a child from that list, click on the x next to their name.
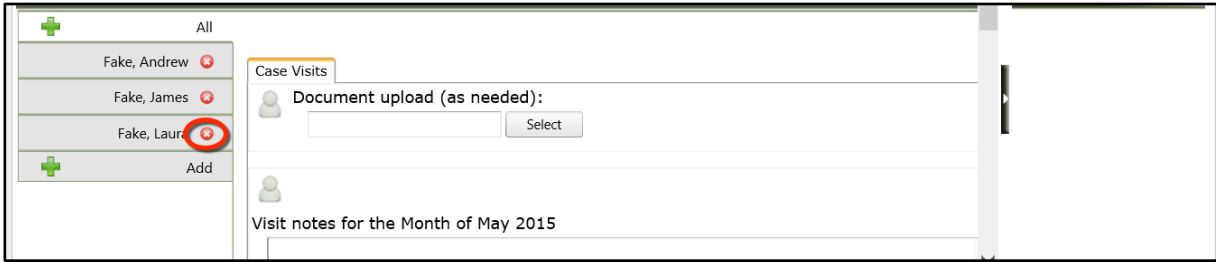
5. You will be asked to confirm the deletion of this member from this TouchPoint recording.

6. Confirm that the selected child was removed by confirming that their name no longer appears on the list located to the left of the TouchPoint.

5.4.3 Identifiers

Most TouchPoints include an "Identifier" field – which is available for you to put in a meaningful reference for an individual TouchPoint.
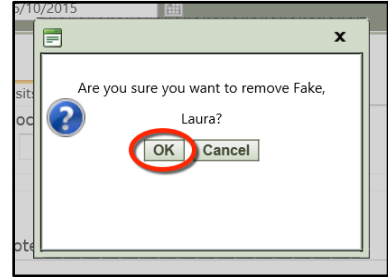

Identifiers are helpful especially as you begin to consistently record TouchPoints for your child and you need to locate a particular TouchPoint in a long list of TouchPoints. You will appreciate the use of the identifier field when searching on a child's dashboard as seen below.

Recent Child Visit Logs (TO BE COMPLETED MONTHLY)

Take Action	Date Last Updated	Identifier	Date of Visit:	Notes from Visit:
👁 ✏ ➕ 🗑	8/26/2016	Safiah Visits Andrew & Laura at foster home	8/26/2016	I visited Andrew & Laura today at their foster home. Would inclu here...~Safiah Afify
👁 ✏ ➕ 🗑	7/18/2016	Sibling Visit	7/5/2016	test for collection
👁 ✏ ➕ 🗑	7/18/2016	Andrew, Laura	7/18/2016	(test) here is where I put my notes about my visit with both Andre successful.
👁 ✏ ➕ 🗑	7/18/2016	Laura	7/18/2016	test entry for visit with laura
👁 ✏ ➕ 🗑	7/17/2016	July visits	7/17/2016	Andrew and Laura went for ice cream.

It will also come in handy when you want to see ALL TouchPoints ever recorded for your child via the "View Child TouchPoints" link on the child's dashboard. To do this:

1. Click on "View Child TouchPoints" on your child's dashboard.

2. A page opens that list all TouchPoints recorded for the child organized by type of TouchPoint. Expand the list of recorded TouchPoints you are interested in reviewing by click on the plus (+) next to header row.

3. You can search for any TouchPoint using the "Identifier" field or by typing in text in the search box located at the top of the column.
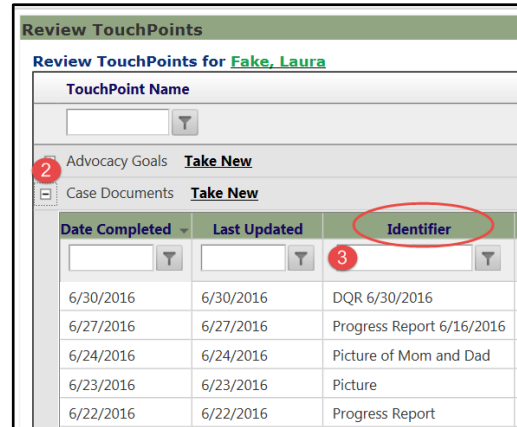
5.4.4 Saving a TouchPoint

Every TouchPoint must be SAVED. You will lose all information if you do not save. In order to save you must scroll to the bottom of the TouchPoint and click SAVE.
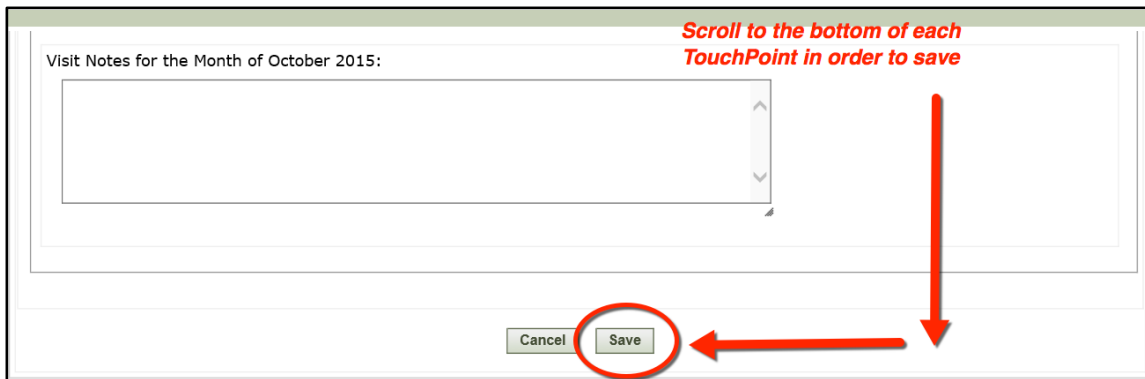
You will know you saved successfully when the TouchPoint submission confirmation appears. You must wait for this window (to the right) to appear or you may risk the chance of losing your work. Once this window appear, click "OK". You will be redirected to the page you were prior to working on the TouchPoint.
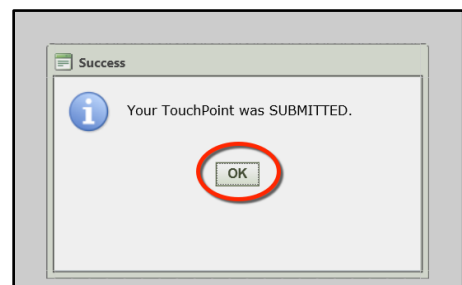
5.4.5 **Viewing or Editing previously recorded TouchPoints**

You can view or edit TouchPoints in a couple of ways.

1. Update a recent TouchPoint recorded for a participant from their Dashboard. Note the "Take Action" icons next to each TouchPoint. Select the appropriate icon (*View (eye), Edit (pencil) or Add (plus) icon.*):

2. If you do not see a TouchPoint that you would like to review or update on a child's dashboard, then click on "View Child TouchPoints" on the child's dashboard.

3. Under the "Take Action" column, click on the appropriate icon.

APPENDIX A. CHILD BASELINE AND OUTCOME SCALE DESCRIPTIONS

NOT APPLICABLE	MINIMAL OR VERY LOW RISK	SLIGHT OR LOW RISK	MODERATE RISK	HIGH RISK	CRITICAL OR VERY HIGH RISK
Safety					
Non applicable- no areas of concern	Minimal/very low risk: injury/illness, risk of harm from/to self or others, shelter.	Slight/low risk: injury/illness, risk of harm from/to self or others, shelter.	Moderate risk: injury/illness, risk of harm from/to self or others, shelter.	Serious but not life threatening: injury/illness, risk of harm from/to self or others, shelter.	Life threatening: injury/illness, risk of harm from/to self or others, shelter.
Permanency					
Not applicable – no areas of concern or case not yet adjudicated.	Plan is to remain in family or reunification imminent and likely. Adult long term connections appear highly likely.	Family reunification plan is likely and low risk. Plan is in adoption phase/ adoptive home identified and adoption likely and low risk. Adult long term connections appear highly likely.	Family reunification plan is possible but has moderate risk. Plan is for adoption, home may or may not be identified, and adoption is moderately likely. Plan is for legal guardianship and likely or moderately likely to occur. Adult long term connections appear moderately likely.	Family reunification plan is at high risk. Plan is for adoption, home may or may not be identified, and adoption is highly unlikely. Plan is for legal guardianship and highly unlikely to occur. Child in long term foster care/group home care/residential care and may or may not have had multiple placements. Adult long term connections are minimal to non-existent.	Family reunification plan is at very high risk. Plan is for adoption, home may or may not be identified, and adoption is very highly unlikely. Plan is for legal guardianship and very high risk and highly unlikely to occur. Child in long term foster care/group home care/residential care and may or may not have had multiple placements. Short term shelter or no substantive plan. Adult long term connections are non-existent.
Well-Being: Physical Health					

Non applicable – no areas of concern	Minimal injury/illness of minimal concern or very slight physical developmental delays that are being managed appropriately	Acute injury/illness or slight physical developmental delays that are being managed appropriately.	Chronic injury/illness or moderate physical developmental delays that may need ongoing treatment, and/or further assessment	Serious but not life threatening injury/illness or significant physical developmental delays that may need ongoing treatment, and/or further immediate assessment	Life threatening injury/illness or extreme physical developmental delays that may need urgent treatment and assessment.

Well-Being: Mental Health

Non applicable – no areas of concern	Minimal adjustment issues in any of the above social/emotional health areas that are being managed appropriately and little effect on overall well-being.	Slight or low level adjustment issues in any of the above social/emotional health areas that are being managed appropriately and have little effect on overall well-being.	Moderate adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having moderate effect on overall well-being. May need mental health or neuropsychological assessment for further treatment and/or other resources to assist in increasing functional adjustment in social/emotional areas	Serious but not life threatening adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having significant effect on overall well-being. May have significant mental health issues/diagnosis, or developmental trauma experiences that are untreated.	Critical and potentially life threatening adjustment issues in any of the above social/emotional health areas that may not be managed appropriately and having very significant effect on overall well-being. May have significant mental health diagnosis that is untreated and may lead to harm to self or others. May be involved in treatment, but treatment has not significantly reduced symptoms. Well-being has not been stabilized. May be evidence of extreme social skills deficits, communication disorder or other social/emotional delays that require immediate further assessment and/or other resources to assist in increasing functional adjustment.

Well-Being: Education

Non applicable – no areas of concern	At grade level, and in appropriate educational setting with little concerns overall. May or may not have had moved schools multiple times, but doing well.	Slightly below grade level (less than 1 yr), in appropriate educational setting or some learning delays that are affecting grade level, that are being managed appropriately or may need minimal additional resources. May or may not have had moved schools multiple times, but doing fairly well overall.	Moderately below grade level (more than 1yr). Variance between cognitive ability and academic ability may indicate learning disability. May not be in appropriate educational setting or may have had moved schools multiple times which may be affecting grade level, potentially sporadic attendance or evidence of learning disability that may not be managed appropriately and may need more specific resources to assist, may not have IEP and may need educational assessment, or has IEP but has not progressed with current level of resources	Seriously below grade level (more than 1 yr). Variance between cognitive ability and academic ability may indicate a learning disability, or unstable/multiple school placements that may have affected grade level, or sporadic attendance or evidence of significant learning disabilities, that may not be managed appropriately and may need significant additional resources to manage, may not have IEP and may need educational assessment, or has IEP but has not progressed with current level of resources.	Significantly below grade level (more than 1 yr). Variance between cognitive ability and academic ability may indicate a learning disability, or Minimally attending school, unsuitable educational setting, or instability/multiple educational placements that may have affected grade level, or significant learning disabilities that may not have been managed appropriately. May not have IEP and may need educational assessment, or has IEP but has not progressed with current level of resources.

APPENDIX B. ADVOCATE DOCUMENTATION CHECKLIST

WHEN	WHAT	HOW	WHO	WHY
At end of first 30 days	**"Baseline Scale"** and **"Advocacy Goals"** TouchPoints are recorded by your SPC/PC during a collaborative discussion with your SPC/PC	Refer 5.1	Complete with your SPC	• To identify advocacy needs and interventions directly relating your individual child and the terms of the court order.
Monthly	Record **"Child Visit Log"** TouchPoint	Refer 5.2.1.1	Complete <u>on your own</u>	• To enter notes about your face-to-face visit or contact with your **child.**
Monthly	Record **"Case Note Log"** TouchPoint	Refer 5.2.1.2	Complete <u>on your own</u>	• To enter notes about your calls, emails, visits with **other** people in your child's life. • To maintain appropriate CASA court records and timely access to relevant case information to SPC/PC.
Monthly	Record **"Monthly Goals Update"** TouchPoint	Refer 5.2.1.3	Complete <u>on your own</u>	• To provide clear updates on the advocacy work provided on a monthly basis and keep advocacy interventions focused on the goals identified.
Monthly	Record **"Volunteer Hours (Monthly)"** TouchPoint	Refer 5.2.2	Complete <u>on your own</u>	• To track Volunteer hours for regulatory standards and for continuing education requirements.
As Needed	Record/Update **"Contact(s) for Case"** TouchPoint	Refer 5.3.2	Complete with your SPC	• To keep contact info updated in the system - which can also be printed.
	Record/Update **"Child Placement"** TouchPoint	Refer 5.3.3	Complete with your SPC	• To keep placement changes and information updated in the system which can also be printed.
	Record **"Case Documents"** TouchPoint	Refer 5.3.1	Complete with your SPC	• To upload case documents that are important to keep as part of the child's case file.
	Run **"Contacts for Case"** Report	Refer 5.3.4.1	Complete with your SPC	• To enable a printed list of your child's contacts.
	Run **"Notes for Court Report"**	Refer 5.3.4.2	Complete with your SPC	• To help in the preparation of a factual and objective CASA Court report of findings, observations, and recommendations.

ETO Help Desk (323) 859-2888 x6354
ETOHelp@casala.org