





Kinship Connections of Wyoming, Montana Kinship Navigator Program & Kinship Navigator Collaborative Family Needs Assessment

| To what extent are the | Does | Not At All | Seldom | Sometimes | Usually | Almost |
|---|--------------|-------------|----------|-----------|----------|--------------------|
| following resources adequate | Not Apply | Adequate | Adequate | Adequate | Adequate | Always Adequate |
| for you and your kin | Дрріу | | | | | Adequate |
| child(ren)? | | | | | | |
| | 0 | 1 | 2 | 3 | 4 | 5 |
| | Fina | ncial and l | _egal | | | |
| Access to public assistance (for | | | | | | |
| example, Medicaid, Temporary | | | | | | |
| Assistance for Needy Families | | | | | | |
| (TANF), Social Security) | | | | | | |
| 2. Money to buy necessities and pay bills | | | | | | |
| 3. Support from social services | | | | | | |
| and/or other government agencies | | | | | | |
| 4. Clothing to stay warm and clean | | | | | | |
| 5. Books, toys, and school supplies | | | | | | |
| 6. Legal assistance related to being | | | | | | |
| a kinship caregiver (for example, | | | | | | |
| adoption, legal custody, | | | | | | |
| guardianship) | | | | | | |
| 7. Legal assistance related to public | | | | | | |
| assistance (for example, Medicaid, | | | | | | |
| Temporary Assistance for Needy | | | | | | |
| Families (TANF), Social Security, other) | | | | | | |
| 8. Other legal assistance | | | | | | |
| | | Nutrition | | | | |
| 9. Enough food for 2 meals daily for | | | | | | |
| you and your kin child(ren) | | | | | | |
| 10. Access to fresh fruits and | | | | | | |
| vegetables | | | | | | |
| 11. Ability to cook healthy meals | | | | | | |
| | | | | | | |

| Housing | | | | | | |
|---|----------|----------|----------|------|--|--|
| 12. Safe, livable housing | | | | | | |
| 13. Indoor plumbing/water | | | | | | |
| 14. Heating and/or, if needed, air conditioning | | | | | | |
| 15. Lighting and electricity | | | | | | |
| 16. Ability to complete home repairs or improvements | | | | | | |
| 17. Ability to adapt my home for my kin child(ren) | | | | | | |
| 18. Telephone or access nearby to a phone | | | | | | |
| 19. Internet or access nearby to the Internet | | | | | | |
| 20. Furniture (for example, beds, cribs) | | | | | | |
| Careg | jiver Em | ployment | and Self | Care | | |
| 21. A job that will support my household | | | | | | |
| 22. Ability to expand my own education, skills & interests | | | | | | |
| 23. Ability to do things for myself | | | | | | |
| 24. Access to support groups or clubs | | | | | | |
| 25. Ability to do fun things with my kin child(ren) | | | | | | |
| 26. Opportunities to learn how to be a more effective caregiver who is acting as a parent | | | | | | |
| Transportation | | | | | | |
| 27. Ability to travel to places you need to go for yourself | | | | | | |
| 28. Ability to transport your kin child(ren) to places, including appointments | | | | | | |

| | ŀ | lealth C | are | | |
|---|-------|---------------|----------|--------------|---|
| 20 Madical care for yourself | | 1 | | | |
| 29. Medical care for yourself | | | | | |
| 30. Medical care for your kin child(ren) | | | | | |
| 31. Dental care for yourself | | | | | |
| 32. Dental care for your kin child(ren) | | | | | |
| 33. Professional mental health counseling for yourself | | | | | |
| 34. Professional mental health counseling for your kin child(ren) | | | | | |
| 35. Ability to plan for future health needs for yourself or your kin child(ren) | | | | | |
| | Child | dcare/Da | y Care | <u>.</u> | |
| 36. Management of the daily needs of your kin child(ren) at home | | | | | |
| 37. Babysitting for your kin child(ren) | | | | | |
| 38. Routine childcare/day care for your kin child(ren) | | | | | |
| 39. Full-time care for your kin child(ren) should something happen | | | | | |
| to me | Child | ∣ ren's Ed | lucation | | |
| 40. K to 12 school enrollment for | | 1 | | | T |
| your kin child(ren) | | | | | |
| 41. Early intervention and special education services for your kin child(ren) | | | | | |
| 42. Payment for special needs of your kin child(ren) | | | | | |
| 43. Vocational training services for your kin child(ren) | | | | | |
| 44. Future educational options for your kin child(ren) (e.g., college) | | | | | |
| 45. Ability to plan for a future job for your kin child(ren) | | | | | |
| 46. Other supports needed? (write in) | | 1 | | | |

Placement Stability and Permanency Measures

| Is your kin child(ren) still in your | home? | ☐ YES - If you answer yes to this question, skip question number 2 below | | | | |
|---|--|--|--------------------------------|--|--|--|
| | | □NO | | | | |
| 2. Why did your kin child(ren) leave your home? | | Returned to birth parent | | | | |
| | | ☐ Entered foster care | | | | |
| | | ☐ Moved to another kin caregiver | | | | |
| | | ☐ Age 18 and older and left home | | | | |
| | | ☐ Other, please specify: | | | | |
| | | | | | | |
| | | | | | | |
| Please rank your top three need) The top 3 needs show | | | . (1 = the most important | | | |
| , , | | <u> </u> | | | | |
| Finding and maintaining | Transportatio | n | Education/training for kinship | | | |
| housing | Primary medi | cal care or resources | caregivers | | | |
| Concrete goods, for example, | Dental care | | Legal services and advice | | | |
| furniture | Childcare/day | care | Other: | | | |
| Daily food and nutrition | Mental health counseling | | Other: | | | |
| Public assistance | Kinship care support groups /networkii | | | | | |
| School related supports | | | | | | |
| | | | | | | |