

## **FY2025 CSA Service Gap Survey: Planning Document**

Please use this guide to plan and track your CPMT's responses to the 2025 CSA Service Gap Survey before visiting SurveyMonkey to submit your response. This document is not submitted to the Office of Children's Services; it is only to be used to plan CPMT responses to the official survey via the SurveyMonkey link ([https://www.surveymonkey.com/r/CSA\\_ServiceGapFY25](https://www.surveymonkey.com/r/CSA_ServiceGapFY25)).

### **Critical Service Gaps**

Please identify **three (3) to five (5)** services most important to further develop in your community. Consider services that do not exist in your community and those that do not adequately meet your locality's needs due to constraints such as insufficient capacity, poor quality, or prohibitive costs.

(Check the relevant boxes)

#### **Residential Services**

- ☐ Short-term Diagnostic (A&D)
- ☐ Group Home
- ☐ Residential Treatment
- ☐ Sponsored Residential Home Services

#### **Foster Care Services**

- ☐ Family Foster Care Homes
- ☐ Therapeutic Foster Care Homes
- ☐ Independent Living Services

#### **Community-Based Behavioral Health Services**

- ☐ Applied Behavior Analysis
- ☐ Assessment
- ☐ Case Management
- ☐ Family Therapy
- ☐ Group Therapy
- ☐ Individual Therapy
- ☐ Intensive Care Coordination (ICC)
- ☐ Intensive In-Home
- ☐ Medication Management
- ☐ Therapeutic Day Treatment
- ☐ Trauma Focused/Informed Services

#### **Evidence-based Behavioral Health Services**

- ☐ Brief Strategic Therapy
- ☐ Cognitive Behavioral Therapy
- ☐ Family Check-Up
- ☐ Functional Family Therapy
- ☐ Home Builders
- ☐ Motivational Interviewing
- ☐ Multisystemic Therapy
- ☐ Parent-Child Interaction Therapy

#### **Educational Services**

- ☐ Private Day School
- ☐ Residential School
- ☐ School-based Mental Health Services

#### **Crisis Services**

- ☐ Crisis Intervention/Stabilization
- ☐ Acute Psychiatric Hospitalization

#### **Individual/Family Support Services**

- ☐ Child Mentoring
- ☐ Family Partnership Facilitation
- ☐ Family Support Partner
- ☐ Parent Coaching
- ☐ Respite
- ☐ Transportation

For each critical service gap selected, please answer the two questions:

Are there specific populations with gaps in (selected) services in your locality?

(Please choose all that apply)

- ☐ Autism
- ☐ Intellectual Disability/Developmental Disability
- ☐ Potentially Disrupting or Disrupted Foster Care Placements
- ☐ Potentially Disrupting or Disrupted Adoptions
- ☐ Sex Offending/Sexually Reactive Behaviors
- ☐ Youth with Multiple Mental Health Diagnoses
- ☐ Youth Involved with the Juvenile Justice System
- ☐ Substance Abuse
- ☐ No, there are not any specific populations
- ☐ Other (please specify)

Are there specific age groups with gaps in (selected) services in your locality?

(Please choose all that apply)

- ☐ Pre-School Age (0-5)
- ☐ Elementary School Age (6-10)
- ☐ Middle School Age (11-13)
- ☐ High School Age (14-18)
- ☐ Transition Age (19-21)
- ☐ No, there are not any specific age groups

Document your responses below (to reference while filling out the survey) once your CPMT has finalized them:

<b>Selected Critical Service Gap</b> (Which services were selected from the list above?)	<b>Affected Population Groups</b> (Which populations were identified as affected?)	<b>Affected Age Groups</b> (Which age groups were identified as affected?)
<i>Example: Applied Behavior Analysis</i>	<i>Example: Autism, Substance Abuse</i>	<i>Example: No, there are not any specific age groups</i>

## **Barriers**

On a 5-point scale, with one (1) being 'Not At All' and five (5) being 'A Great Deal,' please indicate the impact the following barriers have had on your community's ability to develop the services you have identified. Also, please add specific comments under each barrier, as needed.

<b>Barrier</b>	<b>Rating (1 through 5)</b>	<b>Comments (as needed)</b>
Need for greater collaboration and consensus		
Lack of funding		
Lack of transportation		
Provider availability		
Need for more information and data		
Other (as needed)		

## **Changes to Community-Based Services Availability**

Has your locality initiated actions over the past year to address the perceived service barriers (from the list in the table above)?

- ☐ Yes
- ☐ No

(if yes):

What are those actions? Please provide comments below: