



## Launching Incredible Years Programs in Your Organization\*

(\*The term “organization” will be used to refer to mental health agency, school, child care center or hospital.)  
Webster-Stratton, SPR June 2003)

We are happy to help you implement one of the Incredible Years (IY) Parents, Teachers, or Children’s Training Program in your organization. In order to be sure you understand what is involved in delivering these programs with high quality and integrity, we have developed a questionnaire checklist for you to determine your agency’s readiness for using this program.

*The Incredible Years programs have been shown in research to strengthen parenting skills and teacher classroom management skills as well as increasing young children’s social competence and reducing behavior problems. It has been researched with teachers and parents of children ages 2-8 years.*

*Before completing this questionnaire, it is recommended that you review the Incredible Years Website: [WWW.Incredibleyears.com](http://WWW.Incredibleyears.com). This website provides information about the program goals, training requirements, leader certification, program costs, evaluation and assessment tools.*

### “Get Ready ...”

#### Step One: Assessing the need and target population



*Assessing whether your school or community perceives a need for one of these programs is a key first step to deciding what program you want to deliver. For example, schools may perceive a need for a social skills curriculum but not a parent program, or mental health agencies may wish to focus on parent education rather than teacher training. Your organization might want to target specific children and families with diagnosed problems or to provide broader prevention programs to non-diagnosed families or families at risk due to poverty or some other factor.*

1. Have you assessed the need for the Incredible Years Parent, Teacher, or Child Training programs in your community?

\_\_\_\_\_yes \_\_\_\_\_no

How was this need determined? (e.g., risk factor or needs assessment)

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2. Whom will you target?

\_\_\_\_\_ parents

\_\_\_\_\_ children

\_\_\_\_\_ teachers

Why? \_\_\_\_\_

\_\_\_\_\_

3. What age children will you target for the programs?

\_\_\_ a. 2–4 years of age

\_\_\_ b. 5–7 years of age

\_\_\_ c. 8–10 years of age

\_\_\_ d. all of the above

Why? \_\_\_\_\_

\_\_\_\_\_

4. What population will your programs target?

\_\_\_\_\_ universal prevention programs (to all parents, children or teachers)

\_\_\_\_\_ selective prevention program (to high-risk populations e.g., Head Start)

\_\_\_\_\_ indicated prevention program (to individuals who exhibit symptoms, e.g., children with aggressive behavior, depressed parents, etc.)

\_\_\_\_\_ treatment (to diagnosed children or parents or teachers working with children with diagnoses)

Why? \_\_\_\_\_

\_\_\_\_\_



- c. Parent groups that are led by group leaders who use a collaborative approach and actively involve parents in goal setting and contributing solutions are effective learning methods.

Strongly disagree

1

2

3

4

Strongly agree

5

- d. Discipline that involves Time-Out or a Calm-Down strategy is an effective approach for aggressive behaviors.

Strongly disagree

1

2

3

4

Strongly agree

5

### **Step Three: Assessing the organization's commitment and human resources to deliver the Incredible Years program.**



*Individual teachers and clinicians may perceive a definite need to offer this service, but without administrative support, it is more difficult to successfully implement these programs. Likewise, administrators may want to deliver these programs, but they will only succeed if the teachers and clinicians are motivated and interested in learning and delivering the programs. Consequently, it is important that all parties work together to understand what will be required to initiate any of these programs.*

9. What kind of organization will deliver this program?
- a. Mental health agency
  - b. Public elementary school
  - c. Private elementary school
  - d. Preschool or Head Start center
  - e. Day care center
  - f. Health maintenance organization/hospital
  - g. University
  - h. Pediatrician or doctor's office
  - i. Other (please describe): \_\_\_\_\_
10. How many children does the organization serve?
- Ages 2-4 years
  - Ages 5-8 years
11. How would you describe the community that your organization serves?
- a. Very rural
  - b. Rural
  - c. Somewhat urban
  - d. Urban
  - e. Very Urban

Please put the percentage of different racial groups you serve:

\_\_\_\_ % f. African American

\_\_\_\_ % g. Hispanic

\_\_\_\_ % h. Asian

\_\_\_\_ % i. Caucasian

\_\_\_\_ % j. Other \_\_\_\_\_

In what different languages do you offer services?

\_\_\_\_\_

12. How many mental health professionals or teachers are there in your organization? \_\_\_\_\_

13. How are mental health services financed in your organization? (*Check all that apply.*)

\_\_ a. grants

\_\_ b. fee for service

\_\_ c. insurance

\_\_ d. state

\_\_ e. federal

\_\_ f. other (please describe) \_\_\_\_\_

14. How did you hear about the IY programs?

\_\_\_\_\_  
\_\_\_\_\_

15. How supportive and motivated is your supervisor in the organization to deliver this program?  
(*Circle one.*)

Not at all

1

Somewhat

2

3

Helpful

4

Extremely

5

16. Have you met with the administrative management of the organization to present the Incredible Years program goals, research, and delivery methods in order to assess administrative motivation and support for delivering this program?

\_\_\_\_\_yes \_\_\_\_\_no

Please describe the names and positions of those you talked to.

\_\_\_\_\_

17. After meeting with the management of your organization, what percentage of the administrators are interested in having the program delivered in their organization?

\_\_\_\_\_%

18. If the administration was not enthusiastic, what were the barriers or difficulties proposed? If there was a decision to adopt, how will these problems be addressed?

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19. Have you met with the clinicians and/or teachers in the organization to present the Incredible Years program goals and therapeutic methods in order to assess their motivation to deliver the program in their organization?

\_\_\_\_\_yes \_\_\_\_\_no

20. After meeting with clinicians and/or teachers, what percentage of them would like to receive training to deliver the program?

\_\_\_\_\_%

21. Is there someone in your organization that has already been trained in one of these programs? (*Check all that apply*)

\_\_\_ Parent Program

\_\_\_ Teacher Classroom Management Program

\_\_\_ Child Small Group Treatment Program (Dinosaur School)

\_\_\_ Classroom Dinosaur Emotion, Social Skills and Problem Solving Curriculum

Are they certified?

\_\_\_\_\_yes \_\_\_\_\_no

Please identify who they are.

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22. Which of the following best characterizes how decisions are made in your organization?

(*Check all that apply.*)

\_\_\_ a. One person generally makes decisions.

\_\_\_ b. A committee *not representing* all employees from top to bottom makes decisions.

\_\_\_ c. A committee *representing* all employees from top to bottom makes decisions.

\_\_\_ d. Each employee from top to bottom has input that influences decision-making.

\_\_\_ e. Each employee from top to bottom has decision-making authority.

23. What percentage of staff turnover does this organization experience each year?  
 \_\_\_\_%
24. If this organization is a school, what percentage of turnover does the school experience each year?  
 \_\_\_\_% teacher turnover  
 \_\_\_\_% child turnover
25. If this is a mental health agency, what is the average number of sessions that a family or child attends (children ages 2-8 years) ?  
 \_\_\_\_ # of sessions  
 \_\_\_\_ length of time of individual session
26. Circle the statements that most closely characterize the organization.

**Statement A**

The organization offers and adheres to one main mental health program for families.

**Statement B**

The organization offers and adheres to many diverse forms of mental health programs for families.

compared to...

*(Circle one below.)*

Completely <u>with A</u>	Mostly <u>with A</u>	Somewhat more with A <u>than with B</u>	Equal amount <u>with A and B</u>	Somewhat more with B <u>than with A</u>	Mostly <u>with B</u>	Completely <u>with B</u>
1	2	3	4	5	6	7

27. Is the organization team knowledgeable about the IY core components, order, number of sessions, theoretical framework and research for the IY programs. (see web site for this information).  
 \_\_\_\_ yes \_\_\_\_ no
28. Is the organization committed to this program being offered to participants in its entirety?  
 \_\_\_\_yes \_\_\_\_no



*Sometimes agencies decide to shorten programs or cut out components of programs either due to budget limitations or time constraints. If this happens, the effects of the program will be reduced significantly. Our research has shown a relationship between the dosage or number of sessions provided and the amount of positive change in behavior. Consequently we have arrived at a minimum number of sessions required for each of the programs.*

In the list below you will see how much time it takes to deliver each of these programs. For the program you are intending to deliver, check your understanding and commitment to offering the full program components.

- \_\_\_\_\_ At a minimum, the organization is committed to offering the prevention parent program for 28 hours. (14 weeks, 2 hours weekly)
- \_\_\_\_\_ At a minimum the organization is committed to offering the treatment parent program (for diagnosed children) for 36-40 hours. (18-20 weeks, 2 hours weekly)
- \_\_\_\_\_ At a minimum the organization is committed to offering the child treatment program for 36 hours (18 weeks, 2 hours weekly)
- \_\_\_\_\_ At a minimum the organization is committed to offering the child classroom Dina program for 32-40 lessons (offered twice a week for 45 minutes).
- \_\_\_\_\_ At a minimum the organization is committed to offering the teacher classroom management program for 42 hours (6 full-day workshops once a month or broken into smaller weekly 2-to 3-hour meetings).



*In addition to the time spent actually delivering the program to parents and children, there is additional time needed on the part of group leaders and teachers to prepare weekly lessons or sessions (including handouts, reviewing videotapes, food preparation), call parents between sessions, and receive regular supervision. In the first year of offering these curricula, extra group leader or teacher time needs to be calculated for self-study. For example, in the first year of offering parent groups, five hours of therapist time should be calculated for a two-hour parent group. This covers prep time, weekly supervision, and weekly calls to parents.*

29. Is the organization committed to the preparation and supervision time commitment needed by therapists, group leaders, and teachers to deliver these programs?  
 \_\_ yes \_\_ no



*It is recommended that organizations carefully select individuals to offer these programs based on their interpersonal skills, background education, experience, respect from peers and motivation to do the program. Individuals introducing innovation into an organization must be prepared and excited about being a change agent, which involves the characteristics of being flexible, enthusiastic, supportive to others willing to take the time it takes to learn a new program, and committed to quality.*

30. Who will deliver this program to teachers, children, or parents?

- \_\_\_\_\_ teachers
- \_\_\_\_\_ mental health workers
- \_\_\_\_\_ health care professionals
- \_\_\_\_\_ others

31. What minimal educational background will be required for those who deliver this program?

- \_\_\_\_\_ teaching certificate (AA degree)

- baccalaureate degree
- masters in psychology, nursing, social work, or education
- Ph.D. in counseling or mental health field
- other

32. What professional background will be required when selecting individuals to deliver this program? *(Check all that apply.)*
- a. Special needs education (special education)
  - b. Clinical Psychologist
  - c. Social work
  - d. Child educational therapist
  - e. Nurse
  - f. Teacher
  - g. School Psychologist/Counselor
  - h. Psychiatrist
  - i. Teacher assistant
  - j. Other (specify) \_\_\_\_\_



*Regardless of their educational background, we have found that the best group leaders are those who are flexible and comfortable with a collaborative teaching style. In addition, knowledge of early childhood development and social learning theory is extremely helpful.*

33. Have specific individuals been selected receive training in these programs?  
 yes  no

What qualities did the agency use to select these individuals? Please describe.

\_\_\_\_\_

34. Have these individuals been told about the programs and asked about their interest and motivation to be trained in any of these programs?  
 yes  no

Please explain.

\_\_\_\_\_

35. Is the organization thinking of replacing or integrating an existing program with the IY program?  
 yes  no

If so, what is being offered now, and why is the organization wanting to replace it?

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36. Given the number of children or families you are targeting in the first year, how many teachers or parent group leaders will you train?

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**Step Four: Assessing the organization’s financial resources and capacity to deliver the program.**



*Most of the costs of delivering these programs will occur in the first year and will include initial training, ongoing supervision and technical support, and materials needed (e.g. videos and manuals). Eventually, delivering the program will be cost-effective in terms of the numbers of children impacted. Ongoing costs after the first year include group leader salaries, daycare, food, and consultation.*

37. What is your organization spending now on mental health services or other prevention programs (e.g., social emotional skills building, parent involvement) for families and children ages 2-8 years?

\$ \_\_\_\_\_ per year

38. Will you need to find new funds to deliver this service?

\_\_ yes \_\_ no

39. How much do you anticipate that it would cost to deliver this IY program in your agency? (budget for materials, leaders’ salaries, food, day care, transportation, video equipment) (Program costs will depend on the number of families or children served and the programs chosen).

Number of parents served \_\_\_\_\_

Number of children served \_\_\_\_\_

Number of teachers trained \_\_\_\_\_

What is the organization's expected budget for each of the following program costs?

Budgeted amount:

- \$\_\_\_\_\_ group leader manuals and DVDs
- \$\_\_\_\_\_ parent or teacher books (1 per participant)
- \$\_\_\_\_\_ food for parents, children (for evening groups)
- \$\_\_\_\_\_ day care, transportation (for parent groups)
- \$\_\_\_\_\_ video equipment
- \$\_\_\_\_\_ substitutes for teachers on training days

40. Is the organization committed to costs and time involved in providing initial training to those group leaders who deliver this program? (training provided in Seattle or on-site) See website.

\_\_\_\_\_yes \_\_\_\_\_no



*Workshops for training group leaders are held in Seattle on a regular basis at a rate of approximately \$150 per day plus airfare and hotel costs. Sites may request on-site training if they have a large enough number of people needing training. Training workshops register no more than 25 per training to allow for discussion, practice and individual needs to be addressed. See website for off-site fee. A limited number of trainers are available so it is important to schedule training 6 to 9 months in advance.*

Number of leaders to be trained\_\_\_\_\_

Budgeted amount:

- \$\_\_\_\_\_ 3-day basic training for leaders of basic parent program
- \$\_\_\_\_\_ 3-day basic training for child treatment program
- \$\_\_\_\_\_ 3-day basic training for classroom Dina program
- \$\_\_\_\_\_ 3-day basic training for teacher classroom management program

Anticipated date for leader training: \_\_\_\_\_

Anticipated intervention start date: \_\_\_\_\_

41. Is the organization committed to costs involved in providing ongoing technical support to the group leaders who deliver this program? See website.

\_\_\_\_\_yes \_\_\_\_\_no



*We recommend after the initial training workshop that sites have regular phone contact with the trainer (1-2 times per month) as well as a follow-up consultancy workshop to review DVDs of their sessions. We also recommend that group leaders have support groups within the organization where they can meet for peer review of DVDs and sharing of group process. This level of supervision and internal support will be especially helpful when group leaders are conducting their first two series of groups. Fee for consultation is on website. Budget for 2 hours a month phone contact and a minimum of one trainer consultation visit in the first year.*

Budgeted amount:

\$\_\_\_\_\_ DVD supervision of group sessions by certified trainer  
(1-2 per training series)

\$\_\_\_\_\_ consultancy workshop (trainer comes on site to review tapes or DVDs of those who have received basic training) in first year after basic training

\$\_\_\_\_\_ telephone consultation monthly with certified trainer when groups start

\$\_\_\_\_\_ peer review of sessions (weekly 1-2 hours for staff doing these programs)

42. What sources of funding have been garnered to deliver these programs?  
*Please describe.* How much still needs to be raised?

\_\_\_\_\_

43. How long will this funding last?

\_\_\_\_\_

### “Get Set”

**Step Five: What organizational capacity is there for marketing and recruiting families, working with communities, and providing space and support for parent groups, day care, food, and transportation?**

**If you are not doing parent groups, skip the next question.**

44. Have you done parent groups before?  
\_\_\_\_\_yes \_\_\_\_\_no

If so, how many sessions did your group last? \_\_\_\_\_ sessions

How much attrition did you have?  
\_\_\_\_\_%

What strategies for parent involvement have worked in the past?

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45. What are the plans for active targeted outreach to recruit families?  
*Please describe.*

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What community agencies and professionals will you work with to market this program?  
*Please describe.*

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46. Will you provide your clinicians with a support staff person to help with logistical details related to program delivery? (e.g., food, materials preparation)  
\_\_\_\_\_yes \_\_\_\_\_no

47. For parent groups, will you have the space and resources to provide day care?  
\_\_\_\_\_yes \_\_\_\_\_no

48. For parent groups, will you provide dinners and transportation? Who will prepare the dinners?  
\_\_\_\_\_yes \_\_\_\_\_no

“Go”

**Step Six: Once training has been delivered, what organizational capacity is there for building a supportive infrastructure, providing external technical support, ongoing monitoring, fidelity checks, and program evaluation?**

49. What plans have been made to phase in programs in a realistic fashion? What programs will you start with?

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50. Please provide a yearly calendar of your time line for the first 3 years. Include time for planning, recruitment, initial training, pilot group, ongoing technical support, evaluation, and expected certification achieved.

51. Who within the organization has been selected to coordinate with the trainer about group leader questions?

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*There are protocol checklists for every session or lesson delivered which include content to be covered, DVD vignettes, key role plays, and activities. In addition there are process checklists which assess interpersonal group process and/or classroom management strategies. Also teacher and parent evaluations are provided for each session as well as a final summative evaluation. These forms are important for monitoring and assuring the integrity of the delivery of the programs.*

52. Who within the organization will review program fidelity checklists and process checklists as programs are being delivered?

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*Ongoing peer review will be extremely helpful in facilitating the quality of the delivery of these programs. It will not only increase the support for those beginning something new but will enhance the sharing of new ideas and an agency wide philosophy of caring and commitment to empirically validated interventions.*

53. Will the organization facilitate ongoing support groups and peer review for the group leaders delivering these programs on a regular basis?

\_\_\_\_\_yes \_\_\_\_\_no

54. Please describe how often this will happen?

\_\_\_ weekly \_\_\_ bimonthly \_\_\_ monthly

55. Does the agency understand the importance of group leaders obtaining certification in the delivery of these programs and have plans for how this can be accomplished?  
 \_\_\_\_\_yes \_\_\_\_\_no
56. Will there be support and incentives for those who receive this certification?  
 \_\_\_\_\_yes \_\_\_\_\_no

**Step Seven: What plans does the organization have for program evaluation?**



*Ongoing weekly evaluation of parent sessions and final program evaluations (by parents and/or teachers) is considered part of the process of delivering the program with integrity. Feedback from parents and teachers leads to continual improvement of the program. On the website, you will find practical and cost-effective measures you can use.*

**These are the areas you should address in your evaluation:**

57. Please describe what measures you will use to evaluate the following:

Parenting Practices \_\_\_\_\_

Child Behaviors \_\_\_\_\_

Teacher Classroom Management Skills \_\_\_\_\_

Consumer Satisfaction \_\_\_\_\_

58. Who within the organization will review program evaluations and give feedback to group leaders/teachers?

\_\_\_\_\_

**Step Eight: What plans does the organization have in place for maintenance of the programs over the long term?**



*While grant money may be obtained to seed new programs, it is important to begin the process of advocating for long term funding to sustain programs after the grants are completed. Involving community key stakeholders in this process at the beginning will enhance the likelihood of this happening.*

59. Have you developed an advisory board?  
 \_\_\_\_\_yes \_\_\_\_\_no

Who is on this board? (Be sure the board represents community members, parents, organization administrators, and clinicians or teachers.)

\_\_\_\_\_

Organization name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

**For organizations seeking grant funding:**

60. Are you requesting a letter of support for a grant proposal?  
\_\_\_\_\_yes \_\_\_\_\_no

If so, please provide information about the funding agency and the type of grant you are applying for.

\_\_\_\_\_  
\_\_\_\_\_

Where should the letter of support be sent?

\_\_\_\_\_  
\_\_\_\_\_

What is the funding cycle for this grant? \_\_\_\_\_

61. Are you implementing other empirically validated programs in your organization?  
\_\_\_\_\_yes \_\_\_\_\_no

If so, which ones?

\_\_\_\_\_

Agency Readiness Questionnaire  
Incredible Years Programs  
1411 8<sup>th</sup> Avenue West  
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