

FAMILY SCREENING AND OBSERVATION TOOLS

Objective:

To help front-line family workers conduct a quick screen of potential high-risk circumstances in family dynamics and home environments

Intended Use:

These tools were designed to be used during a first home visit to a family recently enrolled in an early childhood development program. They are easily applicable to other programs with a home visiting component.

Audience:

- Family service supervisors and family service staff

Outcome:

- Workers are able to make an early assessment of high-risk circumstances affecting families.
- Agencies can begin to identify support or interventions to address high-risk circumstances early in their relationship with a family, extending the potential intensity and duration of their support.

Context:

Agencies often have only a limited time to work with families. These time frames are particularly challenging when a worker is trying to address high-risk circumstances, such as alcohol and drug abuse, family violence or depression. Early screening and observation tools, when administered respectfully, can be surprisingly effective at providing opportunities for sharing of sensitive information. They also provide workers, who may be uncomfortable asking about these issues, concrete tools for guiding conversations.

The following screening and observation tools were developed by the University of New Mexico CASAA program in collaboration with Laguna Pueblo Department of Education's Division of Early Childhood. The tools were designed to assist family advocates do a better job of assessing high-risk circumstances during their early home visits. By providing a simple set of concrete questions and observation criteria, the tools helped advocates overcome their own reluctance to raising sensitive issues, even when evidence was directly in front of them. The tools also provided a vehicle for making earlier assessments of families joining the early childhood program.

The early screening information can help lay the foundation for a more formal assessment later. More important, it provides a way to engage the family in discussion about high-risk behaviors that should receive attention immediately.

**POINTERS:**

- If you think there are risks that should get immediate attention, ask the family if they'd like help now
- Be respectful – ask families if they are ready to talk about issues, and honor their answers
- Plant a seed if a family isn't ready yet – you can return to it later

The Process

The Initial Screening Interview is designed to be conducted collaboratively with a family. It is helpful for workers to let families know that the tool's purpose is to help them understand the family's current life situation, so they can see what's most pressing for them. Workers should take only brief notes during the screening, filling in additional information when they return to the office.

After the interview and home visit, the worker should fill out the forms and identify further steps. Based on the program and the information from the families, the worker will respond as practices and procedures indicate. For example, if the family indicates that there are problems they want to deal with right away, the worker can make a referral to a provider, possibly offering to accompany the family to the first visit to facilitate the connection.

If there are problems but the family doesn't want to do anything about them, the worker can involve the supervisor or program team in the next steps to engage the family, and strategies to help move them forward. If there is risk of danger, the worker should also inform the proper authorities.

The Observation Tool should be reviewed before a home visit is made, in order to familiarize oneself with its contents. Workers should fill it out after a home visit is completed. If the initial visit does not provide an opportunity to see family members interacting with one another, these assessments should be reserved until a later visit.

FAMILY ADVOCATE INITIAL SCREENING INTERVIEW

DATE: _____ INTERVIEWER: _____

NAME OF CHILD: _____ CLASSROOM: _____

PERSON INTERVIEWED: _____

RELATIONSHIP TO CHILD: _____

On a scale of 1 to 10, circle the number for each part of your life that best indicates the degree of happiness that you feel today.

	Completely Unhappy					Completely Happy				
Social Life	1	2	3	4	5	6	7	8	9	10
Cultural Life	1	2	3	4	5	6	7	8	9	10
Religious or Spiritual Life	1	2	3	4	5	6	7	8	9	10
Family Health	1	2	3	4	5	6	7	8	9	10
General Happiness	1	2	3	4	5	6	7	8	9	10

1. How often are books read to your children?
2. How many times a week does your family sit down to eat a meal together?
3. During the last year, have you had a feeling of guilt or remorse after drinking?
4. How and where do you get your medical needs met?
5. Have you ever felt threatened by or afraid of any family member?
6. During the last year, have you lost friends, girlfriends or boyfriends, because of drinking?
7. During the last year, has a friend or family member ever told you about things you said or did while you were drinking that you could not remember?
8. Do you sometimes take a drink in the morning when you first get up?
9. Have you lost interest in things you used to enjoy?
10. Do you have difficulty falling or staying asleep?
11. Have you had any thoughts about hurting or killing yourself?
12. During the last year, have you failed to do what was normally expected of you because of drinking?
13. How do you protect your child(ren) from abuse?
14. How many hours a day is your TV/VCR/DVD in use?
15. All families disagree and have conflicts. How do you and your family talk to each other when one of you is upset?
16. When you're out running errands, do you have someone to help watch your child(ren)?
17. What percent of time does someone else care for your child(ren)?
18. Have the children or child been present during threatening or violent arguments?

FAMILY ADVOCATE OBSERVATION TOOL

NAME : _____ HOME LOCATION: _____

PERSON INTERVIEWED: _____

RELATIONSHIP TO CHILD: _____

INTERVIEWER: _____ DATE: _____

1. Is housing adequate? _____

2. Is clothing and hygiene adequate? _____

3. Are the children adequately supervised? _____

4. Does the parent look tired, sleepy, coherent, attentive? _____

5. Does person being interviewed display appropriate affect? _____

Do others in household display appropriate affect? _____

6. Does family converse easily with child(ren)? _____

7. Do parents show affection and positive interaction? _____

What other parenting behaviors were observed? _____

8. Is there evidence of reading material in the home? _____

9. Is indoor/outdoor play environment safe? _____

10. Are appropriate toys available for the children? _____

11. Is the home sanitary? _____

12. Is there any evidence of drug or alcohol use? _____

Adapted from Laguna Pueblo Department of Education, Division of Early Childhood

