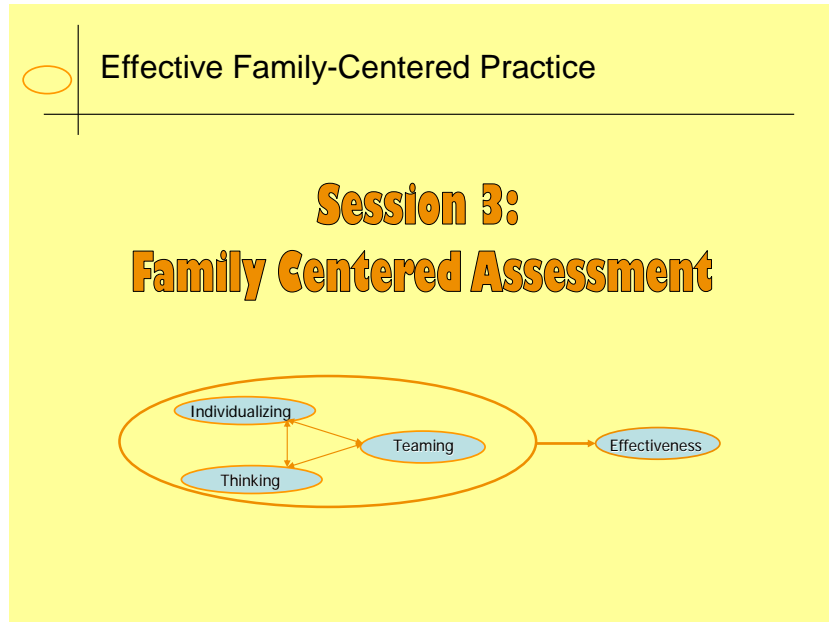


SESSION 3: FAMILY CENTERED ASSESSMENT

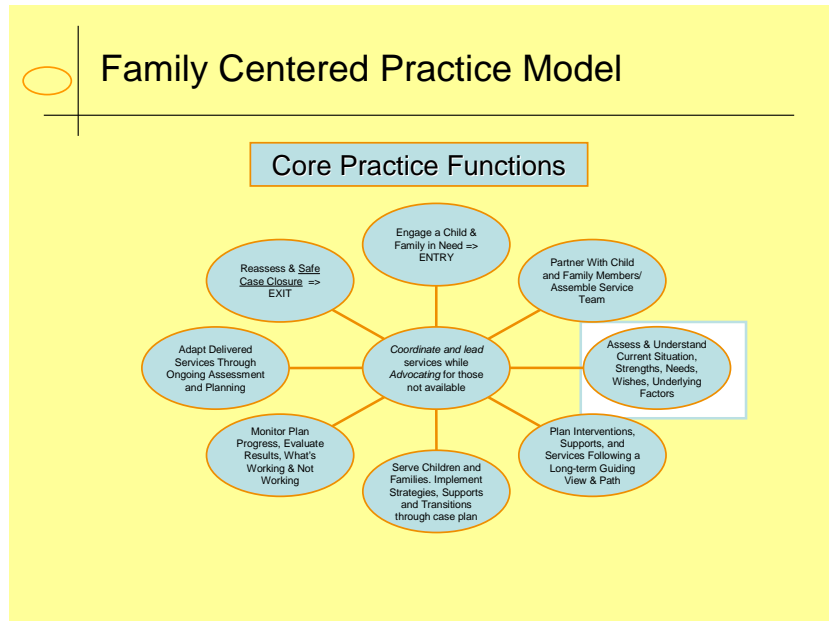
SLIDE 3-1: SESSION TITLE SLIDE



Summarize:

- This session will focus on the assessment process, particularly at the beginning of a case.
- In assessment, leaders use all three strengths of our casework effectiveness model:
 - **Individualizing** – Adapting the assessment’s questions and how we ask them to the characteristics of the family and the specifics of the report.
 - **Thinking** – connecting the dots for this family to understand how the risks, protective factors, strengths, and needs interrelate so that an effective plan can be developed.
 - **Teaming** – developing the partnership with the family so there is an open exchange of information and they become increasingly involved in the intervention.

SLIDE 3-2: FAMILY CENTERED PRACTICE MODEL



Say:
Here's where we are in our practice model . . . the child and family assessment.

TRANSITION

To set the context for this session, let's discuss some family considerations regarding assessment and how they impact your investigation or casework.

ACTIVITY 3-1: Assessment Considerations

TIME: MINUTES

DIRECTIONS:

1. Conduct a whole group discussion, starting with this question:

What family or individual factors, conditions, etc. increase the likelihood of abuse or neglect?

2. Get a variety of responses – write them on the flipchart.
3. Follow-up with a questions like:

Which of these factors are family members most likely to reveal and/or admit to first? Which will they tend to keep hidden?

(Continued on next page.)



Flipchart

4. Follow-up with a question like:

What do we need to do to get to the truth – the deeper, more hidden factors – and to establish a working partnership with the family?

5. Get some responses. Conclude with these implications:

- We need to have what are often difficult conversations with people so they will share what is often considered to be family secrets; the family centered approach helps to create the openness and support necessary for these conversations.
- We need a conceptual framework for maltreatments and why they occur to guide the selection and sequencing of assessment questions and to help with interpretation of the results.
- We need to apply critical thinking throughout the assessment to make appropriate decisions regarding information gathering and interpretation.
- That’s why, in assessment, our three strengths – individualizing, critical thinking, and teaming – are very integrated.

TRANSITION

OK, we’ll address those kinds of things in this session on family centered assessments.

SLIDE 3-3: OBJECTIVES



Session Objectives

- Use base assessment tools (family story, incident chain, exceptions, strengths lists, miracle questions, etc.) to encourage family members to share family information.
- Synthesize the “story behind the story” to identify the maltreatment “drivers” and family strengths/protective factors.

Summarize the objectives.

Ask:

You've received plenty of cases from a CPI or another casemanager or you've been a supervisor reviewing cases. What do you think are the common performance problems regarding assessments? What problems with assessments have you seen?

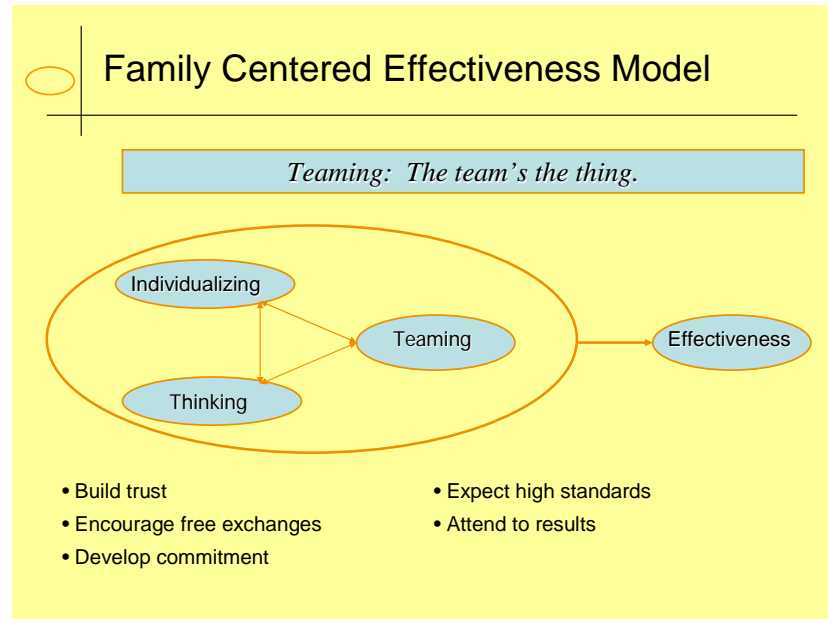
Conduct a brief discussion. Here are some responses that should have been mentioned. If not, add these to the participants' responses:

- Miss important information – the CPI/worker did not inquire about issues despite evidence warranting additional exploration. Didn't ask the right questions – and that leaves you asking questions about what really happened.
- Don't gather all information on the important "dots." .
- Gather incorrect information.
- Don't connect the dots – don't draw good conclusions.
- Don't identify strengths that can serve as "building blocks" for the intervention.
- Don't react on a personal level to sad/tragic elements of the family story.
- Can become "form-driven" by just seeking answers to fill in the assessment form rather than really trying to understand what is going on with the family, their strengths, coping strategies, etc.

TRANSITION

Our goal for this session is to enable you to avoid those performance problems, at least from a skills and knowledge level. We'll give you the tools to avoid them.

SLIDE 3-4: TEAMING



Summarize:

- But first, I want to remind you of the importance of continuing the teaming effort with the family during the assessment.
- The following activity brings this point home to us.

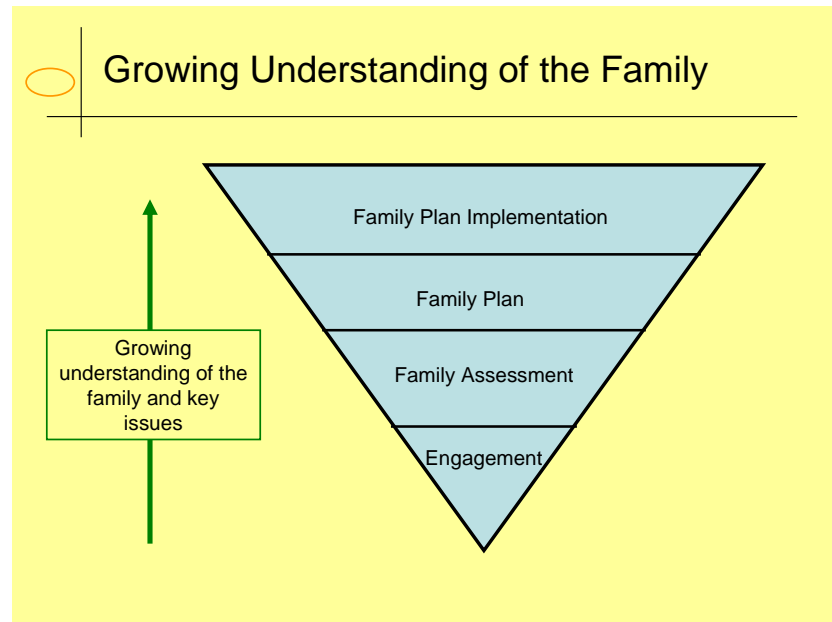
ACTIVITY 3-2: The Power of a Story

TIME: 10 MINUTES

DIRECTIONS:

1. Tell the participants to take a few minutes to think back over the major events in their lives . . . the things that made them the person they are today.
2. Say that those events weave the core story of their lives.
3. Ask for a volunteer to share their story with the group. (As trainer, you may choose to volunteer to tell your story first.) The story can focus on one event or a couple of events.
4. Next, is the important part of the activity: processing the story with the volunteer. Ask them questions like:
 - What did it feel like to share personal information with a group, many of whom are strangers?
 - How did you pick the events to describe? Were there some you didn't say because they were too personal to you?

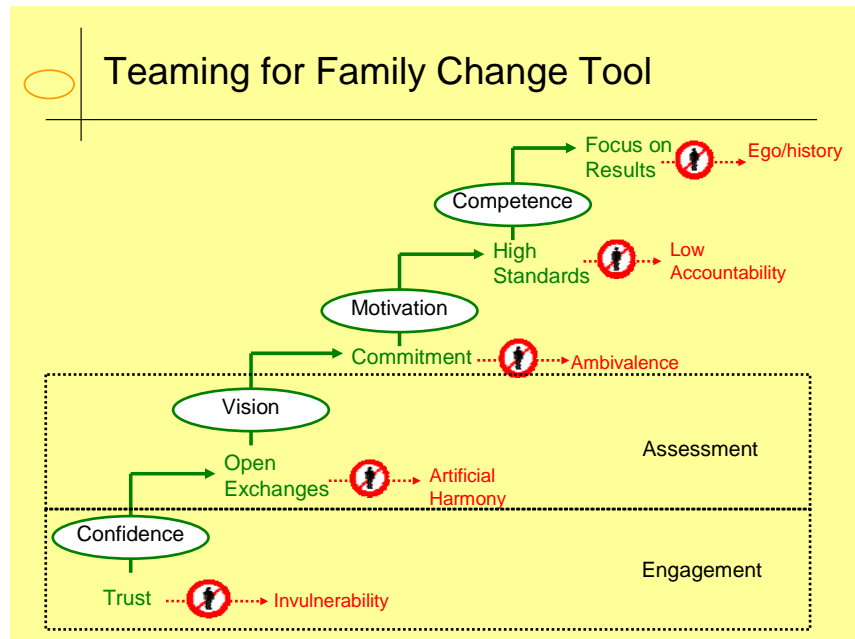
**SLIDE 3-5: GROWING
UNDERSTANDING**



Present:

- It's natural for us to reveal personal information gradually. We want to feel fairly certain that the person to whom we reveal the information won't blab our secrets to others or won't think less of us.
- Our confidence in the other person, if it develops at all, will develop over time with shared experiences.
- This slide illustrates the process as applied to investigations and casework.
- Initially, our families may not want to share personal information because:
 - They don't want to be looked down upon
 - It's painful to talk about
 - It goes against their cultural values
 - They may be revealing criminal behavior
- Over time, in moving through the case progression, if confidence in the partnership grows, more personal information about the family will be shared and discussed.
- Of course, we never need to know all of a person's personal thoughts – we just need to know what's important to know to be helpful for the family.
- When we say assessment never ends, this is what we are talking about. And, when we say engagement never ends, this is what we are talking about. We're continually attending to the relationship, the partnership, while getting the work of casework done.
- That's where our teaming strength comes into play.

SLIDE 3-6: TEAMING FOR FAMILY CHANGE



Present:

- As you know from Workshop 1 and this workshop, a key tenet of family centered practice is the value of a mutually beneficial partnership between the PI/worker and the family.
- In the Engagement session, we introduced this teaming process for family change and emphasized the first step, building trust.
- In assessment, while trustbuilding continues, our family teaming intent expands to include the safe and open exchange of ideas.

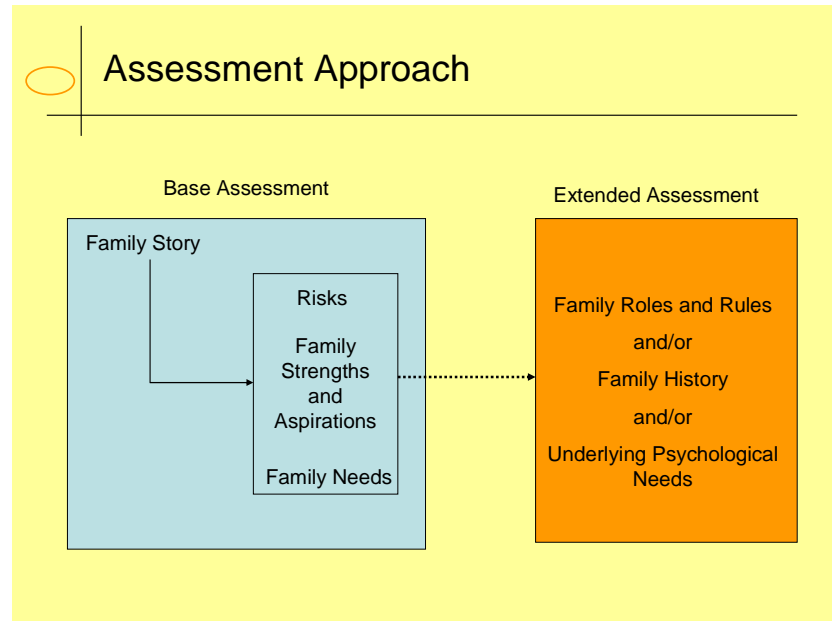
TRANSITION

In this session, we'll introduce a number of family centered assessment tools designed to make it easier for you to get the information you need quickly while attending to the interpersonal part of the change partnership. Using the tools, the assessment becomes much more conversational which tends to involve the family – and make it easier for you to interact with them, thereby making it more natural to show respect, empathy, and genuineness.

Another benefit of the tools are they give you a mindset of what to be assessing as you talk with the family – whether you use the actual tools or not. They encourage you to be thorough in assessing for the story behind the story.

Think of these tools, as with the engagement tools, as tools in your toolkit. You may not need them all for a particular family . . . your challenge is to pick the right tools for the job.

**SLIDE 3-7: ASSESSMENT
APPROACH**



Say:

- As we mentioned in the opening discussion of the session, it is helpful to have an assessment approach to guide the interpretation of why the maltreatment may occur. This approach can also help to generate relevant questions to ask the family members.
- We'll be using the approach you see here.
- You conduct the base assessment to get a general picture of the family. This level of assessment will give you sufficient information to “connect the dots” and be able to plan an appropriate intervention with many, if not most, families.
- However, there are times when a more in-depth or extended assessment is necessary to get to the true maltreatment “drivers” – and to get a better sense of the family’s strengths and resiliencies. You’ll usually pick up clues that the extended assessment is necessary while doing the base assessment – hearing about various family rules and roles, for instance, or toxic events from the parent’s childhood.

(Continued on next page.)

- However, the extended assessment, or a Comprehensive Behavioral Assessment, is beyond the scope of this training. We'll be presenting family centered practice tools for the base assessment.

TRAINER NOTE

An extended assessment may include “professional” assessments, such as: psychological or psychiatric evaluations, developmental or medical screenings, cognitive testing, substance abuse screens, etc. as the point of their use is the same – to gain a deeper understanding, and subsequently more aligned and appropriate planning / decision-making.

- Our intent is not to train you how to get all the information you need for an assessment, but how to get information in a more family centered way, and that implies using what may be some new tools.
- The tools are offered as suggestions – you are not required to use them. They do, however, make it easier to actively involve the family in the assessment – and in the overall change process. That has benefits for the quality of the information you get and for building the partnership with the family.
- In other words, by using the tools effectively with the family, you are more likely to get to the point where the family feels safe to reveal the deeper, more personal information that may be necessary for an effective intervention. Plus, the family will be engaged participants in the change process.
- I hope you'll agree following our assessment, if you don't already, that assessment is a process, not a piece of paper (i.e., the report).

TRANSITION

Now we'll move to the first family centered practice tool for assessment, having the family tell their story with regard to the incident that led to the report.

The family story is the family's perspective on how they became involved with the child welfare system. At a minimum, this story will describe the reported event from the family's perspective. It may also include some of the history and other interpretive elements (e.g., characteristics of involved family members, current family stressors, etc.).

Ask:

Think of an auto accident you've seen – or a store robbery or other crime you've seen on a TV show. What happens when the police interview the people involved or other observers?

Get a few responses. Emphasize:

- *The police get different stories, different explanations of what happened – everyone seems to have a different view or a different explanation of what really happened.*
- *As you know, we all have our own defined reality that helps us to interpret the world around us.*
- *The police, an independent assessors, come in and decide what's true using objective tools . . . measuring skid distances, checking bullet paths, etc. and more subjective measures to determine someone's truthfulness.*
- *The important thing, though, is that the police gather as much information as they can from witnesses at first, then sort through for truth later.*
- *We'll be following a somewhat similar process with our first family centered assessment tool, the family story.*



**VIDEO SEGMENT #3:
FAMILY STORY: A
REENACTMENT**

Introduce the video. Say:

Before we go into the specifics of the family story we have a video of a counselor demonstrating one. As you watch the video, take a few notes about what you see as skills the counselor uses as well as what he learned about the mother. Pay particular attention to:

- *How he introduces the idea of the story to the mother*
- *How he shows his appreciation and respect*
- *His body language and his attending behaviors*
- *His demonstration of empathy*
- *How he found positives/strengths in her story*
- *Her reaction to him*

Show the video segment now.

Process the video. Ask:

Would anyone like to share the interaction skills they saw?

Write responses on one flipchart for identified skills and information.



Flipchart

Point out the following if not identified by the group:

- **Appreciation:** In the introduction he thanked her and said he was glad to be there. Thanked her several other times.
- **Respect:** Asked for her permission several times,
- **Honesty:** Let her know he had read records, etc. but wanted to hear from her. Discussed “non-negotiables” with her
- **Attendance:** Leaned in, nodded, good eye contact
- **Empathy:** Made statements like “it must have been scary when the police came” “I understand that the office is not a good place to visit your child” “I know it is hard”
- **Clarification:** Asked her to verify information - made statements like “help me understand”; “sounds like” when reframing, “is that correct”
- **Teaming:** Used the term “we” and “us” when talking about working toward her goals – Stated “I see us as a team”, and “hope we can successfully work together.
- **Identified Strengths:** Said she had numerous strengths, saw parents as strength

**SLIDE 3-8: FAMILY STORY
PROCESS**

 **Family Story Process**

1. Listen to the story **not** to see if it meets the criteria for maltreatment or to evaluate truthfulness, but to clearly understand the family's perspective.
2. Listen while the story is told. Don't ask questions during the story.
3. At the end, thank the persons for telling it, then summarize it to show the family you heard what they were saying.
4. If appropriate, tell your story of being in child welfare.
5. Then, you may ask questions to clarify the family's story.

Briefly summarize the process – it will be covered in more depth momentarily.

Say:

Now, remembering that it is not uncommon for there to be more than one side to a story, here's the process for using the family story tool.

Ask:

Based on the family story process I've just told you, what do you think are the purposes of getting the family's story?

Get some responses. Summarize with the following slide.

**SLIDE 3-9: PURPOSES OF THE
FAMILY STORY**



Purposes of the Family Story

- Get family's view of the events.
- Let family know you are listening to them.
- Let family know you are seeking to understand, not criticize or "teach."
- Get family to begin to accept the reality of maltreatment and responsibility for it.
- Opportunity to find strengths.

Summarize:

- The family story serves multiple purposes at the initial meeting with the family . . . all of them good.
- You get some information, you see where the family is "coming from," you convey a willingness to listen to them . . . and that you respect them as valued and unique individuals.
- PIs do something like the family story as a matter of course early in their investigation, but the family centered "touches" relate to how the PI/worker attends and responds to the story.

**SLIDE 3-10: FUNDAMENTAL
INITIAL VISIT QUESTIONS**



Fundamental Initial Visit Questions

1. How safe is the home environment?
2. What is the status of previously identified risk factors?
3. Who is this family?
4. What is the family's history?
5. What strengths in individuals and family as a whole are apparent?
6. What are some of the obvious family dynamics?
7. What is the family's perception of the problem?
8. What stresses are the family experiencing?
9. What are the immediate resource needs?
10. What formal and informal supports are available?

Remind the participants of the initial visit questions.

Ask:

Which questions may be touched upon by the family telling its story?

Possible answers:

Certainly question 7 on the family's perception. Depending on how the story goes, it's possible to get information for questions 5-9.

Summarize:

The family story is not just a good tool for building the relationship with the family; it is a useful way to get a good amount of information for the family assessment.

Remember, too, that these questions begin to help us assemble information, but the next question to always ask is the, "...So what?" It's the "...So what?" question that helps us derive meaning and identify additional areas of inquiry and exploration.



Family Story Process

1. Listen to the story **not** to see if it meets the criteria for maltreatment or to evaluate truthfulness, but to clearly understand the family's perspective.
2. Listen while the story is told. Don't ask questions during the story.
3. At the end, thank the persons for telling it, then summarize it to show the family you heard what they were saying.
4. If appropriate, tell your story of being in child welfare.
5. Then, you may ask questions to clarify the family's story.

Say:

Let me go over points about the family story process in more detail. The key to success is your professional demeanor. It's about being genuine, in the here and now, and critical (as in critical thinking) but trusting. It's also about being empathetic, honest and straightforward, but also positive and not deficit focused (Why can't you keep your home clean? vs. I'm concerned about the upkeep of your home and I wonder whether the status of the home might be dangerous to your toddler?)

- Let the family tell the story. You may introduce this step by saying something like:

CPI

"Mrs. Douglas, I became involved with your family as a result of a report concerning Jan's bruises. It helps me to hear the story directly from you. Would you tell me how it is that we came to be involved with your family, please?"

Worker

"Mrs. Douglas, as you know, I became involved with your family as a result of a report concerning Jan's bruises. I know you talked with the investigator about how the bruises came about, but it helps me to hear the story directly from you. Would you tell me how it is that we came to be involved with your family, please?"

- Take notes of key events, explanations, etc. as the story is told.

(Continued on next page.)

- There may be gaps in the story or parts that are unclear. Our usual tendency is to try to get those cleared up right away, by interrupting the storyteller. In this case, mentally note questions you have but save them for after the story is told. The important thing is to **listen as well as you can**, paying attention to the facts and emotions being conveyed verbally and nonverbally.
- At the end of the story, it is important to **thank the family** member for telling the story, genuinely reflecting on how difficult it can be to share personal details.
- Then, summarize and clarify it based on what was said to make sure your understanding is consistent with their understanding. Don't add details; just repeat the key facts and opinions to demonstrate that you listened accurately. Ask if your summation is correct.
- After clarifying and confirming your understanding of the family story, it is important to tell the family/individual what we are going to do with the information that they shared with you. Stress that the information they shared will help us understand their situation and assist in developing an appropriate intervention plan. If other agencies workers are involved with this family, it is important to explain that the other workers would benefit from having this information so that they can also understand the current situation and provide appropriate services.
- This is also a good time to explain where we are in the child protection process and answer any questions that the family/individual might have about what will happen next.
- Next comes a particularly interesting **option**: telling your professional story. This story tells about how long you been a child welfare professional, why you chose the profession, what you hope to accomplish with families, and how you like to work with families. You'll need to use your professional judgment to determine whether to tell the story, but it can be a powerful bridge builder.

The idea is to continue to build trust and to strengthen the personal, but professional bond between you and the family.

You may say something like: "Mrs. Douglas, I appreciate you telling me your story. Would it be OK if I share my story with you? It's about why I do what I do with families."

With the family's permission, tell your story. Then, transition back to the family's story to seek clarification.



Flipchart

- Seek clarification, as necessary. Now, this is the place where you have to be particularly careful. You want more details, but you don't want to appear confrontive, accusatory, or even judgmental. At this point, you want to come across as a friend seeking information so you can help. Your questions are clarifying questions, not a fishing expedition to see what you can find.
- If you are not comfortable using the Family Story tool, it would be a good idea to practice the tool with a coworker or even your family members or friends to develop a level of comfort with it.
-

Ask:

From your perspective, what is it you really want to learn from the family's story? In other words, what are the things you would want to make sure are clear, either from the story itself or your clarification questions?

Get a few responses. Summarize, adding the following points as necessary:

- You want to know the specific actors and actions in the reported incident: who did what to whom?
- You'd like to know what the people involved were feeling and thinking as the event unfolded . . . knowing the emotions, bodily reactions, and thoughts of the people during the event can give a much deeper level of understanding of the impact of the event on the family – the context of the event, in other words.
- You want to know who else was there, if anyone, and their roles or involvement.
- You want to know what happened before the event – what things led up to the event? What are the event “triggers?” Who did what and how did the involved people react? Were the people involved under any particular stresses that day?
- You want to know who did what after the incident. Who did what and how did the people involved react?
- Remember, though, if the family starts to feel threatened by the details of these questions, it may be best to stop asking them and move on to the next part of the visit. You can come back to these questions in the next visit, most likely.

Conduct brief whole group discussion. Ask:

What do you think you should do if the family member tells a story that is not supported by the facts uncovered previously? In other words, the family member continues to deny or downplay the maltreatment incident?

Discuss.

Suggestion:

At this point in the process, you are trying to establish the family's trust and a working relationship. Rather than confront the family member (and thereby shut down communication, most likely), if the family member is being cooperative, continue with the process without trying to resolve the inconsistencies. The goal, after all, is to have a willing family take steps that meet their needs to provide a safe and healthy home for the children. The "true" story may come out later.

Say:

Once you have the family's story there's some related information that can be very powerful for motivating you and the family – and the questions for this information are important to family centered practice.

SLIDE 3-12: ASK EXCEPTION
QUESTIONS



Ask Exception Questions

Find exceptions to the “triggering” behavior. They almost always exist.

Say:

For the situation that led to the current report, ask about times when the similar antecedents were present, but the maltreatment did not occur.

Select an example or two – or use some of your own.

“Mrs. Jones, you’ve said you’ve been too depressed to get out of bed in the morning. Has there been one day when you did manage to get out of bed, even for a little while? What was different about that morning?”

“Mr. David, you said you’d been drinking on the night that you hit Louis. You’ve also said there are times when Louis doesn’t mind you, but that you don’t hit him if you haven’t been drinking. What is different about those times when you don’t drink?”

“Mrs. Peterson, you said that since Sandra has been in high school she has become almost impossible to manage. There’s been a lot of tension that has built up between you two. Can you think of one time when you really felt like hitting Sandra, but you held back? How were you able to do that?”

When you told me your story, you mentioned that one time a couple of months ago you were able to take care of the kids for five days – making meals, getting them bathed and dressed – how did you manage to keep going for those five days?

Remember, though, to ask the questions in plain language – no acronyms or service system-speak.

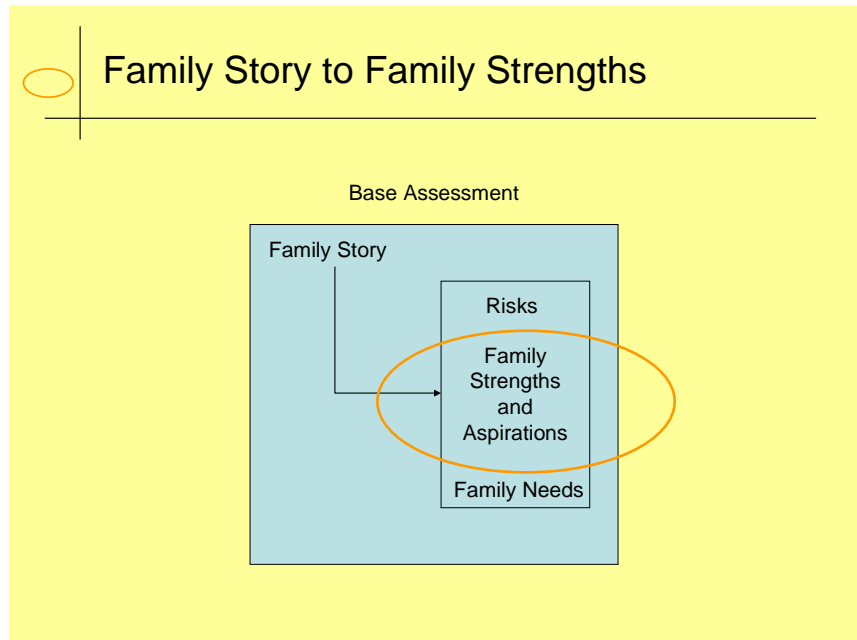
Ask:

What's the value in asking exception questions?

Get a few responses.

Suggested responses:

- By asking for exceptions, the PI/worker is conveying to the family that she or he understands that the maltreatment does not happen all the time – that the maltreatment, many times, is the exception, not the norm. This expresses respect to the family.
- Exceptions can be a way of expressing praise to the family. This is particularly true when the PI/worker, upon finding out about an exception, verbalizes that doing the exception behavior took intelligence, love, control, and effort.
- Exception questions may indeed be doing something different. We focus on the maltreatment incident so much that we forget to ask about exceptions. The family realizes this is something different and that helps to get them thinking of a better working relationship and the possibility of actually getting some help.
- If you are going to help the family to change the chain of events, then you need to know up front what are some things you can build on or substitute for how the family interacts during the maltreatment. The exceptions help you and the family to think in terms of behavioral chains to strengthen and support safe behaviors.
- Related to that, we know it is easier for ourselves and the families we work with to do more of something we are already doing than to learn something new. That is, “build on success.” The exceptions show you and the family some successes to build upon. “What’s different about those times? What will it take for you to do that more often?” become important success building questions.



Say:

- While there are a variety of paths that any interview can take, a good one after talking about exceptions is uncovering the family’s strengths.
- This is something the family members can feel good about, something that is usually pretty easy to talk about, and something that tells the family member that you see them as more than a problem.

Point out:

UNCOVERING STRENGTHS

- Remember, one of our main purposes of this meeting is to motivate ourselves and the family for the intervention. In investigations or casework, motivation builds from positive experiences. You can say something like,

“Mrs. Douglas, from visiting with you this brief amount of time, I can see that family is important to you and that you really care about your children. Tell me some other things that you do well or that you enjoy doing – some things that you may consider your personal strengths or something you think you’re pretty good at?”

- It can be a very powerful message to the family members when you bring up strengths in the first interview. It also is a good way to make the family member feel good about herself or himself – and that feeds the hope that things can get better.

(Continued on next page.)

- As you know, there are all kinds of strengths. When asked to give our own strengths, it is not unusual for most of us to mention 3-5 and then peter out. Many of the families you see are not as verbal as you – and are not used to thinking in terms of their own strengths. You may need to prompt them for strengths.
- It’s important to remember that the strengths we are trying to uncover include **character strengths** – e.g., resiliency, strong, brave, attitudes, skills, etc. in addition to other strengths like employment, transportation, etc. For engagement and assessment, particularly, focus on the character strengths to support and assist getting that person to feel empowered or motivated by the interaction.

Discuss:

**PARTICIPANT GUIDE:
PG. 3-1 TO 3-4**

Direct the participants to the various strength lists and questions in the participant guide. Point out that these give various approaches to getting the family to talk about strengths.

<i>TRAINER NOTE</i>	<p>A good thing about the first list is that it categorizes strengths. These same categories can be used for needs (identified later) and for using strengths to meet needs.</p> <p>Emphasize that one aspect of the family centered practice is its emphasis on individual and family strengths. Tell the participants to take the time necessary to get a thorough understanding of the family’s strengths through questions and checklists like these examples (and to be aware that not all the strengths will come out in the part of the interview devoted to asking questions about strengths).</p> <p>Notice that some of the examples include the children’s strengths – PI/workers need to take the time to get the parent and child’s understanding of these strengths, not just the parent and family strengths.</p> <p>Finally, recognize that in talking about strengths in a conversational manner, the issue of sharing personal information will almost always come up for the PI/worker to resolve. In general, though, the PI/worker’s information about hobbies, likes, child strengths, etc. can be readily shared.</p>
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GIVING STRENGTHS

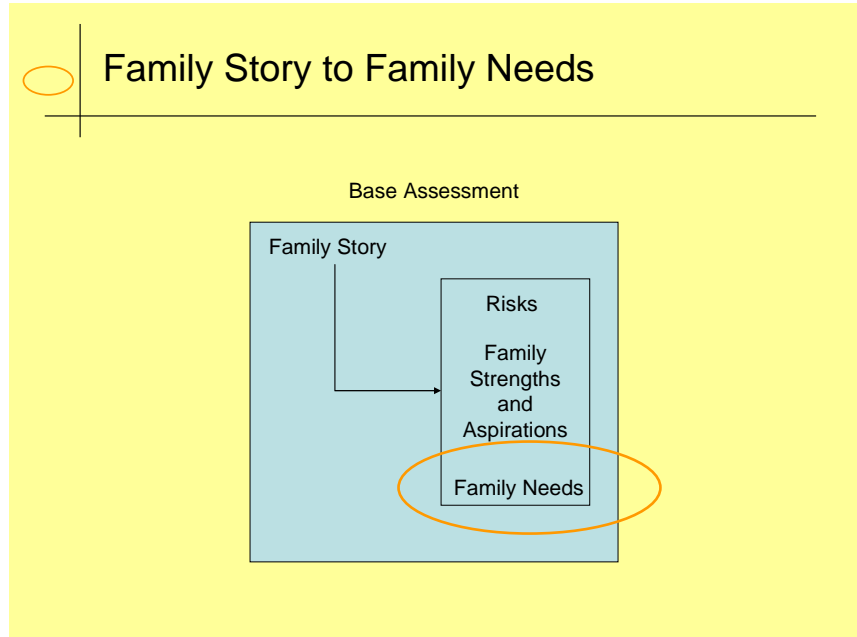
Ask:

We've been talking about uncovering strengths from the family members through interview questions. There is another aspect of recognizing family strengths, but it comes from you rather than the family members. Anybody have any ideas about what I mean?

Get a few responses, if they are forthcoming. Reinforce statements regarding the use of:

- Reframing
- Recognizing resiliencies
- Stating observations/giving reinforcements of strengths

<p>PARTICIPANT GUIDE: PG. 3-5</p>	<p>ACTIVITY 3-3: Identify Family Exceptions and Strengths</p> <p>TIME: 10 MINUTES</p> <p>DIRECTIONS:</p> <ol style="list-style-type: none">1. Have the participants turn to page 3-5 in their Participant Guide.2. Think about a case that is familiar to you.3. Have you asked about exceptions? What questions might you ask?4. Have you noticed any particular family strengths or resiliencies –abilities to persevere or change despite a troubled past? How could you complement the family on those? <p><i>After about 5 minutes or when many of the participants have finished, ask for a couple of volunteers to share their results and briefly discuss their ideas.</i></p>
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Say:

- We now have a good sense of the family’s story, exceptions to the reported maltreatment, and a good sense of the family’s view of its own strengths.
- Next, we want to show the family that we can be responsive to them by asking them what they see as their immediate needs.
- As you know, letting the family identify their needs helps you to identify risks to child safety.

IDENTIFYING NEEDS

Say:

- In this section, we’ll be focusing on identifying and prioritizing the family’s needs. Commonly, for service cases there will be an existing court order that lists interventions that must be followed by the family. We consider these nonnegotiables. As service workers work with the family, you will blend what the family perceives as their needs with the court’s nonnegotiables to create a prioritized list of needs. This list then becomes the basis for case planning.
- Whether you are a PI or worker, identifying family needs may seem like the casework you are used to doing. Family centered practice puts some special twists on that.
- You make a more concerted effort to identify what the family sees as its needs. Many of you don’t seek to just implement the court order requirements. You work with the family to create a comprehensive plan that meets their needs.

Say:

In the video demonstration, Rusty began the discussion of the family's needs with a common technique of family-based interventions: the miracle question.

**SLIDE 3-15: MIRACLE
QUESTION**



Miracle Question

Suppose one night there is a miracle while you are sleeping and the problem that brought you to the attention of our agency is solved. Since you are sleeping, you don't know that a miracle has happened or that your problem is solved.

What do you suppose you will notice different the next morning that will tell you that the problem is solved?

Ask:

This question can be very powerful for the family. Have any of you used it successfully?

What happened when you asked the miracle question?

Discuss and summarize a few examples.

Ask:

Why do you think the miracle question has such a powerful effect?

Discuss briefly, summarize with slide.

**SLIDE 3-16: MIRACLE
QUESTION ELEMENTS**



Miracle Question Elements

- Suppose . . . *sets the stage for imagination*
- Miracle happened . . . *sets the tone as one of potential*
- The problem is solved . . . *goal emphasized over means*
- You don't know . . . *again emphasizes a possible future*
- What will be different . . . *seeks details (needs)*

Say:

- The miracle question can be very effective for identifying needs and motivating the family member to commit to the intervention. Why? Because the answer clearly defines a desired goal and at the same time tends to instill hope that life can be different – a vivid, positive image is created. Many families do not have such a vision.
- Using the miracle question effectively requires using all five elements. That takes practice. Practice asking the question to yourself until you are comfortable with the wording. We'll get you off to a good start with the miracle question in this training, but it will take doing it multiple times with families before you feel comfortable, particularly in dealing with the variety of answers you may receive. Still, the power of the question makes it worthwhile to learn to use it effectively.

**SLIDE 3-17: MIRACLE
QUESTION CONSIDERATIONS**



Miracle Question Considerations

- Ask the miracle question to actively involved, capable family members: parents, grandparent, children.
- Take notes as you hear the responses.

Say:

- You'll want to get a miracle question answer from all the family members – parents, children, and grandparents if they are active participants in the family, for example.
- Also, take notes as you hear the answer. The notes will help you with follow-up questions.

Ask:

What should you do if you ask the miracle question and the family member gives a story in which another person – the child or spouse is the one that does all the changing?

Show next slide.

Child Changes

My son would get up on his own, get ready for school without my yelling at him to get up, get his homework ready, and get out the door on time for the school bus. Most of all, he will stay in school all day instead of skipping out. I won't get a phone call from school telling me that I have to come and get him.

Ask:

What would you say to the mother?

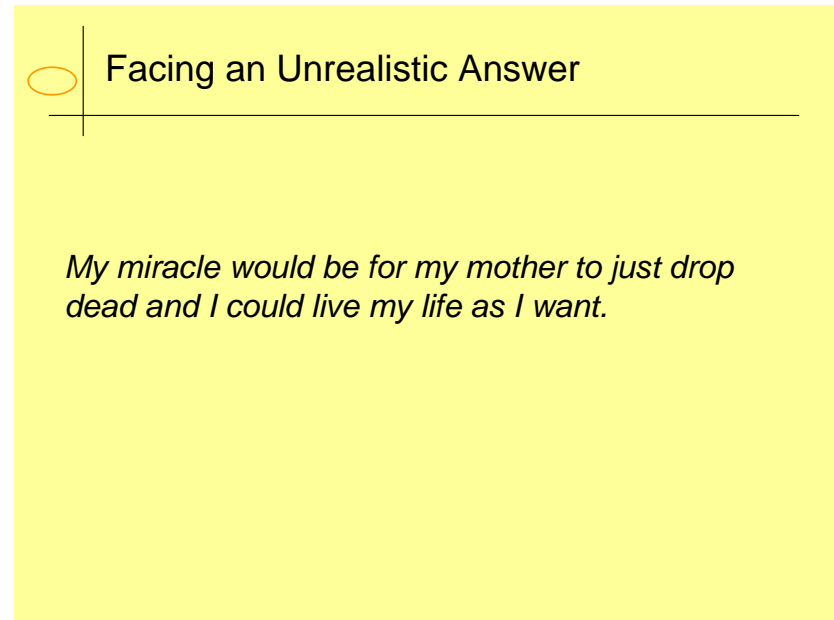
Get some responses. Discuss:

- Recognize that the mother is asking for significant changes of the child: *OK, that's a lot for Chris to do.*
- Recognize the changes are important to the mother: *But, I can see where these changes would be important to you.*
- Maintain hope: *Let's say that Chris does those things . . .*
- Bring the focus back to the mother's actions/needs: *What do you suppose he will say how you will be different when he can do all this?*
- Take notes of the "needs" the mother then states.

Ask:

What about if a family member gives an unrealistic answer?

**SLIDE 3-19: FACING AN
UNREALISTIC ANSWER**



Facing an Unrealistic Answer

My miracle would be for my mother to just drop dead and I could live my life as I want.

Ask:

What would you say to this teenager of a single-parent mother?

Get a few responses, then discuss:

- If you tell the youth that answer is totally unrealistic, he or she will get the message that you are “just like everybody else” and consider you next to worthless.
- Recognize youth’s desire, but mix it with reality: *Well, I don’t think that will happen, but just for the sake of discussion, let’s assume that your mother does indeed die.*
- Get more details of the “new” youth: *What would you be doing that you can’t now? How would you be different?*
- Take notes of these “needs.”
- Get at how the youth would appear different to those around him/her: *What would your friends say about how you were different then?*
- Take notes of these “needs.”

Say:

- Your goal is to get to the needs. So, even when a family member's first response may not apply to them personally or may be unrealistic, your challenge is to get them to focus on things that they can do, that they want to do.
- You do this by not confronting them with their unrealistic or diversionary answers, but by going with those responses, then asking questions that turn the focus back on what they themselves would do differently.
- You don't need to get into the "hows" by which the family member will meet their self-identified needs – that will come during case planning.

IDENTIFYING OTHER NEEDS

Say:

- As with strengths, a family member may not express all his or her important needs through the initial answer to the miracle question.
- In this case, you ask follow-up questions to get to more specific or comprehensive needs.
- Some example follow-up questions are presented in your participant guide.

PARTICIPANT GUIDE: PG. 3-6

Briefly review the follow-up questions.

- If you have not been able to identify these needs through follow-up questions to the miracle question, you may show the family member a list of common needs to see if any of them seem important to him or her.
- An example list of needs is presented in your participant guide.

PARTICIPANT GUIDE: PG. 3-7

Briefly review the needs list.

TRAINER NOTE

Emphasize that it is particularly important to identify the high priority survival needs of the family – food, shelter, transportation, etc. and then work with the family to develop a short timeframe to accomplish the highest priority needs with an informal plan. As we said in the Engagement session, from a family centered perspective, a strong way to build trust is to work with the family (ideally with the family member(s) and the PI/worker each having some tasks) to get some important need met quickly.

PARTICIPANT GUIDE: PG. 3-8

- If you use the needs list, merely check a need that the family member mentions, then ask for more details to get a good understanding of the need.
- Also, you can turnaround the categories and questions we used for strengths in the last module to identify needs. Then, using the same categories for strengths and needs can be helpful in using strengths to resolve needs. (To be discussed in the case planning session.)

TIME: 60 MINUTES

DIRECTIONS:

Preparing the Group for the Activity:

Tell the participants that they will have the opportunity to practice talking with a family about their family story, strengths, and goals.

1. Divide the participants into groups of 5-6.
2. Distribute **Trainer Handout 3-1A: Family Additional Information** and have participants read it.
3. Select one participant from each group to play the mother and one to play the father. Pull all the mothers together into one group and the fathers into another.
4. Have the remaining members of the small groups select two participants to be the CPI and caseworker. The remaining small group members will be observers.
5. Have the small group select a spokesperson to share the results of their group's activity with the larger group during the debriefing. The spokesperson should be one of the observers.
6. Tell the participants to assume that a CPI and caseworker have been talking with the mother to establish rapport. They are now ready to act as co-facilitators and talk about the mother's and children's strengths and to get her story of why the agency is involved with the family.
7. Hand out the appropriate direction sheets to the groups. (**Trainer Handouts 3-1B, 3-1C, and 3-1D**)
8. The participants are to take about ten minutes to prepare, based on the directions.
9. Have the parents rejoin their groups for the activity. Tell the groups they will have 10 minutes to complete the interview. Tell them to begin.
10. Observe the groups and help, as necessary.

Trainer Note: remember to time the activity (10 minutes only for the activity)

Processing the Activity

1. When the groups have completed the activity, have a spokesperson from each group share what they learned about the family and how they felt about the process
2. When the results have been presented, check with the observers to see if they have additional comments regarding their observations. Did the facilitator follow the procedure, do all the steps, etc.?
3. When all groups have reported, summarize the similarities and/or differences in what they learned.
4. If the following have not been identified, ask participants if they observed the following skills or behaviors and ask them to give an example:
 - Honesty – Letting the family know you saw the records, telling them what you will be doing with the information
 - Providing Direction – Letting them know you want to hear their story
 - Good Attendance (leaning in, nodding, good eye contact)
 - Clarifying
 - Reframing
 - Showing Empathy
 - Identifying Strengths
5. Collect the handouts.
6. Thank the group for their participation and ask for any questions about the strengths and family story process.

IDENTIFYING UNDERLYING NEEDS

Ask:

Whether you use miracle questions or the list of needs, the goal is to identify what we call the underlying needs for the family. Can someone tell me what I mean by “underlying needs?”

Discuss a few examples.

- For utilities, it’s not just that the bill needs to be paid to reduce the risk of hazardous or uninhabitable conditions in the home. The underlying need is to get at why the bills are not being paid – budgeting problems, not getting entitlement money, someone is taking the check, mother has cognitive limitations and can’t maintain employment, substance abuse that is self-medicating a mental or physical impairment, substance addiction, etc.
- For an underweight child, it’s not just to the need to get her or him to gain weight to reduce the risks of death by starvation, severe malnutrition, or missing cognitive, physical, or other developmental milestones. The underlying need may be getting the right food, seeing if the mother knows how to prepare the food, making sure withholding food is not being used as punishment, etc.)
- The point is that as you work with family members to identify needs, try to get to the underlying needs, if possible, in the needs conversation.
- Oftentimes the family may not have thought much about underlying needs, so you may need to prompt the conversation with follow-up questions to get at the barriers to meeting the need . . . money, knowledge, skills, capabilities like transportation, etc.



Basic Human Needs

All behavior is our best attempt to satisfy our needs:

- Survival (physical needs)
- Love or belonging
- Power or importance
- Freedom or choice
- Fun or pleasure

William Glasser, 1998. Choice Theory: A new Psychology of Personal Freedom

Summarize:

- Here's another perspective on underlying needs: the basic human needs that drive our behavior.
- Maltreatment occurs as a parent is trying to satisfy some need – a need for power, freedom, pleasure, love, or basic survival. Everyone's behavior is chosen to satisfy a need.
- Our job, then, is to help families learn to meet their basic needs in a way that maintains the safety of their children. We often find that the parents love their children – and that the children love their parents. The situation surrounding the maltreatment event is such that satisfying a parent's basic needs take precedence over the parenting relationship.
- Parents frequently lack safe alternatives for getting the underlying basic need met. That's where we come in, helping them to see the link between need and the behavior – and then helping them to find safe alternatives for meeting the needs.
- Identifying the “real” underlying needs may be difficult. While you want to listen to the family's perceptions of their needs, even for the underlying needs, you may help the family by observing and then asking about basic human needs.
- Considering the five needs, try to see how the family member is getting the needs met currently.

(Continued on next page.)

Examples:

A parent may be in a real power struggle with her child – and this struggle is intensified by the parent feeling she has no power or importance in any area of her life. By addressing this need and arranging for the parent to meet her need for power or importance in other areas of her life – by joining church groups or other community organizations, by getting a job, etc. – the home situation may improve significantly.

Alternatively, you may find that a mother who is at her wit's end with regard to caring for her toddler and has no family or friends nearby. For this mother, it may make more sense to get her into situations that friendships can form and she has someone to talk with and to get help from rather than sending her to parenting classes.

- Thinking about how a behavior represents a person's best attempt to satisfy a basic human need gives a much broader perspective on what can be done to satisfy the need in a safe way for both the parent and child.
- The questions for needs can be quite simple:
 - *What do you do for fun?*
 - *What do you do that makes you feel powerful or important?*
 - *When do you feel most free in your life? What are you doing then?*
 - *Who loves you? Are there groups or friends that you feel particularly close to?*
- While everyone has the same basic needs, they are not at the same level for everyone. For instance, one person may have a much stronger need for power than another. Try to find out what are the important basic needs in the family, how well they are being met, how safely they are being met, and then, for those that are unsafe, what are good alternatives to satisfy the need safely.

SECTION SUMMARY

Summarize:

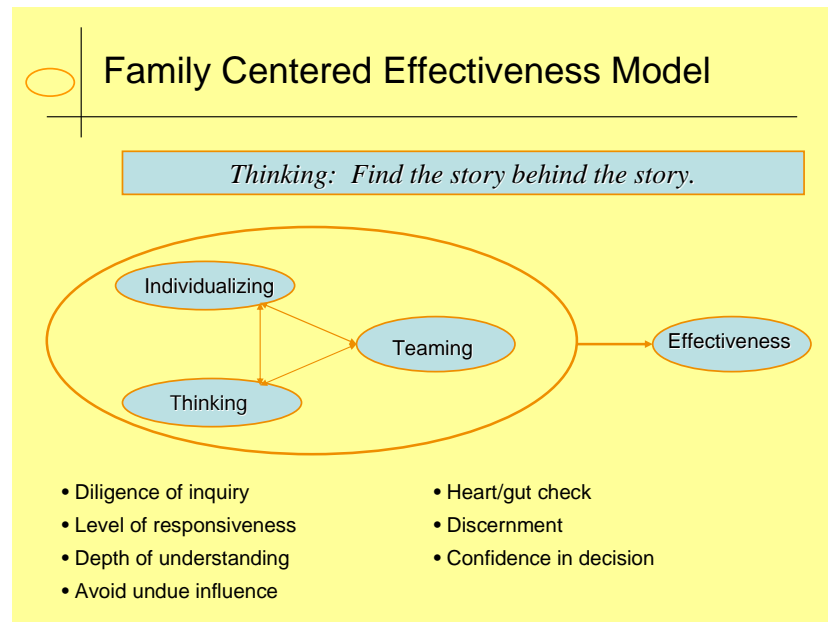
- We've come to the end of the base assessment tools segment of the Family Centered Assessment session.
- In this part of the session, you've learned to apply family centered assessment tools to conduct a base assessment with the family. This assessment gets at many of the fundamental questions regarding the reported maltreatment – and the family's perception of the events and ways to move forward. All the assessing was done in a rather informal, conversational manner to continue to build the PI/worker – family team for the intervention.
- You've learned to get the family's perception of the maltreatment, their rationale if you will. Where possible, you've been encouraged to find the chain of what happens before the maltreatment (the “triggers”), the maltreatment behaviors, and what happens after the maltreatment. We'll want to change that chain in the intervention. One way to change that chain is to build on exceptions – and you've learned how to ask for them.
- We've focused on identifying the family members' strengths early in the interview. Ideally, knowing the strengths will give us some ideas on how to use them to meet the family's needs. Also, focusing on strengths early “tells” the family that we see them as more than just problems. Talking about strengths early can also inspire the family to get more involved in the interview and the intervention as a whole.
- We've also asked the child and family to identify their needs using the solution-focused tool of the miracle question, including follow-up questions to identify specific needs.

TRANSITION

We've looked at how to conduct a base assessment with family centered tools.

Next, we'll focus on how to pull together the assessment information and how to evaluate our information gathering using the critical thinking strength.

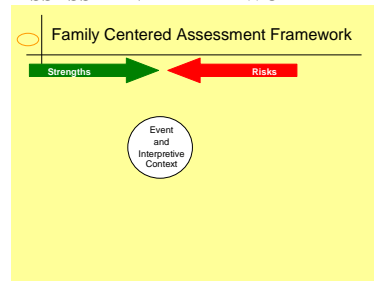
SLIDE 3-21: EFFECTIVENESS MODEL



Summarize:

- We introduced the critical thinking strength and its components in Session 1.
- Our challenge in family centered investigations and casework is to bring our thinking to a more effective level – doing a better job of connecting the dots to identify patterns or getting at the real underlying dynamics or needs as we work a case.
- Meeting this challenge is where critical thinking comes in – it applies from engagement to case closure.
- We’re going to find out how we can use critical thinking to self-assess our assessment process with a family.
- First, though, let’s talk briefly about pulling together the assessment information for interpretation.
- At the beginning of this session, we discussed the many factors associated with maltreatment. Particularly for complex situations, it is difficult to identify these factors and how they interrelate among themselves and with strengths, stresses, and other contributing factors to increase the likelihood of maltreatment.
- We said we need a conceptual framework for maltreatments and why they occur to help with interpretation of the assessment results. This framework helps us to get to the “story behind the story” or, the dynamics of the maltreatment.
- Using this framework is part of critical thinking. Can you see which critical thinking factor it would most relate to? It’s part of “depth of understanding.”

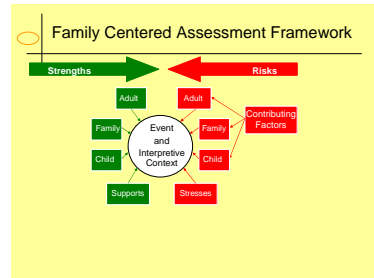
SLIDE 3-22: FAMILY CENTERED ASSESSMENT FRAMEWORK



Summarize:

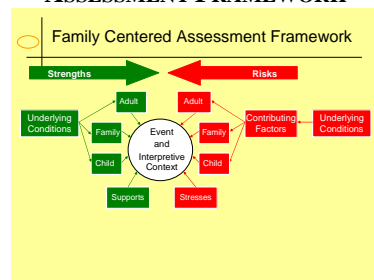
- Here's a framework that can help you to identify and connect the dots when doing an assessment.
- It directs you to look at the adult, child, and family strengths and risks to interpret the reported maltreatment (the "Event").

SLIDE 3-23: FAMILY CENTERED ASSESSMENT FRAMEWORK



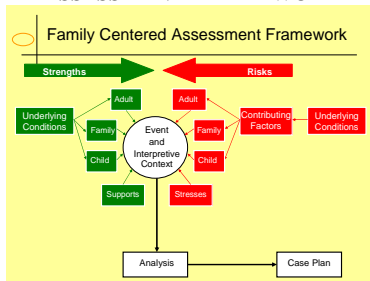
- The framework also guides you in gathering the assessment information in an efficient sequence.
- We suggested that you first get information about the current family members, their family functioning, and the supports and stresses that affect that functioning. We called that the **base assessment**.
- In many cases, this information will give you the information you need to interpret how the various factors interact to "drive" the maltreatment, given the current conditions. We used the family story, a variety of strength and needs questions, and the connections diagram to get this information.
- We said that you would assess for contributing factors, such as mental illness, substance abuse, poverty, etc. that may, at times, overwhelm the healthy family functioning.

SLIDE 3-24: FAMILY CENTERED ASSESSMENT FRAMEWORK



- With certain families, often in what we consider to be the complex cases, there are more dynamics than the base assessment reveals. For those, we suggested that you use the **extended assessment**.
- There may be underlying conditions that really drive a family's strengths or its maltreatment behaviors. These conditions arise from the family's history – whether intergenerational or the current family's previous development – or from the family members' underlying psychological needs.
- You pick up clues to the contributing factors and underlying conditions as you talk with the family or make other observations during the base assessment.
- Usually, though, the actual information will come from specialized assessments done by providers – mental health, substance abuse, etc. – or from the Comprehensive Behavioral Assessment.

SLIDE 3-25: FAMILY CENTERED ASSESSMENT FRAMEWORK



PARTICIPANT GUIDE: PG. 3-9

- As you gather the information, you analyze it, and then either create or modify the case plan, as necessary.

Review the assessment conceptual framework description in the Participant Guide with the participants.

SLIDE 3-26: ASSESSMENT FRAMEWORK POINTS

Assessment Framework Main Points

1. Understanding a family involves understanding the interplay of family strengths and maltreatment factors.
2. Assess to the appropriate “depth.”
3. Assessment is an on-going process of investigations and casework.

There are three main points regarding this framework:

1. Understanding a family involves understanding the interplay of family strengths and maltreatment factors. We need to identify the family’s strengths, so we can build upon those during the intervention. How did they breakdown in the current situation? What supports can reinforce the family’s strengths?
2. Assess to the appropriate “depth.” If you are doing a base assessment and get a clue of some “deeper” dynamic playing out, follow-up on that dynamic with specialized assessments so you can better understand its strength and role.

(Continued on next page.)

3. Assessment is an on-going process of investigations and casework. You've heard that 100 times, at least, and I hope that the framework makes that saying real for you, if you need for it to be made real. As we pointed out at the beginning of the session, a family gradually reveals itself based on the trusting and sharing relationship you build with them. Not only is the family and its environment always changing and so the assessment must be on-going, but you will also be learning more about the family's past or family member needs through the on-going engagement and assessment process.

ACTIVITY 3-5: Making Sense of the Assessment Findings

TIME: MINUTES

DIRECTIONS:

1. Use the Mason case study used in the Family Map/Connections Diagram and the Family Story
2. Have the participants get into small groups of 3-5.
3. As a group, they are to identify key strengths, supports, stresses, contributing factors, and underlying conditions that either contribute to or protect from maltreatment. "Key" means a finding that is significant enough to be addressed in the case plan, either as strength to be used or a risk to be reduced/eliminated.
4. Have the participants use page 3-10 in the Participant Guide to record their answers.
5. The small groups will report their findings and the trainer will lead the discussion of the similarities and differences among the group results.

PARTICIPANT GUIDE: PG. 3-10

Possible Responses:

(It is not critical that items be placed in these categories, the main thing is to identify strengths and risks/needs.)

Strengths

- Mother's intellect
- Father's regular employment
- Family has stable housing (small but stable)
- Parent's love of the children
- Mother's willingness to accept help
- Mother's desire to return to school

(Continued on next page.)

Supports

- Maternal grandmother willing to help
- Father's family

Stresses

- John's behavior
- Possibility of father going to jail and leaving a depressed mom to care for the children alone
- Mother's belief that her husband is having affairs/marital problems
- Mother's pregnancy

Contributing Factors:

- Minimal support systems for the mother
- Mother's depression, lack of energy, etc.
- Father's being absent from the home regularly when out drinking, etc.
- Bobby's slow development
- Children are under 5 and are non-verbal
- Children have limited visibility in the community

Underlying Conditions

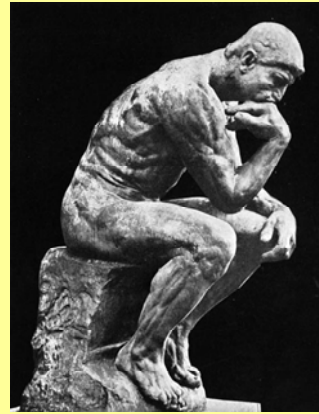
- Father's lack of involvement in the care of the children
- John is named after a brother the mother dislikes
- Father's history of affairs

SLIDE 3-27: WHAT IS CRITICAL THINKING?



Hmmm?

What
is
critical
thinking in
assessment?



Say:

- OK, now that we're clear on how the critical thinking factor of depth of understanding plays out in assessment, let's get back to the overall critical thinking strength for assessment.

Critical Thinking: Assessment

Do we have sufficient information to plan an effective intervention based on understanding the family story, the people involved, and the family members' needs, aspirations, strengths, and protective capabilities?

- Reconciles assessment findings and common sense
- First, reflect on the assessment findings (evidence)
- Next, do a gut (or heart) check (common sense)
- Then, have confidence in your decision

Summarize:

- Critical thinking **reconciles your findings with common sense**. How do we translate that to assessment?
- It comes down to reflecting on the assessment findings, analyzing the chain of events, the contributing factors, and the underlying conditions, synthesizing the traits and dynamics across family members, and evaluating the results . . . that's the critical thinking conclusion.
- **But, you're not done yet.** You need to temper your fact-based conclusions with common sense. Next, you do a gut check. In a sense, this is going beyond the more objective review of the facts and observations . . . you check your feelings and intuitions you've developed over the years, and ask:
- **For this child and family, do I have sufficient information to plan an effective intervention? Do I know the story behind the story?**
- Combining structured thinking with intuitions or gut feelings to make a decision – that's family centered critical thinking as we define it.

TRANSITION

Let's see how we can apply critical thinking to self-assess the assessment function.

ACTIVITY 3-6: Assessment Self-Assessment

TIME: MINUTES

DIRECTIONS:

PARTICIPANT GUIDE: PG. 3-10

PARTICIPANT GUIDE: PG. 2-12

1. Refer the participants to the **Self-Assessment: Critical Thinking Applied to Assessment** on page 3-10 in their participant guides.
2. Point out that the top of the self-assessment presents the critical decision that needs to be made. Then, questions for each of the seven factors of critical thinking are presented. Critical thinking integrates the seven factors to make the decision.
3. Tell the participants to think of a case they are currently working, and for which they have recently completed an assessment.
4. Have them use the **Self-Assessment: Critical Thinking Applied to Assessment** to assess their assessment with the child and family.
5. When they have finished, have them rate their critical thinking in **assessment**, as described in their Participant Guide on page 2-12. (They will be doing this rating for each casework function; they don't do the plan until after the Planning session.)
6. Discuss the self-assessment form. Does it seem useful to them? Does it structure their thinking about making the critical decision regarding assessment? Can they think of other questions that should be included? Questions that should be deleted?
7. This self-assessment is not a required activity or something to put in the case file. It is a tool to help them structure their decision-making for the assessment.
8. Point out that you will be introducing similar critical thinking self-assessments for the other core practice functions that are included in the training program.

TRANSITION

We've practiced the family centered practice assessment process and tools. Now, let's relate those concepts back to our guiding models.

POSTER REVIEW

Use the posters from Workshop 1 to relate the key points of the session to the models.

Ask:

How does what we have been talking about in this session advance us toward the goal of having a culture of success?

Suggested responses:

- Using the assessment tools, we're building a stronger partnership with the family through involving them more directly in the assessment process **and** listening to their perspective.
- Building on the trust and confidence established in the engagement, we add the open exchange of ideas that leads to a clear and shared vision of what the intervention should accomplish.
- Through the family's increased involvement and using the strength of critical thinking, we'll do a better job of getting the right "dots" of the maltreatment situation and then connecting them in a way that leads to a more powerful and relevant intervention.

Ask:

Looking at the Best Interests Model, what did this session give us with regard to it?

Suggested responses:

- At this point in the process, as with the engagement, we are still focusing primarily on the collaborative/solution-focused to adversarial/problem-focused dimension.
- For the first question (What can I do right now to promote the best interests of this child and family?), we've centered on two things:
 1. continuing to build a partnering relationship built on trust and an open exchange of perspectives
 2. pulling together the assessment information to get the "story behind the story" so that a realistic and individualized plan can be developed.

(Continued on next page.)

- For the second questions (Do I have a complete understanding of the situation and a good working relationship with the family?), we've used the teaming, individualizing, and critical thinking strengths to do just that and to self-assess how well we did it.

To some degree we've considered the third question (What other viewpoints might help me?). For extended assessments, particularly, we've determined whether specialized assessments are necessary for the family.

TRANSITION

We've said that doing a comprehensive assessment – assessing current family functioning, strengths, needs, and supports and, as necessary, underlying conditions and contributing factors – and engaging the family in the assessment process are the defining features of a family centered assessment. We've applied critical thinking to assessment through a self-assessment.

Still, assessment can be a complex skill, and the more we can learn about it the better.

SLIDE 3-29: STRENGTHSHARE

Strengthshare: Assessment

- *training programs,*
- *videos*
- *books,*
- *presenters, or*
- *possible mentors*

Introduce:

- As I pointed out at the start of this workshop, we're going to emphasize how we can help one another become more skillful in the core functions of family centered practice.
- We've presented a foundation for family-centered assessment in this session. Some of you may want more information and skills in assessment.
- Let's have a short discussion of how that could happen by asking you for your best ideas on training programs, books, presenters, or possible mentors on assessment.

FLIP CHART

Ask:

What are some good resources for family centered assessment? What books, training programs, videos, etc. would you recommend?

Ask:

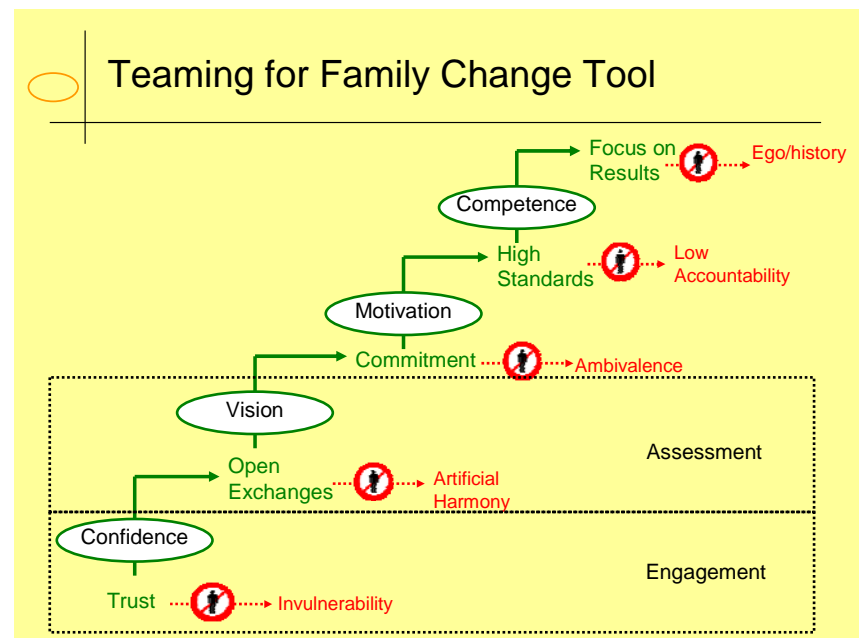
How about among you . . . don't be shy . . . who is particularly skilled in assessment or some particular component (like culture sensitivity, asking for the family story, etc.) and could serve as a problem solver or provide suggestions or technical assistance to other PIs or service workers?

TRANSITION

We've come to the end of the assessment presentation.

SESSION SUMMARY

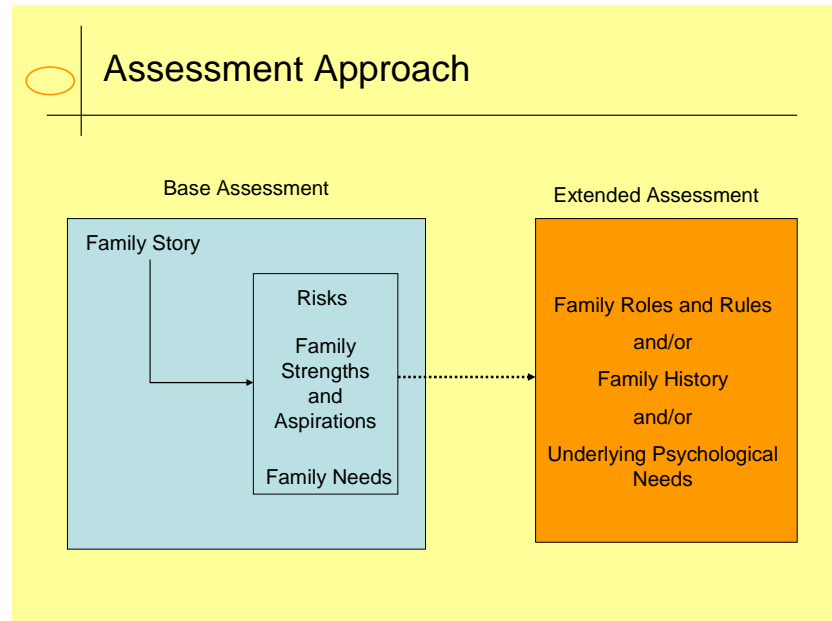
SLIDE 3-30: FAMILY CHANGE PROCESS



Summarize:

- We started this assessment session with an emphasis on the teaming strength.
- We said teaming with the family is particularly important for helping the family move through the change process.
- We said for assessment, the intent of your teaming process with the family changes from the trust building of engagement.
- Specifically, your emphasis is on developing a safe and open communication exchange. This exchange creates a common vision of what the intervention can and should accomplish.

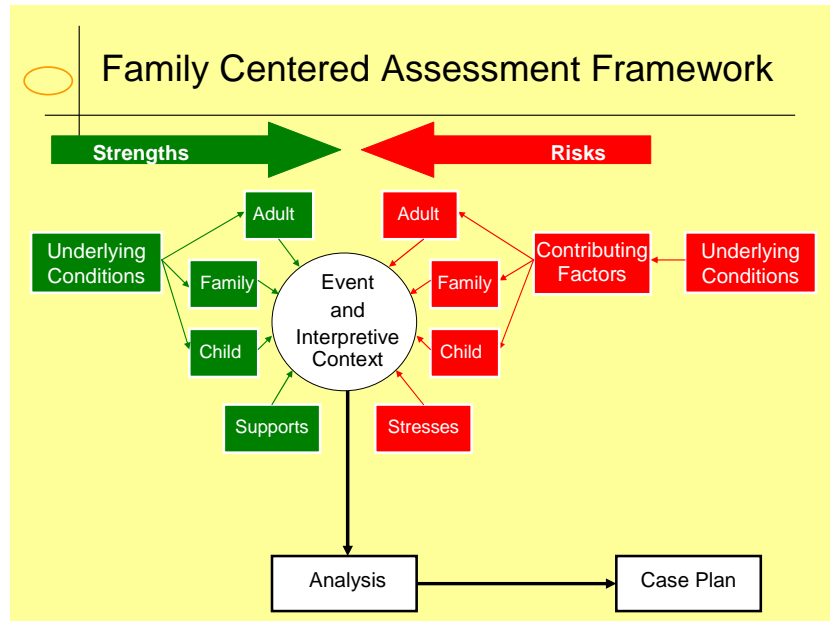
**SLIDE 3-31: ASSESSMENT
APPROACH**



State:

- We presented a number of assessment tools to get you the information you need **and** to engage the family in the assessment and, through that, the general change process.
- The tools focused on doing a base assessment, understanding the immediate situation and its context.
- We emphasized using the family story to get the family's perception of the incident, to identify the family strengths, risks, and needs, and to involve the family in the assessment.
- We mentioned that an extended assessment, which adds more historical information to better understand the individual family member characteristics and the family dynamics, would be necessary for some families.

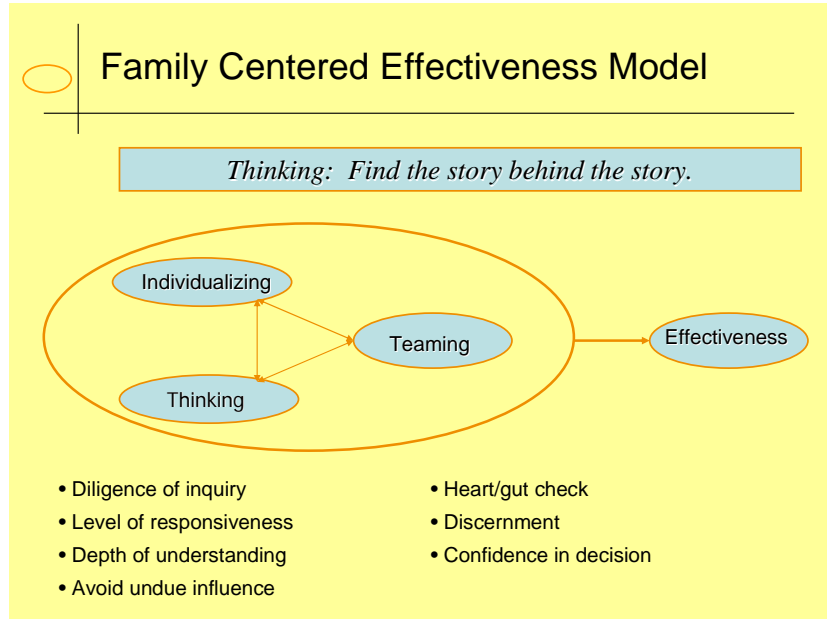
SLIDE 3-32: ASSESSMENT
FRAMEWORK



Summarize:

- We used this assessment framework to pull the assessment information together to interpret it.
- Our goal is to identify the story behind the story . . . to connect the dots so we can understand when and why the maltreatment is likely to occur . . . and how to go about stopping it.

SLIDE 3-33: EFFECTIVENESS - THINKING




Summarize:

- The conceptual framework was part of critical thinking in assessment, specifically the depth of understanding factor.
- In general, though, this session emphasized that all three effectiveness strengths come into play in assessment:
 - individualizing the assessment process to the family;
 - teaming with the family through the tools to encourage an open exchange and to create a common vision for what the intervention should accomplish, and
 - critical thinking to pull the assessment information together so an effective case plan can be developed.

Professional Competence and Family Centered Practice

Are you getting on the **TEE**?



Time?
Effectiveness?
Empowering?

Summarize:

- The intent of this session, as with the others is to boost your professional competence.
- As you know, working with each family is different. Despite all your experience, each family can present something you haven't seen before or require some new approach on your part.
- With each new case, you enter what might be considered the **free space of practice**. You're going to have to do some problem-solving or get particularly creative to serve the family effectively.
- Ideally, this session has better prepared you for that task. With the tools, the teaming perspective for engaging the family, and the critical thinking skills, you can make good decisions with an informed heart.
- These assessment strengths should help you to be more effective with families, help you to make better use of your time – and, ideally, save time – and give you a sense of empowerment that you can indeed have a positive impact on the lives of people that need your help.