



Family Partnership and Goal Setting

Policy/Approach:

SOHS/EHS engages in collaborative partnership building with parents to establish mutual trust and to identify family goals, strengths, and supports. This process begins as early after enrollment as possible and is respectful of each family's readiness and willingness to participate. The Family Partnership Agreement is a process, not merely a series of forms. From the first contact with a family, the Family Advocate will build rapport and create a trusting relationship in order to understand, as early as possible, the strengths, ambitions, skills and hopes of family members. Family Advocates will aim to engage all parental figures in the partnership process, remaining sensitive to the differing needs, roles, and interests of each individual.

We offer parents opportunities to develop individualized family partnership agreements that describe family goals, responsibilities, timetables and strategies for achievement, as well as progress in achieving them.

To avoid duplication of effort, we obtain any pre-existing family plans from the family and other community agencies. SOHS/EHS coordinates, to the extent possible, with families and other agencies to support the accomplishment of goals in the preexisting plans.

Policy Council Approval 8/19/2014
Board Approval 8/21/2014

HEAD START PROGRAM PERFORMANCE STANDARDS:

1302.52 (a-d) Family partnership services

HEAD START PROCEDURES:

Family Partnerships

Family partnerships are shaped by our mission to equip all children, regardless of family or community background, with the skills and attributes necessary for kindergarten readiness. We use the Family Strengths Self-Assessment, and other tools, to gain information about **family strengths/practices/circumstances/needs**, as research shows that stable family life practices are associated with positive child outcomes.

The four categories captured through the assessment are:

- Family Life Practices that Promote Healthy Child Development
- Support for Families with Children with Chronic Health Conditions or Special Needs
- Family Self-Sufficiency
- Family Health and Well-being

Advocates/Specialists/Home Based Home Visitors can establish much of the needed information in the course of a positive and friendly conversation about family routines and traditions and can utilize the home visit guide to expand conversations to gather needed information.

A. Family Strength Assessment Scoring

The Family Strength Assessment is used with the Family Success Rubric to provide an objective assessment of a family's status in various categories. The scoring helps to tailor supports, services, and resources families will need.

The scores are not permanent and will be continuously assessed to prioritize services and support for high-needs families. "Current" scores are considered fluid and will be updated at a minimum during quarterly staffings, and when information is obtained from a variety of situations, including, but not limited to home visits, conferences, Emergency Crisis/Need Identified, and/or Goal follow up.

The scores are entered into Shine and families scoring between certain ranges are considered "high needs" and require consistent communication and support. Goals can emerge from information gathered about the family's interests, strengths, and needs. Family services staff use the assessment scores and other information to determine the level of need for each family.

B. Caseload Management - FA only

Information obtained through the enrollment and home visiting processes and through the Family Strengths Self-Assessment will be cross-referenced with the Family Success Rubric and scoring guidance to determine the family's overall Family Strengths Assessment score. This score, as well as other information, will be used with each family to determine what services and support will be required of the Family Advocate, assist with the triage process for large caseloads, and ensure that family circumstances that could put children at risk are immediately addressed.

Family advocates should feel empowered to manage their caseload in a way that best supports all families – offering services that meet each family's unique needs.

Family advocates are required to utilize critical thinking skills, time management skills, and practice discretion to triage their caseloads and determine the priority level that best describes each family's current circumstances. Family Advocates may utilize information from several sources, including direct feedback from the families, when considering which families to prioritize for more intensive support services. Consider the following when triaging your caseload:

- Family Strength Self-Assessment (self-reported): Families will complete a brief self-assessment prior to, or soon after, enrollment and beginning services. This assessment correlates with the Family Strengths Assessment categories in SHINE, and FSA scores should be entered into SHINE once they are reported by the family or otherwise made known.
- Maslow's Hierarchy of Needs & Triage Guide: A theory designed to explain human behavior as it relates to our basic needs. This may be used in combination with family input to help define priority levels.
- Information gathered from teachers IHV, or any prior family background or pre-enrollment notes in SHINE
- Families or children that are involved in the Child Welfare system, are in foster care, homeless, or other qualifying circumstantial event(s) that may indicate more intensive services are needed.

- Children on a Guidance Plan will require more individualized services from the Family Advocate, placing them in the Priority 1 category.

As family circumstances change – they may transition from one priority level to another resulting in changes in Family Advocate services. FAs are to document any changes to service plans (i.e. pausing or resuming home visit services), in the Family Services Home Visit case note body.

Priority 1: High Need

- Prioritize attending IHV and conferences with teacher
- Required home visit from FA within 30 days of enrollment
- Establish a plan for consistent communication. Will have multiple family check-ins or home visits throughout the year
- Create Emergency/Crisis documentation as necessary
- Provide resources and referrals that align with the family's needs, abilities, and preferences. Utilize the Unite-Us referral system, when possible, to ensure timely follow-up and support
- Highly individualized case management

Priority 2: Moderate Need

- Required home visit from FA within 60 days of enrollment
- Partner with the teacher for a minimum of one family conference
- Partner with the family to create a plan for consistent communication. May have additional check-in or home visit during the year
- Create Emergency/Crisis documentation as necessary
- Provide resources and referrals that align with the family's needs, abilities, and preferences. Utilize the Unite-Us referral system, when possible, to ensure timely follow-up and support
- Moderate individualized case management

Priority 3: Low Need

- A home visit by the family advocate is optional - depending upon the preference of the family and family advocate's availability
- Attend a minimum of one family conference during the school year
- Will receive general resources, event outreach, and newsletters
- May receive information/resources regarding minimal need identified in family strengths assessment. Example: handouts on nighttime routines, potty training tips...etc.
- More generalized case management and support

Family Partnership Agreement & Goal Setting

In accordance with the Family Partnership Agreement that every family submits during their registration process, Staff will honor each family's unique strengths, needs and circumstances, as well as collaborate with each family to set and achieve goals.

Due to the clear research showing that stable family life practices correlate with positive child outcomes, staff should work with **all** families to set a goal unless a current crisis or critical need requires immediate attention that supersedes it. FA/SP/HBHV are required to set a minimum of one family goal with every family.

A. Goal Setting

To determine priority areas for setting family goals, it's important to update the Family Strengths Assessment (FSA) score.

- Each family's goals **MUST** be individualized and correspond to a specific item or area on the FSA.
 - Family Advocates (FAs) will prioritize "high needs" and "moderate needs" families to ensure ongoing support.
- Parents/guardians drive the goal-setting process and come up with the steps to achieve each goal, with the FA/SP as a collaborative partner.
- It is important that goals are achievable in two to three months and broken down into small steps. Progress towards goals will be reviewed, or more often if needed, and recorded in the SHINE database every 30 days.
 - If interested, a goal sheet is available for families to fill out and display at home. All progress and achievements are recognized and celebrated with the family.
 - Goals may be set in partnership with a family's teacher to support educational goals.
- If changes are made to a family's goal, the FA must provide additional information and details as to why the change was made in the form of a follow-up note.
 - If families are no longer interested or the goal is no longer relevant, the goal should be inactivated, and a follow-up note added to explain why.
- At the end of the program year, all family goals will be updated to either be inactivated or marked as completed.

B. Informal Goal Setting

In some situations, the family advocate or specialist may not be able to engage in the formal goal setting process with a family due to the family managing an emergency or crisis situation, or otherwise refusing to participate in family goal setting.

If the family is in crisis, the FA/SP will:

- Document the circumstances and supports offered in an Emergency/Crisis or Need Identified case note
- Schedule a home visit or time to connect about a family goal once the family's situation stabilizes

If the family is otherwise unwilling to set a goal, the FA/SP will:

- Share the importance of having a goal in the Family Life Practices area, as data reflects that partnership and growth in this area promotes future educational success
- If a goal was discussed but the family is not ready to commit at this time, continue to document the goal/steps in SHINE and leave at a benchmark zero. This is considered an informal goal and will remain inactive until the benchmark is advanced to "1."
- Partner with the family to determine how they will support one or more of the child education goals established with the teacher, and outline this as the active family goal
- Follow-up periodically throughout the year to encourage their engagement in the goal setting process

C. External Agency Family Plans/Goals:

Families in our program may be receiving services from other agencies. If a goal or plan has been made with another agency (DHS Self-sufficiency, DHS CW, Maslow Project, etc.), the FA/Specialist will offer to support the family in attaining these goals.

- The FA/SP will request a release (Form E-11) for the parent by emailing soheadstart@socfc.org.
- Once the release is obtained, the FA/SP will request the plan/goal from the other agency and will scan and upload into SHINE in the goal section.
- The FA/SP will document the receipt of the plan/goal in the data management system under case notes or Goal area.
- The FA/SP and family's pre-existing family goals, responsibilities, timetables and strategies for achieving these goals, as well as progress in achieving them will be tracked in the data management system.
- Family Advocates/Specialists should follow-up with families on goals that are 6 months or older or were set during a previous school year to determine if the goal should remain active, and that the goal steps are still accurate. If the goal is to remain active, goal steps should be reviewed to ensure the goal can be reached in a matter of a couple months.