 **Family Outcome Tool Talking Points**

Needs Assessment

*HSPPS 1302.52(b), 1302.50(b)*

**Why do we ask personal family questions?** Tell families that we support their whole family by asking some personal questions – **a Needs Assessment** required by Head Start to recognize family strengths and areas of wanted information or referrals. **Customer Connection Form and Client Intake**: Refer to these documents to learn about your families and help answer some FOT questions.

* Staff can review their area Resource Guide and/or ask the local Family Engagement Specialist for referral sources.
* Use the “FOT” Talking Points as a guide and note taking.

**Data entry:**  **Duration Teachers** and **Collaborative Centers** enter responses in the **Family Partnership Worksheet / FOT, Home Practices / Family Partnership Goals** and then email to program support for direct entry. Teachers may **directly enter in Child Plus. FES, CFS use their worksheets for data and then directly enter.**

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| --- | --- | --- |
| **FAMILY WELL-BEING - Parents and families are safe, healthy, and have increased financial security (10 sections)** | YES | NO |
| **Housing** |  | |
| ***Refer to responses in Client Intake, but still ask in case of situation has changed.***   1. *Are you currently homeless, without stable housing or at risk of becoming homeless?* ***Yes\_\_\_\_ No\_\_\_*** 2. *Shelters* 3. *Transitional Housing* 4. *Doubled Up* 5. *Hotel/Motel* 6. *Unsheltered*   ***Refer to responses in Customer Connection Form***     1. Would you like Weatherization information? (heat/energy efficiency)   **NOTES:** | | |
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| **Safety** | | |
| ***Refer to Client Intake (Abuse/Neglect of Child or Parent) 1 and 2, but still ask in case of situation has changed or readiness for help.***   1. *Are you currently living in a high-risk neighborhood?* ***Yes\_\_\_\_ No \_\_\_\_*** 2. *Are there personal safety concerns in your household, including bodily safety of any type?* ***Yes\_\_\_\_No\_\_\_***   **NOTES:** | | |
|  | | |
| **Physical Activity** | | |
| ***1.*** *Do you want information about health benefits of regular physical activity for families?* ***Yes\_\_\_\_ No\_\_\_\_***  **NOTES:** | | |
|  | | |
| **Physical Health Services** | | |
| ***Refer to responses in Client Intake for 1 and 2***   1. *Do you have a Medical Home for your child(ren)?* ***Yes\_\_\_ No\_\_\_\_*** 2. *Do you have a Dental Home for your child(ren)?* ***Yes\_\_\_ No\_\_\_\_*** 3. *Do you need Medical or Dental Home information for anyone in family?* ***Yes\_\_\_ No\_\_\_\_*** 4. *Do you need Medical or Dental Insurance information for anyone in family?* ***Yes\_\_\_ No\_\_\_\_***   **NOTES:** | | |
|  | | |
| **Mental Health** – ***Normalize*** *mental health – All families have stress, many of us have depression, anxiety and some have suicidal thoughts. We all struggle with challenging child behaviors. Our program is here to support, not judge anyone.* | | |
| ***Refer to Client Intake for 1, but still ask in case of situation has changed or readiness for help.***   1. *Do you want information for challenging child behaviors?* ***Yes\_\_\_\_ No \_\_\_\_*** 2. *Do you want information for counseling support for depression, anxiety, self-harming or suicidal thoughts?* ***Yes\_\_\_\_ No \_\_\_\_***   ***If response is yes, is doctor aware? \_\_\_\_ They can be supportive.***  ***If currently having suicidal thoughts, DO NOT leave the parent alone, call CMH for them to get in immediately OR follow them to Emergency Room OR call 911.***    **NOTES:** | | |
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| **Food** | | |
| ***Refer to Client Intake (Food Assistance and WIC) and Customer Connection form***   1. *Do you want information for food assistance programs?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
|  | | |
| **Clothing** | | |
| 1. *Do you want information for providing clothing for your family?* ***Yes\_\_\_\_ No \_\_\_\_*** 2. *Do you want information for accessing doing laundry?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
|  | | |
| **Economic Stability** (6 questions) | | |
| ***Refer to Customer Connection Form for the following information, but still ask in case situation has changed or readiness for help.***  ***Do you want information about***   1. *Utilities Assistance information? (heating your home)* ***Yes\_\_\_\_ No \_\_\_\_*** 2. *Tax Preparation? (January-April)* ***Yes\_\_\_\_ No \_\_\_\_*** 3. *Budget Counseling Workshops?* ***Yes\_\_\_\_ No \_\_\_\_*** 4. *Bankruptcy Education Workshops?* ***Yes\_\_\_\_ No \_\_\_\_*** 5. *Foreclosure Prevention information? (can you pay rent or mortgage monthly)* ***Yes\_\_\_\_ No \_\_\_\_*** 6. *Homeownership Workshops?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
|  | | |
| **Transportation** | | |
| **1.**  *Do you want information for transportation resources if available in your area?* ***Yes\_\_\_\_ No \_\_\_\_***  **NOTES:** | | |
|  | | |
| **Substance Abuse –** *We are here to support, not judge.**Responses are confidential in our program.* | | |
| ***Refer to Client Intake for response, but still ask family in case situation has changed or readiness for help.***   1. *Do you want information about resources for helping anyone with drugs or alcohol addiction?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
| **2. POSITIVE PARENT-CHILD RELATIONSHIPS - Beginning with transitions to parenthood, parents and families develop warm relationships that nurture their child’s learning and development. (2 questions)** | | |
| **Parenting Skills/Nurturing Relationships** | | |
| ***Refer to Client Intake for responses in Diagnosed/Identified Developmental Delay/Severe or***  ***Challenging Behavior, but also ask in case of changes or readiness for help.***   1. Do you want information for ways to support positive family relationships? **Yes\_\_\_ No\_\_\_** 2. Do you want information for helping your child/family recognize and manage emotions and learn self-regulation skills? ***Yes\_\_\_ No\_\_\_\_***   **NOTES:** | | |
| 3. FAMILIES AS LIFELONG EDUCATORS – Parents and families observe, guide, promote, and participate in the everyday learning of their children at home, school, and in their communities. (3 Sections) | | |
| **School Readiness at home – *We promote building children’s school readiness skills beginning at birth!*** | | |
| 1. **Do you want information for supporting school activities skills at home, school community? Yes\_\_\_ NO\_\_\_\_**   **NOTES:** | | |
|  | | |
| **Mealtime as Education –** *For instance, mealtimes as a learning experience can include food prep, setting table, vocabulary, counting, one to one correspondence, small muscle development, making connections, modeling new experiences, manners, etc..* | | |
| 1. *Do you want information for learning opportunities for mealtimes?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
|  | | |
| **Promoting Primary Language** – *Are there other languages spoken in your home?* | | |
| ***Refer to Client Intake if other languages are spoken in home***   1. *Do you want**information about other languages spoken in the home supporting children’s learning and school readiness skills?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
| **4. FAMILIES AS LEARNERS – parents and families advance their own learning interests through education, training and other experiences that support their parenting, careers, and life goals. (3 questions)** | | |
| **Families as Learners** | | |
| 1. *Do you want information about children’s different personalities, learning styles and development?* ***Yes\_\_\_\_ No \_\_\_\_***   ***Refer to Client Intake for parent education***   1. *Do you want information for accessing adult high school education?* ***Yes\_\_\_\_ No \_\_\_\_*** 2. *Do you want information for adult college education or training programs?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
| **5. FAMILY ENGAGEMENT IN TRANSITIONS – Parents and families support and advocate for their child’s learning and development as they move to new learning environments, including EHS to HS, EHS/HS to other early learning environments, and HS to kindergarten through elementary school. (1 question)** | | |
| **Transitions** | | |
| 1. *Do you want information about helping your child prepare for transitions/moving to new experiences and school environments?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
| **6. FAMILY CONNECTIONS TO PEERS/COMMUNITY – Parents and families form connections with peers and mentors in formal or informal social networks that are supportive and/or educational and that enhance social well-being and community life. (1 question)** | | |
| **Social Networks** | | |
| 1. *Do you want information about creating social connections through community family events, local recreational areas or interests or volunteer opportunities?* ***Yes\_\_\_\_ No \_\_\_\_***   **NOTES:** | | |
| **7. FAMILIES AS ADVOCATES AND LEADERS – Parents and families participate in leadership development, decision-making, program policy development, or in community and state organizing activities to improve children’s development and learning experiences. (1 question)** | | |
| **Advocating for your child, family and community** | | |
| **1.**  *Do you want information about advocating for your child and their school experiences, for your family needs or community?* ***Yes\_\_\_\_ No \_\_\_\_***  **NOTES:** | | |

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**Tools and Talking Points to support families & build positive goal oriented relationships**

**Head Start Parent and Family Engagement Outcomes**

**□** Family Well-Being □ Positive Parent-Child Relationships □ Families as Lifelong Educators □ Families as Learners □ Family Engagement in Transitions □ Family Connections to Peers and Community □ Families as Advocates and Leaders

**Your Journey Together and Protective Factors**

**□ Parental Resilience** Helps us bounce back from tough situations; positive well-being also promotes our children’s resilience & well-being

**□ Social Connections** Having supportive family, friends & neighbors, helps us feel valued, reduces our stress, and builds our family resilience

**□ Knowledge of Parenting and Child Development ~ *Parents are their child’s primary nurturer and teacher!***We parent based on how we were parented and how we want to parent. Supporting our resilience and knowing what to expect of children’s development makes parenting easier. Recognizing children’s strengths and their needs helps their development and positive well-being.

**□ Concrete Support in Times of Need** We all need help! Social connections & supporting our own resilience makes it easier for us to ask for help.

**□ Social and Emotional Competency of Children ~** Collaborate with educators to support our children’s social and emotional skills. Focusing on children’s strengths, helping them to get along with others, and express themselves will help them be resilient, and successful in life.

**Active Listening Strategies**

**Be affirming and validating –** Affirm a family’s willingness and courage to their openness and sharing of personal information. Ex. – “That took a lot of courage to share that with me.” “Thank you for trusting me.” “I heard you say…is there more you’d like to share with me?”

**Show sensitivity and compassion –** Be empathic when a parent is emotional or vulnerable. When parents are sad, angry or confused, sometimes the best thing we can do is express our empathy rather than trying to fix. “That sounds really difficult.” “That does not sound easy to experience.”

**Ask clarifying questions –** Timing questions right shows that you are interested and engaged. “You seem to be saying….is that correct?” or “Thank you for sharing with me. What ways can I help?”

**Considerations and Reflections for supporting growth in Families**

* Ask a family…”What are your hopes and dreams?”
* “Have you thought about a goal you’d like to work on for your family?”
* Acknowledging to the family that everyone has stressors (even staff as individuals) helps them open up.
* Ask the family if they might have stressors creating barriers for them? Consider what stressors might be in the way for you (staff) in supporting the family?
* How am I feeling? / How might the family be feeling?
* Discover skills and strengths – families and yours!

**Tools for supporting staff in working with families**

* **FOT and Home Practices** (Gathering helpful information to better know and understand our families and their needs)
* **Your Journey Together:** Building Your Bounce; Adult Resiliency Survey & Resilience Building Plan; Caregiving Practices (through age 18) & Strategies
* **e-Deca:** Reports/Resources, Parent Handouts (Help – Available Documents)**; Conscious Discipline; Theraplay, Circle of Security**
* **FSW Credentialing:** Circle of Supports
* **“Using Your Past”** questions” (healthychildren.org)
* **Mindfulness** - Mind Yeti, MindUP,