



Department of
Children's Services

Quality Contacts

Facilitator Guide

TN Department of Children's Services | CHDE4043 | Ver. 23.04.03



- Training Preparation Information:

Prior to the day of training, an email should be sent to all participants reminding them the importance of being fully present and minimizing outside distractions during protected training time.

Inform participants that they will be asked to put their electronics away for the duration of the training so they may fully focus on the learning experience. It may be helpful to suggest participants make arrangements with teammates to cover for their cases/job duties while they are attending Quality Contacts training.

Ensure the printers in the offices where the training is being held are installed so the trainer can print case recordings if needed.

The email should also provide instructions for staff to bring printed case recordings from a single case including:

- Most recent FAST or CANS
- Face-to-face case recordings- 2 or 3 of the most recent notes.

Note: Ask JJ staff to bring case recordings from a probation case if possible. For supervisors who do not carry a caseload, they are asked to bring recordings of case conferences with their staff. Facilitators are asked to bring one or two CFTM Summaries.

This curriculum was developed by the Tennessee Department of Children's Services with federal funds. It is available to use in part or in whole free of charge. Suggested citation:

OTPD. (2023). Quality Contacts. Tennessee Department of Children's Services

Competencies

- Participants will understand the importance of quality contacts and documentation and how they relate to and impact safety, permanency, and well-being.
- Participants will be able to define and understand the characteristics of purposeful, quality contacts.
- Participants will understand the three phases of a quality contact.
- Participants will be aware of buzzwords and how they can impact documentation and concerted efforts.
- Participants will understand the importance of integrating assessments into case practice and understand global assessment.
- Participants will understand quality documentation includes information from formal and informal assessments.

Materials Checklist

Materials needed for this curriculum

- Buzzword Video
- Engaging Mother/Father Video
- Participant case recordings (2-3 recent recordings)
- Desk Reference Guides for all specialties
- Meaningful Visits with Children Any Age
- Participant Guide
 - Capacity Building Center's Defining Quality Contacts
 - Buzzword Tip Sheet
 - Policy 31.8 and Work Aid
 - Quality Contacts Casework Worksheet- Three Phases
 - Capacity Building Center's Reference Guide for Videos

Annotated Agenda

Agenda Item	Time	Learning Objectives	Activities
Lesson 1.1: Introduction and Working Agreement	15 min	<ul style="list-style-type: none"> • Introduction and Working Agreement 	
Lesson 1.2: The Importance of Quality Contacts	15 min	<ul style="list-style-type: none"> • Participants will understand the importance of quality contacts and documentation and how they relate to and impact safety, permanency, and well-being. 	<ul style="list-style-type: none"> •
Lesson 2.1: What is a Quality Contact?	90 min	<ul style="list-style-type: none"> • Participants will be able to define and understand the characteristics of purposeful, quality contacts. 	<ul style="list-style-type: none"> • Walkabout Activity
Lesson 2.2: Buzzwords	30 min	<ul style="list-style-type: none"> • Participants will be aware of buzzwords and how they can impact documentation and concerted efforts. • 	<ul style="list-style-type: none"> • Buzzword Video • Buzzword Activity
Lesson 2.3: Global Assessment across the Three Stages of a Quality Contact	90 min	<ul style="list-style-type: none"> • Participants will understand the three phases of a quality contact. • 	<ul style="list-style-type: none"> • Before, During, and After Activity • Engagement Videos
Lesson 3.1: Explaining and	75 min	<ul style="list-style-type: none"> • Participants will understand the importance of integrating assessments 	<ul style="list-style-type: none"> • Assessment Integration Activity

Integrating Assessments		<p>into case practice and understand global assessment.</p> <ul style="list-style-type: none">• Participants will understand quality documentation includes information from formal and informal assessments.	
Lesson 3.2	30 min	<ul style="list-style-type: none">•	Escape Game

Unit 1: Construction of a Quality Contact

Unit Time: 30 minutes

Learning Objectives:

- Participants will understand the importance of quality contacts and documentation and how they relate to and impact safety, permanency, and well-being.

Supporting Materials:

- Flipchart

Lesson 1.1: The Importance of Quality Contacts

Lesson Time: 15 minutes

Key Teaching Points / Instructions

- **FACILITATE** a discussion with the group around what “digging deeper” means in our work. We will be using that phrase throughout the work as a prompt for the participants to get more in depth in their interviews and documentation by seeking out behaviorally descriptive language and searching for underlying issues.
- **BEGIN** by asking the group why it is important to have quality contacts with children, families, and other case members? **CAPTURE** their responses on a flipchart. **ASK** if they can recall why, it is important to have good documentation? **EMPHASIZE** documentation supports our work and reflects our efforts.
- **STRESS** to participants because we are working with at-risk children and families, our top priority should be to provide quality case work. Helping families requires that we first take the time to fully understand their situation and that assessment is ongoing for the duration of the case.
- **SHARE** with participants quality contacts and good casework practice are defined in Federal and State policy guidelines. DCS policy regarding

documentation outlines case responsibilities for each program area.

- **STRESS** *"If it isn't in TFACTS, it didn't happen." ...but if it didn't happen, it will never make it in TFACTS.*
 - This is really about the quality of the contacts we have, not the documentation. The documentation is our work product that credits us with our efforts for court, for our supervisors and for case review. Our documentation can only be as good as the contact we had with the team members. Outcomes with families are dependent on how we help them navigate their time with us.
- **HIGHLIGHT** the policies below, drawing particular attention to Policy 31.8 Parent/Caregiver Engagement and Support and the Engagement and Support Work Aid. This is a policy that outlines expectations for caseworker contacts and documentation.
 - Policy 13.1 – Supervision of Youth Adjudicated Delinquent for Custodial and Non-Custodial Youth
 - Policy 14.7- CPS Investigation Track
 - Policy 14.16- CPS Case File Organization
 - Policy 14.26 – CPS Assessment Track
 - Policy 14.29 – Family Support Services Worker (FSSW) Responsibilities
 - Policy 16.8 – Responsibilities of Approved Foster Homes
 - Policy 16.38 – Face to Face Visitation with Dependent and Neglected Unruly Children in DCS Custody
 - Visitation Protocol Attachment
 - Visitation Plan Work Aid
 - Policy 31.14 – Documentation of TFACTS Case Recordings
 - Policy 31.8 – Parent/Caregiver Engagement and Support
 - Engagement and Support Work Aid
- **EXPLAIN** Policy 31.8 emphasizes the importance of engagement, support, and collaboration as key factors in ensuring Quality Contacts. We will explore these factors in more detail in our review of Quality Contact Casework Activities later

in the training.

- **ASK** participants to review this policy and the policies that relate to their program area after the training.
- **ASK** if there are any questions before discussing reasonable efforts.
- **INFORM** participants reasonable efforts are more than just giving families a resource guide, each family has individual needs.
- **REMIND** Children's Bureau defines CFSR as periodic reviews of state child welfare systems, to achieve three goals:
 - Ensure conformity with federal child welfare requirements
 - Determine what is actually happening to children and families as they are engaged in child welfare services
 - Assist states in helping children and families achieve positive outcomesAfter a CFSR is completed, states develop a Program Improvement Plan (PIP) to address areas in their child welfare services that need improvement.
- **EXPLAIN** it is basically the State's report card on how well we are meeting needs around Safety, Permanency, and Well-being. The Department is currently under a Program Improvement Plan (PIP) for the next two to three years.
- **SHARE** with participants CFSR looks for evidence of concerted efforts in documented casework activities and through interviews with all CFT (Child and Family Team) members to assess the quality of contacts. CFSR also looks for consistency and a shared vision/understanding of the family plan and its implementation.
- **REVIEW** the information on Concerted Efforts and **EXPLAIN** Concerted Efforts are similar to Reasonable Efforts (it is the language used by CFSR)
- **ASK** How do we demonstrate Concerted Efforts in practice? By documenting the following:
 - Our attempts to engage the child and family in completing recommended assessments and services on a monthly basis.
 - The informal assessments we made through conversations and observations with children, families, and foster parents on a monthly basis.
 - The different methods and various efforts we made to continue to engage

resistant children and families to complete assessments and services on a monthly basis.

- **STATE** other examples of documenting Concerted Efforts are outlined in Policy 31.8-Parent-Caregiver Engagement and Support. These are also known as Good Faith Efforts and are outlined in Policy 14.5-CPS: Locating the Child and Family and Foster Care Policy 16A under Diligent Search.
- **SHARE** Concerted Efforts are visible in interviews or documentation when **each month** the worker demonstrated:
 - Engagement of ALL the case participants in discussions (informal assessment) to gather global assessment information, which is used to guide formal assessments which are then integrated into case practice.
 - Took time to prepare all family and team members prior to CFTMs, FCRBs, court, and other important case events.
 - Engagement of parents in case planning that is intentionally guided by information gathered through assessment.
 - Follow-up with families using a variety of strategies to engage them in active participation in services, identifying barriers to success and overcoming obstacles.
 - Reinforcement of family strengths, accomplishments, and facilitation of lasting change.
- **TRANSITION** by saying we all want to provide excellent service to at-risk children and families. **ASK** participants what measure is used to determine how well we are doing this? The answer is CFSR.
- **INFORM** participants CFSR has highlighted quality contacts and documentation as an area for improvement for States, which is why we are here.
- **SHARE** this training has been developed as a first step in ensuring staff have the underpinning knowledge and skills to build on these existing strengths and improve the overall quality of our contacts, casework, and documentation.

Unit 2: Quality Contacts

Unit Time: 4 hours

Learning Objectives:

- Participants will be able to define and understand the characteristics of purposeful, quality contacts.
- Participants will understand the three phases of a quality contact.
- Participants will be aware of buzzwords and how they can impact documentation and concerted efforts.

Lesson 2.1: What is a Quality Contact?

Lesson Time: 90 minutes

Key Teaching Points / Instructions

- **REVIEW** the description of quality contacts:
Purposeful interactions between caseworkers and children, youth, parents, and resource parents that reflect engagement and contribute to assessment and case planning processes. These face-to-face interactions often are referred to as “home visits” or “caseworker visits.”
- **INFORM** participants quality contacts have specific components and characteristics.
 - As a cornerstone of casework practice, quality contacts reflect a focused exchange of ideas and information
 - These contacts should go beyond a “friendly visit to chat about how the children are doing” and represent a professional consultation.
- **ASK** participants, what would a focused exchange of ideas and information look like with a parent, caregiver, or child?
- **REITERATE** collaborative decision making with parents and caregivers requires us to gain a genuine understanding of the parent/caregiver’s perspective,

feelings, and concerns about the case planning process in order to support them in achieving case goals.

- **REMINDE** participants our assessment process begins with the very first contact and is then interwoven throughout the life of the case and our work with the family.
- **ASK** the group to start thinking of ways they are integrating assessments in their case work now. This will be revisited later in the material.
- **TRANSITION** to the next topic by sharing we will now look at the components and characteristics of quality contacts in more detail.
- **INFORM** participants CFSR between 2001- 2004 showed a correlation between the frequency and quality of caseworker visits and Safety, Permanency and Well-being outcomes for children. CFSR also demonstrated a relationship between caseworker visits and the assessment of harm, needs, and service provision and improvement in parental involvement in case planning. More frequent and quality visits can improve Safety, Permanency, and Well-being.
- **ASK** the group to think of ways quality case work impacts outcomes, assessments, and parental involvement.
- **FACILITATE** a brief discussion and thank participants for their responses.
- **INFORM** participants the Capacity Building Center for States has identified eight key characteristics of a quality contact. Briefly review these characteristics (this is not to be delivered in lecture format – it is an overview).
 - Intentional and Purposeful
 - Goal Directed
 - Culturally Responsive
 - Respectful
 - Unbiased
 - Tailored
 - Developmentally Appropriate
 - Reflective of Critical Thinking
- **REMINDE** the supervisors in the group to be mindful of opportunities to coach

staff around behaviors associated with these characteristics in their coaching sessions:

- **Intentional and Purposeful, Goal Directed and Tailored** connect to the Planning and Preparation referred to in the previous slide. By appropriately preparing for a contact, the caseworker can ensure the time spent with the family is **Intentional and Purposeful** and that discussions with the are **Tailored** to the family's specific situation and **Goal Directed** to enable the caseworker and the family to assess progress towards the case planning goals.
- **Culturally Responsive, Respectful and Unbiased** relate to engagement with the family. **Culturally Responsive** case managers take a family's culture, personal history and underlying issues into account and assist them without judgement and in an **unbiased** way. By being **Respectful**, case managers show commitment, communicate warmth and suspend critical judgement, key factors in creating a trusting relationship with family members. Empathy, genuineness and respect are core conditions of engagement.
- **Developmentally Appropriate** and **Reflective of Critical Thinking** relate to assessment, engagement and dialogue. Case managers will assess the individual needs of family members to ensure that goals and discussions are **Developmentally Appropriate**. Case managers will use **Critical Thinking** to objectively analyze and evaluate information and form a judgement and at the same time assess their own assumptions and biases.
- After reviewing the characteristics, **ASK** if anyone has any questions.
- **ACTIVITY:** Walkabout
 - Prior to starting this lesson, **WRITE** each Quality Contact characteristic on a separate flipchart and place around the room.
 - **INSTRUCT** participants to record specific casework behaviors associated with each characteristic on the corresponding flipchart.
 - **DEBRIEF** the activity by reading out the ideas written under each characteristic and facilitating a group discussion. **STATE** we will revisit these ideas later during our discussion around global assessment (the Who, What, and How).

- **REFER** participants to [Policy 31.8-Parent/Caregiver Engagement and Support](#), specifically section B on Engagement, Support and Collaboration. This policy provides direction on how concerted efforts can be achieved through engagement.
- **REVIEW** the [Parent Engagement and Support Work Aid](#)
- **ACTIVITY:** Divide participants into groups of 4-6 and provide each group with a piece of flipchart paper. Ask the groups to record behaviorally specific examples of how they have demonstrated each category listed on the Work Aid (Case Worker, Engagement, Support, and Collaboration).

Lesson 2.2: Buzzwords

Lesson Time: 60 minutes

Key Teaching Points / Instructions

- **TELL** the group we will begin the discussion around buzz words by watching a video.
- **SHOW** the video on buzzwords (4:30):
https://www.youtube.com/watch?v=ipCgPXp_Vmc&feature=youtu.be
- **DEBRIEF** the video and **REFER** participants to the Buzzwords Tip Sheet.
- **EXPLAIN** buzzwords come up first in our conversations, then in our documentation.
- **SHARE** during interactions with families, we have to explore and seek out the specifics of what is happening in order to globally assess the family's situation.
- **EMPHASIZE** the importance of "digging deeper." **CHALLENGE** participants when they hear a buzzword or are about to record one, to ask themselves, "What is truly being said here and how can it be documented so that everyone has a clear understanding?"
- **SHARE** with participants if they make a habit of avoiding buzzwords in their practice, they will be less likely to use them in case recordings.
- **EMPHASIZE** we want to ensure we are using the CANS and FAST to guide our

interactions with families to gather the information and implement into planning and service delivery. The CANS/FAST help us to identify areas the team can focus their efforts. **SHARE** participants will receive CANS/FAST training during weeks 8 and 12.

- **EXPLAIN** quality of contacts increases with the caseworker's effective use of interpersonal helping skills (particularly OARS) and DCS Core Values (genuineness, empathy, and respect).
- **SHARE** with participants sometimes we include buzzwords in our documentation because we used them during the contact with the family. If a parent states, four-year-old Johnny is "acting up", what does this statement mean and what does the behavior look like?
- **ASK** participants if they hear similar phrases and include them in documentation without gaining a deep understanding of what Johnny's "acting up" entails. Is he putting his feet on his brother while watching television in the morning or is he violently attacking his brother and causing physical injury? There is a significant difference between pestering a sibling and causing physical harm (and should be documented accordingly). The first scenario might mean the foster parent simply needs to vent, or maybe needs some support to get a break from Johnny. The second situation is significantly more concerning and more questions need to be asked to determine the appropriate intervention.
- **EMPHASIZE** the importance of helping families articulate their situation and functioning during conversations so they are painting the fullest picture. In times of crisis, communication becomes more challenging; therefore, it takes more effort on our part to elicit the details needed to learn what's really important during assessment conversations.
- **SHARE** with participants to get beyond buzzwords used in conversation, we can use the phrase, "Tell me more," to encourage elaboration. This phrase can be used multiple times to ensure we have adequate information for assessment and to complete quality documentation of the contact.
- **ASK** the participants to brainstorm techniques/strategies to avoid using buzzwords and to dig deeper with families. **RECORD** the answers on a flipchart labeled "Toolbox" and encourage participants to use these ideas in their work.

Trainer's Note: If you hear a buzzword used during upcoming activities or discussion, add it to the net.

- After the activity is completed, **ASK** participants how using buzzwords in documentation can affect reasonable / concerted efforts.
- **REMIN**D the group increased use of Interpersonal Helping Skills and OARS increases the likelihood of a quality contact while use of buzzwords decreases the likelihood of a quality contact. This limits our global assessment around Safety, Permanency, and Well-being.

Lesson 2.3: Global Assessment across the Three Phases of Quality Contacts

Lesson Time: 90 minutes

Key Teaching Points / Instructions

- **REVIEW** the different casework activities for each phase:
 - Before
 - Preparation and planning tailored to the specific circumstances of the child or youth and family
 - During
 - Assessment of: Safety, risk, permanency, and well-being & progress toward individual case goals
 - Engagement of children, youth, parents, and resource parents by the caseworker through use of empathy, genuineness, and respect both individually and as a team.
 - Dialogue that values the youth and parent voice and promotes reflection on strengths, needs, and concerns

- After
 - Follow-up on tasks or concerns discussed previously (this may include difficult conversations about why certain things did not happen as planned)
 - Decision-making and problem solving to address needs and move the case plan forward
 - Documentation to support monitoring and follow-up
- **REFER** participants to the Capacity Building Center's Defining Quality Contacts specifically to the section about the Three Phases.
- **REFER** to the slide The Who, How and What of Monthly Quality Contacts and **DISTRIBUTE** the Desk Reference Guide associated with the participant's program area. Discuss the purpose of the desk reference guides.
- **REMIND** participants to the document Meaningful Visits with Children of Any Age and briefly review the benefits of utilizing this document to support quality contacts.
- **REVIEW** the three casework activities that workers should complete before a visit:
 - Schedule
 - Gather information and review
 - Plan and prepare
- **REFER** participants to the worksheet where each of these activities is broken down into more detail. **HIGHLIGHT** key tasks on the worksheet and relate them to the characteristics and impact of Quality Contacts discussed earlier.
- **ACTIVITY:** The Three Phases
 - **REFER** participants to the Quality Contact Casework Worksheet
 - **SHARE** with participants this is not an exhaustive list but provides a framework and suggestions for planning casework activities in each phase of a Quality Contact.
 - **ASK** participants to quickly review these. **ASK** participants to highlight the information which really stands out to them. **ALLOW** 5-7 minutes to

complete.

- **REFER** participants to Reference Guide for Videos and ask them to review the case history **INSTRUCT** the group to use the CBC handouts to think through this case and develop a plan for “Before” Kara’s next visit. **ALLOW** 7 minutes to complete.
- **DEBRIEF** by asking the participants to share WHO on the case they are planning to visit. WHAT information should Kara intend to gather during that visit for the global assessment? HOW can she ensure that she gathers this information at the visit? Record responses on a Flipchart.
- **ENSURE** the following points are mentioned:
 - WHAT: Addressing the Educational/Medical/Social/Emotional Needs
 - WHAT: Address safety/risk
 - WHAT: Addressing the motivation of the family
 - WHAT: Discovering the effectiveness of services
 - HOW: Use the skilled interviewing questions
 - HOW: FAST/CANS completion with the family
- **INSTRUCT** participants to review the “During” the visit portion of the Quality Contact Casework Worksheet
- **Handout:** Global Assessment: Engagement Video and ask them to record their observations in the boxes.
- **SHOW** the “Engaging Fathers” clip:
<https://www.youtube.com/watch?v=BalO5J30rTQ&feature=youtu.be>
- **DEBRIEF** the “Engaging Fathers” video using the following questions:
 - What did Kara do or say that helped her achieve the purpose of her visit?
 - What seems to be the most important issue for Tony and what follow-up steps will Kara need to take?
 - What family strengths can you identify that will help Tony and his wife make the behavioral changes that can create a safe environment for the child and youth?
 - What professional contact skills did you see that you can use in your practice?

- **SHOW** the “Engaging Mothers” clip: <https://www.youtube.com/watch?v=R0-61Cu3ylk&feature=youtu.be>
- **DEBRIEF** the “Engaging Mothers” video using the following questions:
 - What professional contact skills did Kara do or say that helped her achieve the purpose of her visit?
 - What seem to be the most important issues for Melanie and what follow-up steps will Kara need to take?
 - What family strengths can you identify that will help Melanie make the behavioral changes that can create a safe environment for the child and youth?
 - What professional contact skills did you see that you can use in your practice?
- **ASK** participants to review the “After” the visit portion of the Quality Contact Casework Worksheet and ask the following questions.
 - WHO in their visit should be highlighted in the supervisor debrief?
 - WHAT critical assessment information needs to be emphasized in the assessment?
 - HOW do we use this assessment information to inform our global assessment and drive our case planning?
- **STATE** as with any professional skill, mastery of Quality Contacts will be reflected not just in practice but also in documentation. CFSR is conducted through documentation reviews as well as interviews with members of the Child and Family Team. Our goal is to highlight and provide evidence of our skills and efforts with each family DCS serves.
- **REMIND** participants of the following points:
 - Avoid buzzwords – use behavioral descriptors.
 - Drawing conclusions about underlying causes, remember to balance our own assessments and how our biases can impact our conclusions.
 - Go beyond the presenting issues and ensure all areas are covered (Global Assessment).

- Connect information gathered to decisions made about services and next steps. Outline this either formally in a CFTM, on a Permanency Plan or IPA, or informally in case recordings.
- Describe how you support families to actively participating in services, what you hope the family gains from these services, and engage them in articulating the expected outcomes at case closure.
- Case workers are to be visible and active participants in their case recordings. We want to see how you support, engage, guide, team, coach, plan, redirect, track and adjust with families. How you implement the Practice Wheel is essential to Quality Contacts and should therefore be reflected in case recordings.

Unit 3: Global Assessment

Unit Time: 1.5 hours

Learning Objectives:

- Participants will understand the importance of integrating assessments into case practice and understand global assessments.
- Participants will demonstrate the ability to discuss assessments with family through practice sessions.
- Participants will understand quality documentation includes information from formal and informal assessments.

Supporting Materials:

- CANS/FAST
- Case Recordings
- Index Card for each participant

Lesson 3.1: Explaining and Integrating Assessments

Lesson Time: 75 minutes

Key Teaching Points / Instructions

- **STATE** in order to engage clients during global assessment; we have to set the stage by explaining to them why we want to know what we want to know. If we are involved with a family because a youth is missing too much school and some of our questions during a home visit are about seemingly unrelated topics, our questions might seem unnecessary and intrusive. Explaining our assessment process and purpose helps set the stage for an open dialogue.
- **FACILITATE** a discussion around the following questions:
 - What do you tell families when you sit down to interview them?

- What are your strategies in explaining your role within the Child and Family Team and getting the family to open up?
- **EXPLAIN** to the group we should always share our purpose in asking questions with the family. For example, a caseworker may say, "I am going to ask you a bunch of questions about a lot of topics to learn more about your family. I am doing this because I want to better understand how I can help you based on what's happening with your family. It's important that I get enough details so I don't make incorrect assumptions about your situation or the family's needs."
- **SHARE** A Guide for Using the FAST with Child, Caregivers and Their Families: A Tip Sheet and A Guide for Using the CANS with Child, Caregivers and Their Families: A Tip Sheet from Google classroom. These documents will be shared in CANS/FAST training during training week 8 and 12; however, it is important to be able to engage families about assessment and help them understand the function of the CANS/FAST that we use at DCS.
- **EXPLAIN** how they can help families understand the function of the CANS/FAST by using the following suggestions:
 - "After we talk through all of my questions, I'm going to use the information to complete the Child and Adolescents Needs and Strengths (CANS)/ Family Advocacy Support Tool (FAST). This will tell us the areas that we should consider focusing on. "
 - "It will also provide recommendations for level of services for you and your child (when talking to parents). This will give us an indication of what types of services and supports will maximize safety for your children and for your family to come back together successfully."
- **REMIND** participants assessment happens during every stage of the Practice Wheel and that assessment is not an isolated event. This is the functional Practice Wheel!
- **TRANSITION** to the discussion around explaining assessment. **ASK** participants, "Why is assessment so difficult?" Discussion should include the following points:
 - It is intrusive and can be uncomfortable
 - It requires attention to subtle verbal and non-verbal cues
 - Trust must be established to elicit needed information

- It requires intuition and insight on the part of the assessor
- Staff experiencing lack of time, burnout, or even just a long, stressful day may miss details or unconsciously not dig deep enough
- Sometimes we get caught up in the next question we want to ask and don't listen to the details that are being provided
- We accept **buzzwords*** and don't ask for more details
- How we ask questions can impact the answers we receive
- **ASK** the group, "Why is assessment so important?" Include the following points in the discussion:
 - Engages the individual in the process
 - It brings both primary and underlying issues to the surface
 - Helps the family think through what's happened and how they got here
 - Helps give context to what is happening
 - Informs what strategies might work best
 - Establishes a professional helping relationship
- **REMIND** participants there are two types of assessment: formal and informal. Briefly **REVIEW** examples of each:
 - Informal:
 - Observations
 - Interviews/conversations
 - Review of summary or progress reports, records, etc.
 - Shared conclusions
 - Formal:
 - CANS/FAST
 - EPSDT
 - Psychological (ex: MMPI)
 - Behavioral
 - Parenting

- Educational
- **STATE** informal assessment activities are often used to inform formal assessment. Informal assessment occurs during every interaction and is what is used to inform the formal assessment. In turn, formal assessment is used to drive planning and decisions regarding services within the Child and Family Team.
- **EXPLAIN** to participants the following equation sums up the content of this training: Global Assessment + Assessment Integration = Quality Outcomes for Children and Families.
- **STATE** global assessment is the gathering of information regarding all aspects of a family's functioning in order to fully understand which interventions and services will be most effective.
- **EXPLAIN** Assessment Integration refers to the intentional use of both formal and informal assessments to inform services, plans, and make decisions about next steps.
- **SHARE** Integrated Assessment means there is a connection between the assessment and the rest of the activities occurring in the case:
 - Conversations with families that gather information to draw conclusions about functioning
 - Intentional discussion in CFTMs and connection to case plan (permanency plan or IPA) action steps, services selected, and decision making
 - Re-assessment that demonstrates comparison to past assessments and reflect the changes in family functioning observed
 - When things aren't going well, assessment information is considered to determine different next steps in case planning
 - Used in case conferencing supervision meeting to guide discussion to ensure global assessment and integrated assessment throughout the case
 - Used in testimony in court to demonstrate objective assessment and structured case decision making
- **DISCUSS** Context for Global Assessment.
 - Referring Concerns: When we receive a case, we are presented with the

referring concern and initial reason for our involvement.

- Surface Issues: As we begin our conversations with families, we quickly start to see all the surface issues that present barriers to the safety, permanency and well-being of children.
- Underlying Issues: After we learn about the surface issues, we ask questions to learn more about the underlying issues. This is often a slow process because it takes time to build enough trust with clients and trust is crucial in clients sharing their story behind surface issues like substance abuse, mental illness, unkempt homes, family conflict, etc. Understanding underlying issues is ESSENTIAL to helping families make lasting change. It helps us know which services are a best fit, and when services are not working, it provides insight as to how to make needed changes (tracking and adjusting) to get the desired result.
- Global Assessment: However, there is always more to the family story than the referring concerns. Global assessment includes talking to families about the other life domains. For example, our involvement might be due to family violence, but we should also assess functioning around school, friendships, neighbors, physical health, finances, etc. We should seek to learn about all areas covered by the CANS/FAST in order to fully understand how to best leverage family strengths to overcome concerns.
- **ASK** participants to think back to the parent engagement videos we watched earlier in the day. Consider the following:
 - What were some of the underlying issues we identified?
 - How do the underlying needs impacting the reason we are involved?
 - What were the family's strengths?
 - How can the strengths help to address the risks?
- **STATE** the answers to the above questions along with other information we gather helps us to globally assess the family.
- **EXPLAIN** By digging deep enough, we are more likely to help families create long-term, lasting changes. The parents are more likely to make changes if in addition to recognizing the needs, they see the potential for a positive outcome. Through global assessment, we can help families see the benefits

of change.

- **ASK** the group how they can ensure they are conducting global assessment in their case work. Include the following points in the discussion:
 - Take time to build a professional (trusting) helping relationship
 - Show genuineness, empathy, and respect
 - Be curious – ask lots of questions
 - Don't shy away from hard to ask questions/topics
 - Ask open questions or on similar topics in a variety of ways. This point is particularly important because we need specifics to integrate assessment into our work. Example:

A caseworker completing the initial CANS justified a depression score with the narrative, "Child is diagnosed with Depression." While this information is valuable, we need to gather additional information from multiple sources as to how the child is affected by Depression (severity of symptoms, current feelings, behaviors, etc.) in order to understand the potential impact on functioning and need for intervention. This complete picture of the child's Depression then drives services (such as the best type of counseling, need for psychotropic medications, etc.). In addition, this behaviorally specific information helps the COE Assessment Consultant get a clear picture of what is happening with the child and therefore provide guidance. This example also easily translates to conversations with supervisors in case conferencing.

- "Tell me more..." 5 times! (get past the buzzwords)
- Ask multiple family/team members the same questions
- Use it as a collaborative process to gain buy-in and bring the team together
- Offer the client autonomy in decision making where possible and when it's safe to do so
- Use the CANS/FAST items as a guide to ensure you are not overlooking any domains
- **INSTRUCT** the group to use the Desk Reference Guide as a tool to help identify gaps in their information and to **IDENTIFY** how they will ensure the

Who, How, and What is captured. This will include follow-up questions and next steps for the case.

- **ASK** participants to identify and write down their small test of change. Questions that could encourage thoughts include:
 - What opportunities for growth can you identify for yourself in regards to global assessment and assessment integration?
 - How can you go about further incorporating these concepts into your work?
 - What can you do to enhance the quality of your contacts?
 - What resources and support do you need?
 - What can you do to immediately improve your practice?
 - How will you know it has made a difference?

Trainer Resources

Desk Reference Guides for all specialties

Buzzword Tip Sheet

Meaningful Visits with Children of Any Age (email the hyperlink)

Policy 31.8 and Work Aid

Capacity Building Center's Three Phases Handout

Quality Casework Activities Handout

Global Assessment: Engagement Video handout

Eight Characteristics of a Quality Contact Walkabout Activity

Possible Responses

Intentional and Purposeful

- Plan prior to your contact and have an agenda for the visit
- Prepare the family before a CFTM
- Be mindful of time within child and family schedule
- Have a mutual goal for each interaction with the family
- Review case history

Culturally Responsive

- Ask questions about how they celebrate holidays and how they are incorporating this into their home
- Document how the family practices (including foster) culture: holidays, food, traditions
- Ask the family about their family and their own culture
- Ask about family routine or lack thereof

Tailored

- Utilize the family's needs and strengths as identified by them
- Review next steps from previous contact before visit
- Utilize assessment information from CANS and FAST to drive family plan

Reflective of Critical Thinking

- Outside of box action steps-such as using a neighbor or other family member as a mentor instead of just sending to parenting class
- Seek supervision and other's opinion
- Caseworker utilizes assessment skills thoughtfully to plan, assess, and to take next steps
- Check in with the team members about their thinking

Unbiased

- Listen and try to understand without interjecting our own opinions.
- Check in with myself before and after each visit
- Be aware of your own bias
- Ask open ended questions
- Actively listen to the family story
- Use empathy to develop understanding of the family's perspective
- Make your thoughts visible to others (utilizing supervisors)

Developmentally Appropriate

- Gather info from family by observations and interviews to ensure their needs are being met
- Read any mental health assessments and use to guide your engagement with family
- Ensure plan is relevant to age/needs of children and other needs of family members
- Utilize CANS/FAST

Goal Directed

- Ask family specific questions around the perm plan and progress
- Take perm plan to each visit to monitor/assess progress
- Connect conversations to the family's specific goals
- At each contact, check in with the family about their goals and action steps
- Address barriers to achieving goals and how to overcome them
- Use assessments during visits to ensure families voices are heard and incorporated into plans
- Include personal goals of caregivers and children/youth

Respectful

- Listen openly to their perspective and be non-judgmental
- Address family using Mr., Ms., Mrs., etc.
- Asking the family for permission when appropriate
- Treat the family like they are the expert
- Be respectful of family's time (when do they want to meet, return phone calls, etc).

Balloon Question/Answer Key

1. Name two of the eight characteristics of a Quality Contact
 - a. Intentional and Purposeful
 - b. Culturally Responsive
 - c. Tailored
 - d. Reflective of Critical Thinking
 - e. Unbiased
 - f. Developmentally Appropriate
 - g. Goal Directed
 - h. Respectful
2. Name a culturally specific service
 - i. Spanish fluent counseling
 - ii. Catholic faith based parenting classes
 - iii. Ect...
3. "Before" the visit, gather and review _____.

- a. Schedule
- b. Gather information and review
- c. Plan and prepare

4. What are two "Before" visit activities

- a. Align visit frequency with national and state requirements and case circumstances.
- b. Consider the schedules of parents, resource parents, and youth/young adults in identifying the visit time.
- c. Consider the length and location of visits to support open and honest conversations.
- d. Gather and review case documents, service plans, and related data and information. ...
- e. Review documentation of the last contact to ensure follow-up was completed. ...
- f. Make any collateral contacts with key individuals in the case (e.g., therapist, treatment provider, doctor, school personnel) to assess progress and concerns.
- g. Set a clear purpose and agenda for the visit. ...
- h. Identify issues and concerns to explore (with room for adaptation during the visit). ...
- i. Consider and plan for worker safety.

5. Name three commonly used Buzzwords...What can you replace them with

- a. Appropriate
- b. Dirty
- c. Nasty
- d. High

6. What are three "During" the visit activities

- a. Engage and collaborate ...
- b. Review the objectives and agenda for the visit and incorporate input from the child, youth, parent, and/or resource parent into the agenda. ...
- c. Demonstrate genuineness, empathy, and respect for each family member. ...
- d. Suspend biases and avoid judgments. ...
- e. Make sure children, youth, parents, and resource parents feel comfortable discussing challenges and needs. ...

- f. Talk with adults and children or youth separately to allow for privacy in sharing concerns. ...
 - g. Communicate support and partnership. ...
 - h. Listen!
- 7. Explore _____ of the child, youth and family
 - a. Explore well-being of the child or youth and family.
- 8. Provide 3 examples of open ended questions that elicit information regarding social supports
 - a. Who do you call when you need to borrow 5 bucks?
 - b. When you are stressed who do you call to talk?
 - c. If you had to go into the hospital who would you ask to take care of your kids?
- 9. During the visit you Engage and _____
 - a. Engage and collaborate
- 10. Suspend biases and _____ judgements
 - a. Suspend biases and avoid judgments.
- 11. Quality contacts are _____ and purposeful
 - a. Quality contacts are . . . Purposeful interactions between caseworkers and children, youth, parents, and resource parents that reflect engagement and contribute to assessment and case planning processes. These face-to-face interactions often are referred to as “home visits” or “caseworker visits.”
- 12. Focus on the plan, explore progress, and make _____
 - a. Focus on the case plan, explore progress, and make adjustments
- 13. Provide 3 examples of open ended questions that elicit information regarding mental health needs
 - a. Have you ever seen a doctor about your feelings or emotions?
 - b. How often do you feel sad or unable to get out of bed?
 - c. How do you handle stress?
- 14. How do we ensure unbiased case decisions?
 - a. Make our decisions visible and ask for feedback from supervisors or peers
- 15. Name two case specific tasks that gather assessment information.
 - a. Interviews
 - b. Reviewing records

- c. Asking the family story
16. Name three "After" the visit activities.
- a. Document
 - b. Debrief
 - c. Follow up
17. Provide 3 examples of an open ended questions that elicits information regarding medical needs
- a. Any open ended questions here
18. What are 3 possible family situations that require a developmentally agile approach.
- a. Mother is low functioning
 - b. Parent has a learning disability
 - c. Parent or caregiver is illiterate
19. Name two of the eight characteristics of a Quality Contact
- a. See question 1
20. Name a culturally specific service.
21. See question #2

References

Office of Professional Development 2018 Quality Contacts Webinar Series