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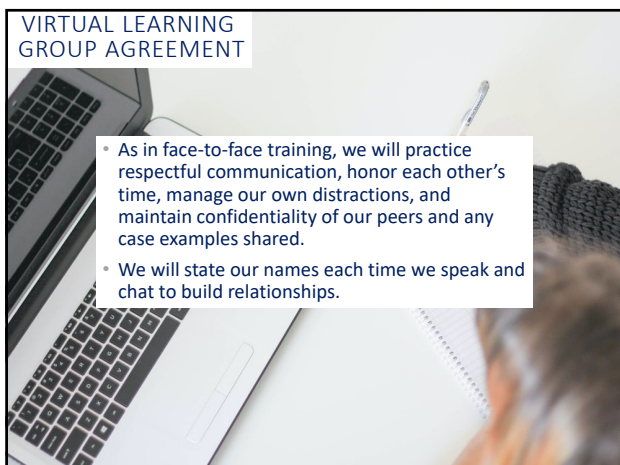
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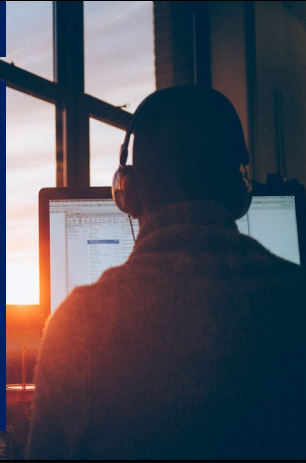
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### VIRTUAL LEARNING GROUP AGREEMENT

- We will ask for clarification even more than we normally do. With virtual learning, communication can be challenging. Not being able to talk things through face-to-face leaves room for misunderstanding. If one of us doesn't understand, we'll ask a clarifying question.
- We will spell out acronyms and avoid shorthand to ensure cohesive collaboration.



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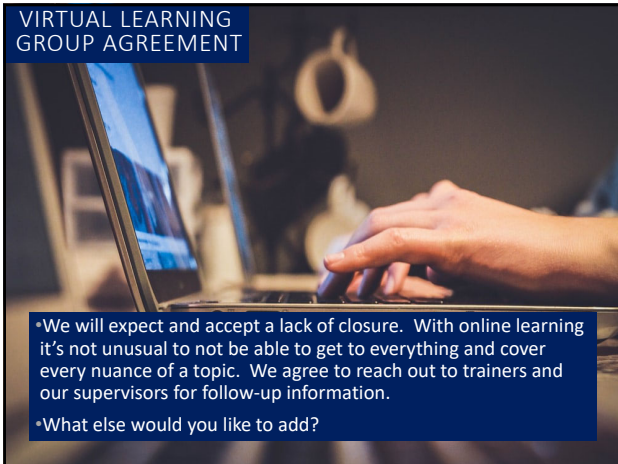
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### VIRTUAL LEARNING GROUP AGREEMENT

- We will expect and accept a lack of closure. With online learning it's not unusual to not be able to get to everything and cover every nuance of a topic. We agree to reach out to trainers and our supervisors for follow-up information.
- What else would you like to add?



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### Participants' Introductions

- Name
- Agency
- Position



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Child welfare assessment is like  
\_\_\_\_\_ because \_\_\_\_\_.

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## Framework

- Respects families' strengths
- Involves them in determining necessary changes to keep children safe



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## Handouts A-1 and A-2: Competencies and Objectives



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## Competencies

- Understand the need for thorough and accurate assessments in child welfare and identify key decision points.
- Identify factors that contribute to maltreatment and promote safety, and apply critical thinking within the assessment process.
- Recognize assessment techniques that promote family involvement and engage them in the change process.
- Develop the ability to assess immediate child safety and future risk of abuse or neglect.
- Identify family strengths and needs and avoid bias and errors in the assessment process.

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Your doctor says that you need to lose weight. You turn to a friend who is very physically fit for help. The friend creates a daily exercise schedule for you that involves getting up at 5 a.m. and provides you with a diet plan which requires you to essentially cut sugar, caffeine, red meats, bread, and dairy products from your diet.

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Why were some of you reluctant to go along with these plans?

In these situations, what could have been done differently to motivate you?



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### Medical Model

- Diagnostic
- Prescriptive
- Belief that client needs our expertise
- Success measured by service completion



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**Family Centered Practice Model**

- cooperative partnership
- uses family's resources
- workers are "Agents of Change" instead of experts

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Handout B-1:  
**Family Centered Assessment**

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**Family Centered Values**

- All families have strengths
- Families are experts on themselves
- Families deserve to be treated with dignity and respect
- Families can make well-informed decisions about keeping their children safe when supported
- Outcomes improve when families are involved in decision-making

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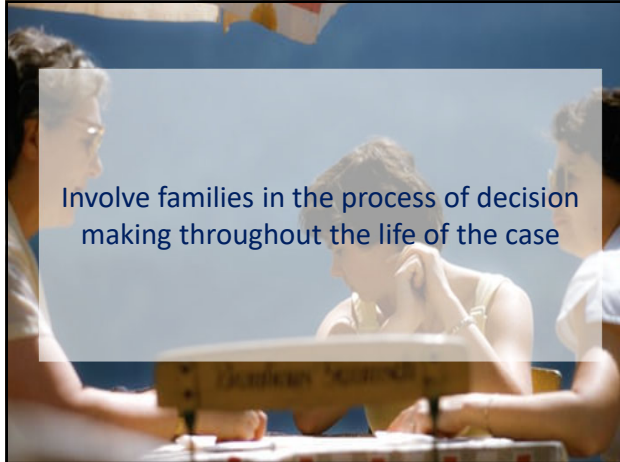
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Important aspect of  
accurate assessment  
involves  
understanding the  
family in its own  
context

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### Cultural Competence

- Evaluating the use/misuse of power
- Understanding the effects of society's laws and policies
- Challenging aspects of the child welfare system that penalize families for their status
- Ending discriminatory practices and engaging families to create a safe, supportive environment for children

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### Cultural Humility

- Allow families to be experts of selves
- Allow families to share who they are
- Find out how families culturally define selves
  - make room for families to share
  - listen actively
  - reserve judgment

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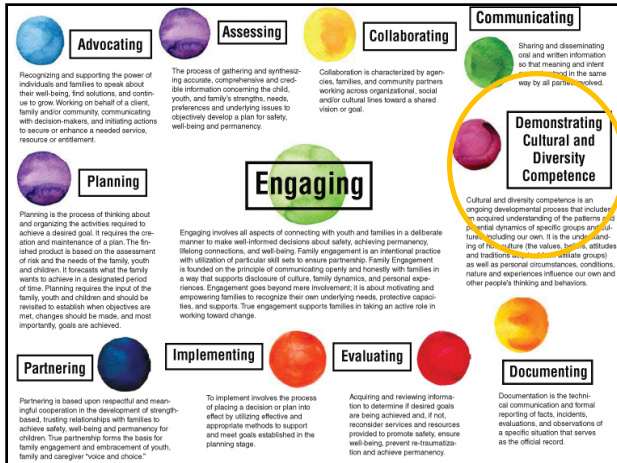
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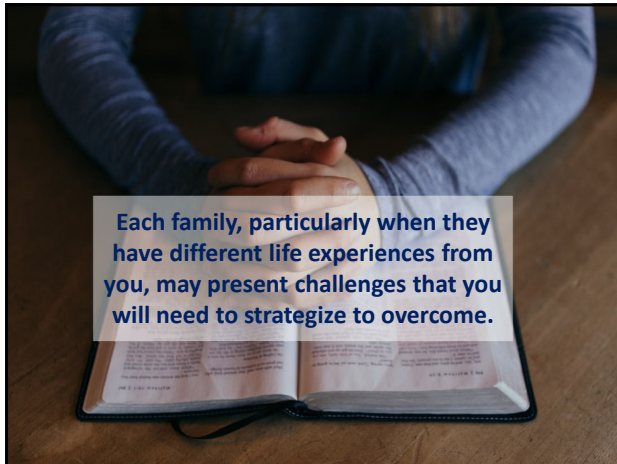
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### What challenges might occur because of this person's cultural perception of you as a representative of the LDSS/government agency?

- How can you deal with their reactions?
- What helps FSS overcome stereotypes of the LDSS?
- What adds to negative perceptions?

### What aspect of their culture would you have to take into consideration to engage them in the assessment process?

- How do these factors impact your assessment?
- What helps FSS to overcome their stereotypes/biases of others?
- What ways can you engage families in open discussions about culture?

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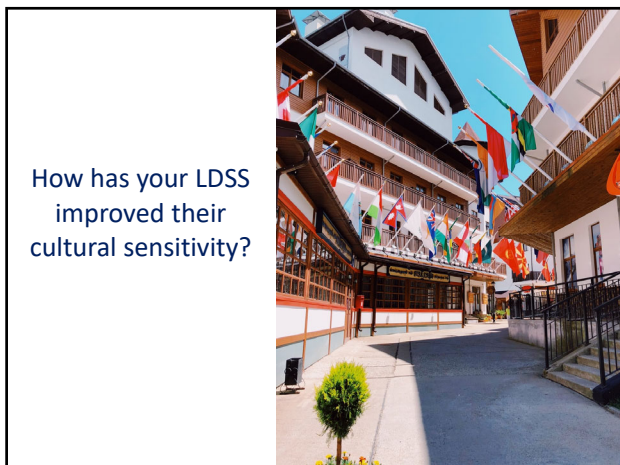
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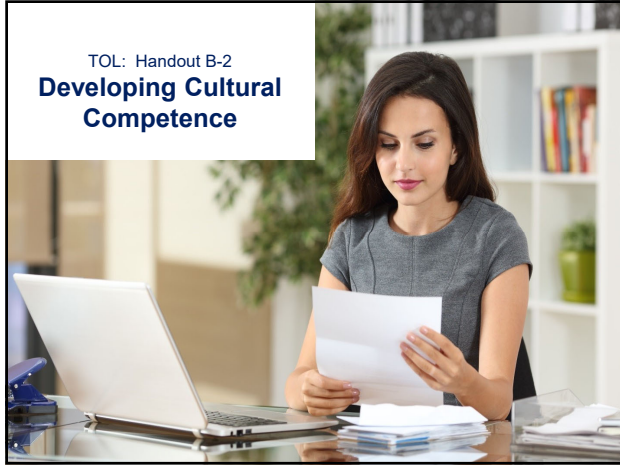
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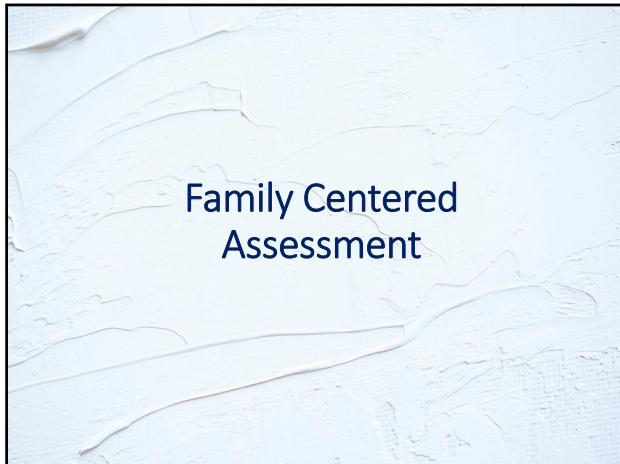
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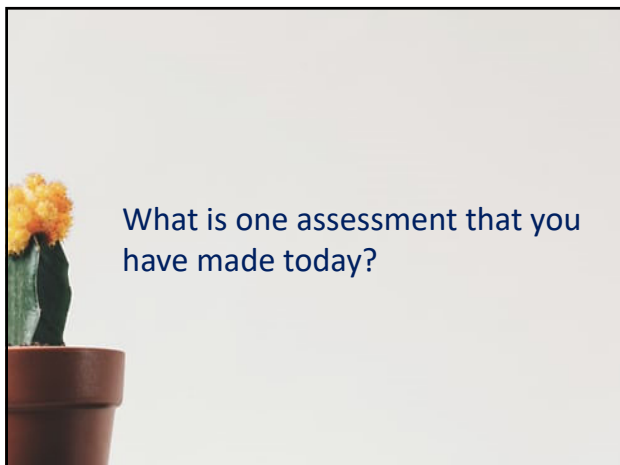
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### What is Assessment?

- Cornerstone of family-centered child welfare practice
- Process of gathering information, analyzing it, interpreting it, and synthesizing it into conclusions for a predetermined purpose
- Can be very simple or very complex
- Must be based on thorough, accurate, relevant and current information

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What factors make assessment complicated?

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### Factors That Make Assessment Difficult

- Large amount of data to be gathered and assimilated
- Information may be conflicting or contradictory
- Critical information is not available — it doesn't exist, or it is hidden from us
- We may lack the knowledge to recognize or understand the factors and situations we are supposed to be assessing
- We may lack skills in information gathering, critical thinking, or complex problem solving
- We don't know how or where to find essential information
- Limited time to gather a large amount of information
- Organizing and accurately interpreting information once we've gathered it
- Misunderstandings in interpreting the meaning of the information we collect due to cultural or other differences

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### Dangers of Deficient Assessment

Every decision or judgment we make must be based on thorough, accurate, relevant, and current information.

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### Deficient Assessment

- Children can be seriously hurt
- Families can be subjected to unnecessary traumatic interventions, including separation
- Family needs may remain unmet
- Significant time and scant resources may be wasted
- Problems may not be resolved

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Without thorough, relevant, and accurate assessment, we are likely to draw conclusions that do not even remotely resemble what's really happening in the family.

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### Seven Steps of Critical Thinking in the Assessment Process

Critical thinking skills form the basis of all assessment.

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### Seven Steps of the Critical Thinking Process: Activity

- Please take a few minutes to review the next screen.
- **What would be your first step, second step, etc.?**
- List the steps numerically in the correct order in the Questions box. (For example; 3,6,1,...)

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### Seven Steps of the Critical Thinking Process: **Out of Order**

1. Gather Information
2. Synthesize Information to Draw Conclusions
3. Make and Test Hypotheses
4. Identify Relevant Assessment Criteria or Questions
5. Determining the Purpose
6. Analyze Information
7. Make A Well Informed Decision

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## Seven Steps of the Critical Thinking Process: In Order

1. Determine the Purpose
2. Identify Relevant Assessment Criteria or Questions
3. Gather Information
4. Analyze Information
5. Make and Test Hypotheses
6. Synthesize Information to Draw Conclusions
7. Make a Well-Informed Decision

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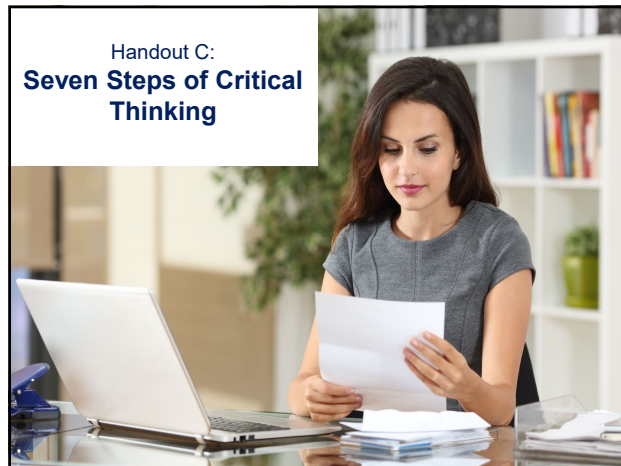
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Seven Steps of  
Critical Thinking  
in the Assessment  
Process

**Step 1**

Determine the Purpose

Know why we are completing the  
assessment:

*What are the critical questions to be  
answered and decisions to be made?*

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Seven Steps of Critical Thinking in the Assessment Process

**Step 2**

Identify Relevant Assessment Criteria or Questions



Determine the most pertinent and relevant criteria to be assessed

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Seven Steps of Critical Thinking in the Assessment Process

**Step 3**

Gather Information



Implement a variety of information-gathering strategies

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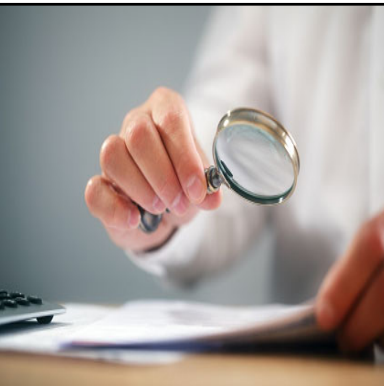
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Seven Steps of Critical Thinking in the Assessment Process

**Step 4**

Analyze Information



Analyze the information and formulate a hypotheses

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Seven Steps of  
Critical Thinking  
in the Assessment  
Process

**Step 5**

Make and  
test  
hypotheses



Test hypotheses to assure accuracy and consistency

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Seven Steps of  
Critical Thinking  
in the Assessment  
Process

**Step 6**

Synthesize  
information to draw  
conclusions



Synthesize information so it is congruent and allows for accurate conclusions

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Seven Steps of  
Critical Thinking  
in the Assessment  
Process

**Step 7**

Make a well-informed  
decision



Use conclusions to make well-informed decisions that achieve the desired income

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Becoming proficient at assessment requires  
considerable training,  
feedback, and practice



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Break Time



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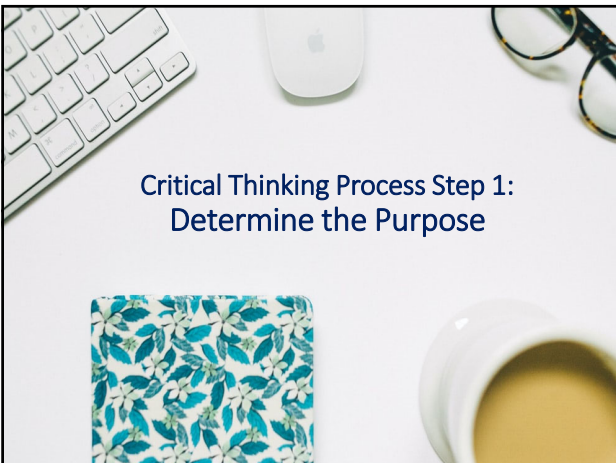
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Critical Thinking Process Step 1:  
Determine the Purpose



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## Decision-Making Points

- Point of Referral – Screening Assessment
- Child and Adolescent Needs and Strengths (CANS) Assessment
- Plan for Placement
- Reunification
- Safety, and Risk Assessment
- Others

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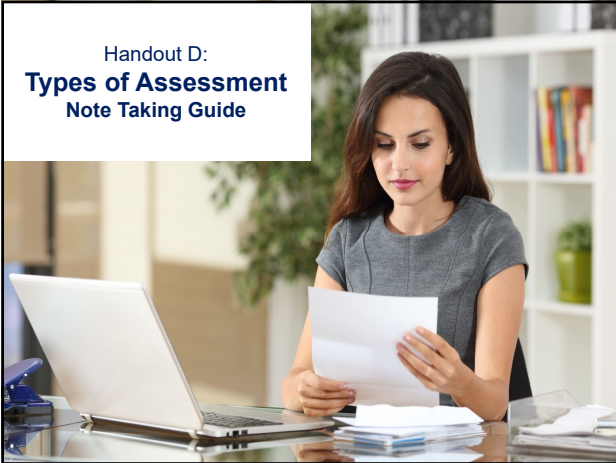
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### Handout D: Types of Assessment Note Taking Guide



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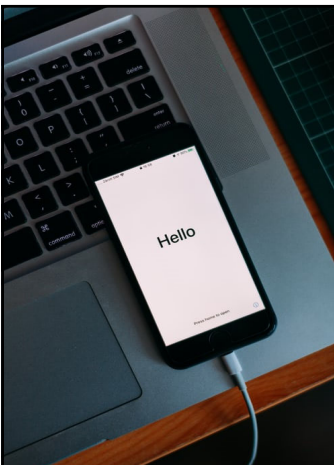
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## Welcome

CWS1061W:  
Family-Centered  
Assessment in Child  
Welfare Webinar



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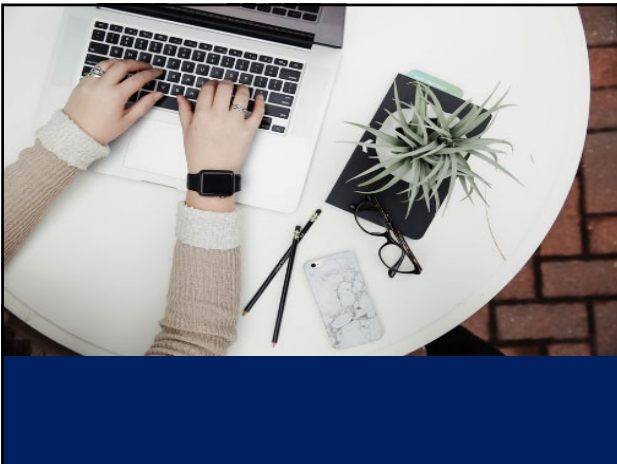
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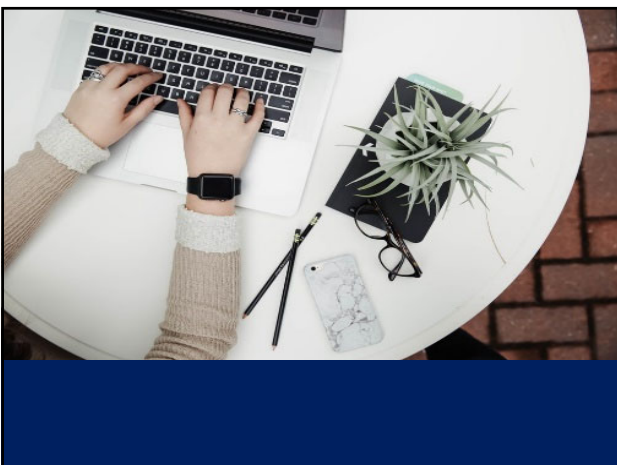
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### Other Types of Assessments

- Prospective Foster/Adoptive Families
- Specific Needs of Family (i.e. Mental Health, Domestic Violence, Substance Abuse)
- Diagnostic (i.e. Developmental Delays)
- Ongoing Case Assessment/Investigation for new referrals on open
- Court Ordered Home Evaluations

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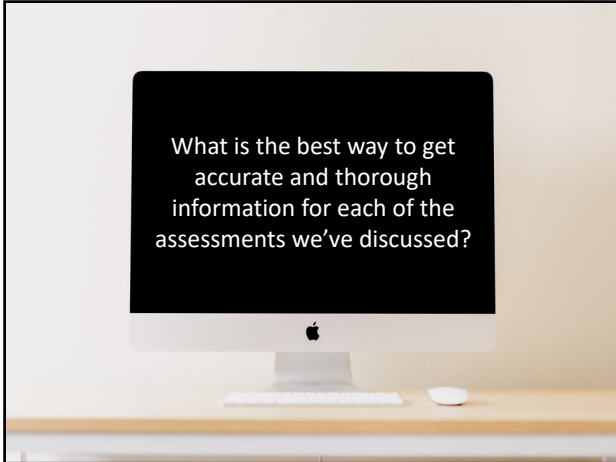
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What is the best way to get accurate and thorough information for each of the assessments we've discussed?

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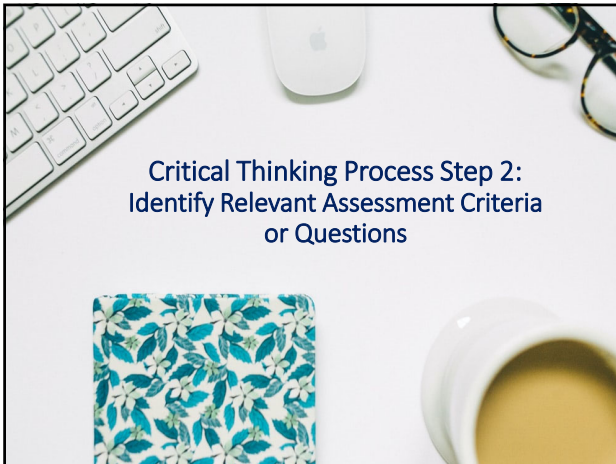
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Critical Thinking Process Step 2:  
Identify Relevant Assessment Criteria  
or Questions

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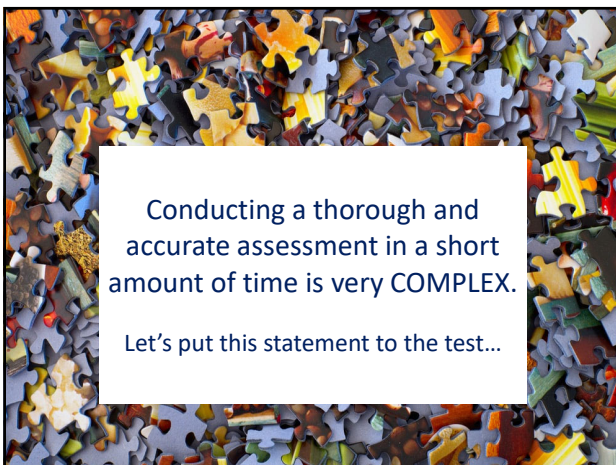
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Conducting a thorough and accurate assessment in a short amount of time is very COMPLEX.  
  
Let's put this statement to the test...

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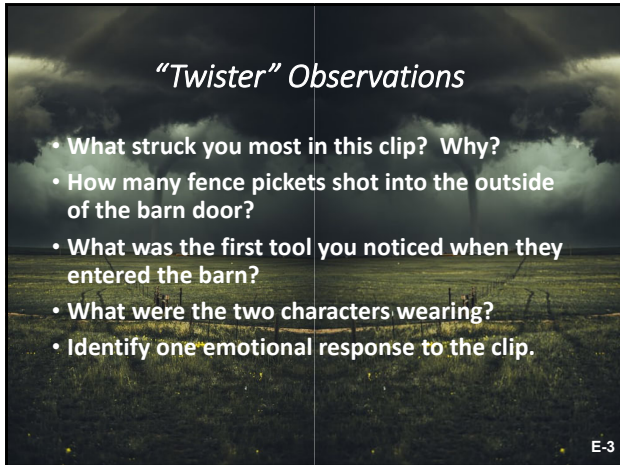
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### *"Twister" Observations*

- What struck you most in this clip? Why?
- How many fence pickets shot into the outside of the barn door?
- What was the first tool you noticed when they entered the barn?
- What were the two characters wearing?
- Identify one emotional response to the clip.

E-3

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What are your information processing preferences?

Let's find out...

E-4

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### What Do You See?

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List all the items you observed  
in the previous slide



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List of 15  
Items

1. handgun
2. daisy
3. cupcake
4. plastic flamingo
5. Copperhead snake
6. wheelbarrow
7. menorah
8. butterfly
9. half shaded star
10. bus
11. hat
12. golf clubs
13. thumb tack
14. suitcase
15. dartboard

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### Information Processing

- What do you notice?
- What don't you notice?
- What leads you to notice some things over others?
- What barriers prevent you from noticing what matters most?

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### Salience Depends Upon:

- stimulus strength
- repetition
- strangeness/unusual
- movement and change
- strong emotional reactions

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What are some salient factors you can recall from home visits or interviews with families?

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## Relevance

Importance of a stimulus, event or action

Guided by formal assessment protocols

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What are some of the assessment tools or protocols that you use within your local department?

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Challenge yourself to differentiate relevance from personal or cultural preferences.

Salient stimuli are not necessarily relevant.

Relevant stimuli are not necessarily salient.



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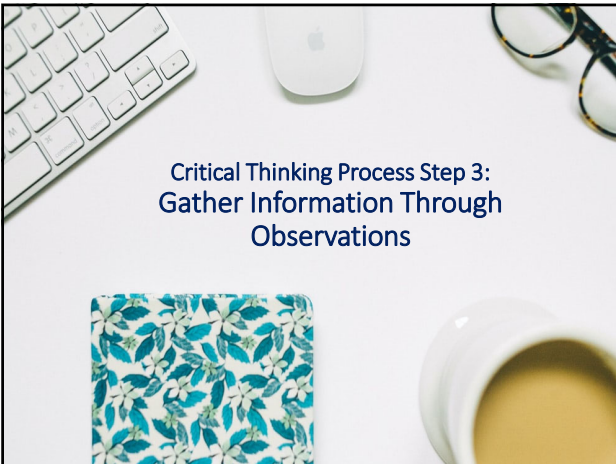
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### Critical Thinking Process Step 3: Gather Information Through Observations



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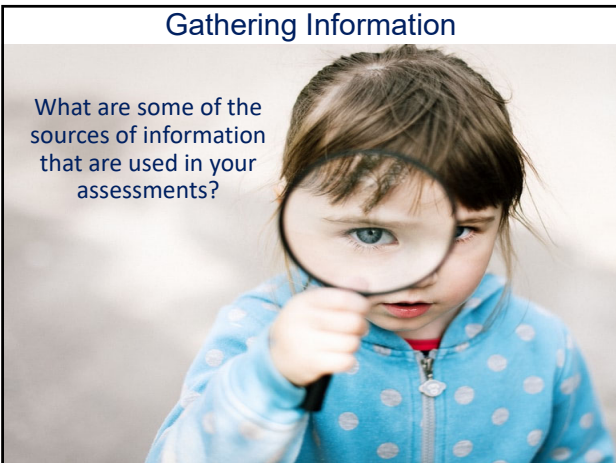
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### Gathering Information

What are some of the sources of information that are used in your assessments?



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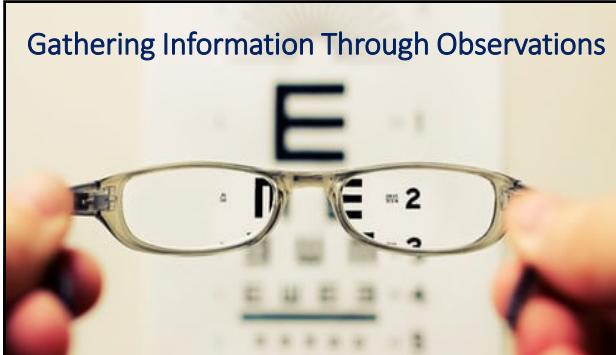
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Gathering Information Through Observations



What are some typical things you try to observe during an assessment?

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Handout F:  
**Observation: Assessment  
of Hazards and Strengths**  
(left column only)



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Is there anything you saw in the video that you are unsure about?

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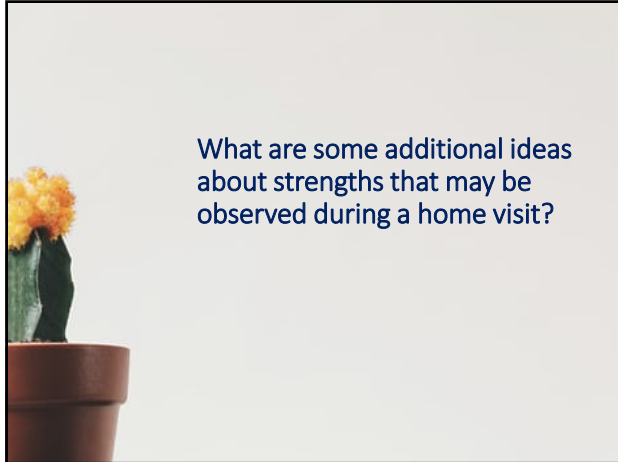
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**Base Case Documentation On...**

Factual, relevant observations	A combination of strengths and deficits	Specific details	Professional interpretation of the observations' potential impact on child safety

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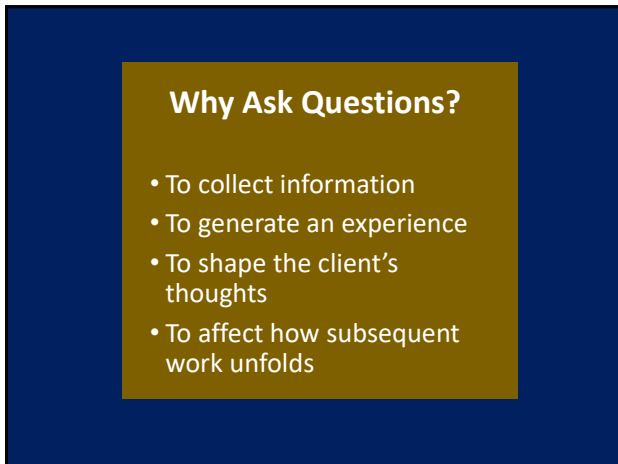
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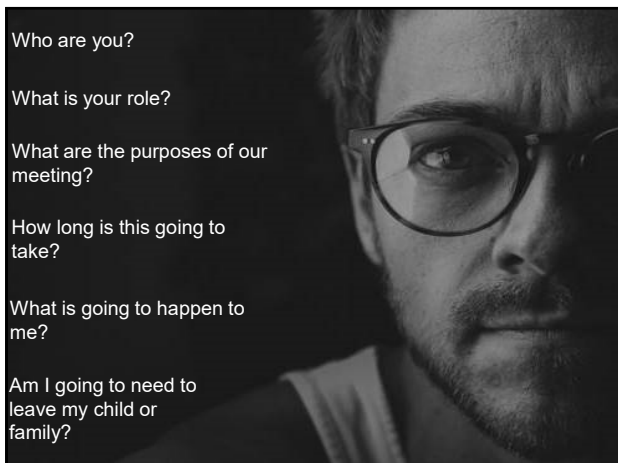
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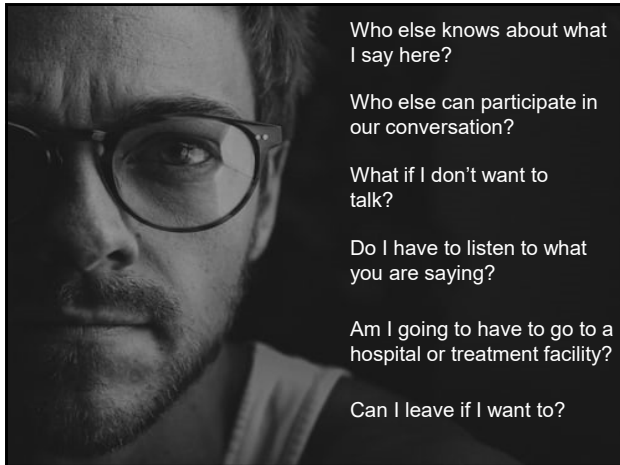
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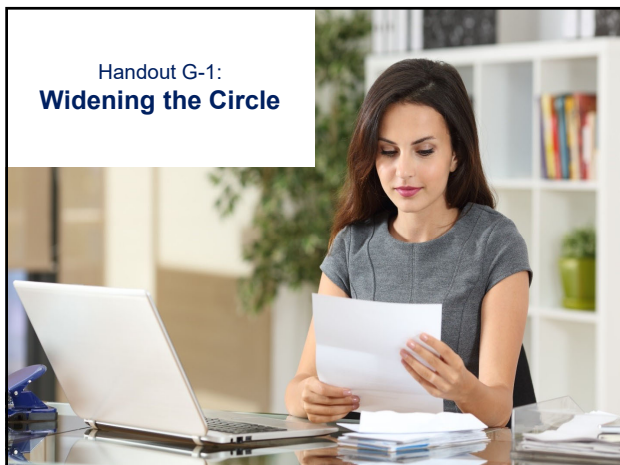
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- What would you call this [situation]?
- What is this [situation/problem] doing to you?
  - Your family?
  - Your life?
- Is this how you want things to be?
  - Why or why not?
  - What would you prefer?
  - Why is that important to you?
  - What does this say about what is important to you?
- What were you hoping would happen when you took this step?

G-7

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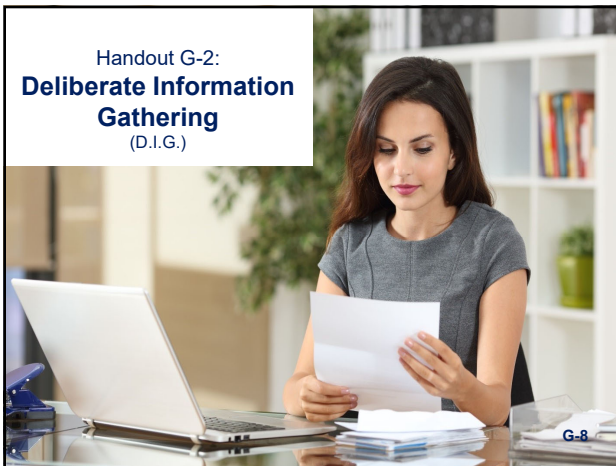
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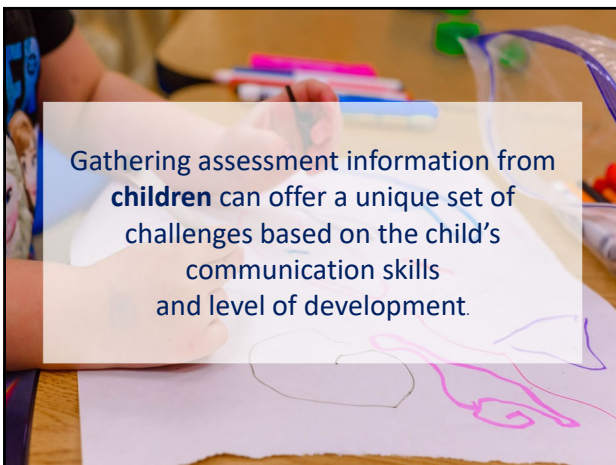
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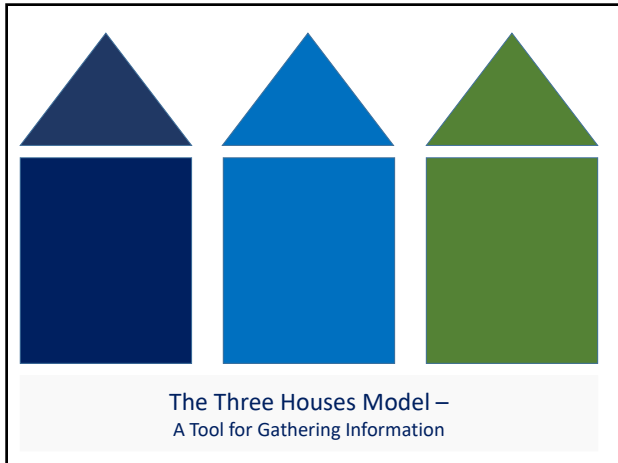
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### Supervising



#### The Good Supervisor

Child welfare supervision is challenging work. We are here to support you with new tools to help you define your role, organize your time, and provide direct and effective practice guidance to front-line workers. As a well-respected practitioner and academic in the field of child welfare supervision, Alfred Kadushin, PhD, defines a "good supervisor" as one who balances their three critical functional roles: Administrative, Education Supportive. These three documents explore the three roles.

- The Administrative Role
- The Education Role
- The Supportive Role

#### Best Practice Quick Guides

The Practice and Supervision Quick Guides were created as a component of Virginia's Leadership Institute. They are short, concrete guides for a variety of best practices and approaches to child welfare work for workers and supervisors across the spectrum of child welfare programs. These Guides provide suggested ways to craft key questions that help the worker to build critical thinking skills and generate solutions. Key skills of the supervisor involve listening to carefully observe, understand, and promote learning through the use of curiosity and non-judgmental approach. Coaching is a way to connect feedback about skills and behavior to best practices.

#### Introduction to Best Practice Quick Guides

Quick Guide Topics:

- Solution-Focused Questions - Practice and Supervision
- The Three Houses - Practice and Supervision
- Safety Assessment - Practice and Supervision (coming soon)
- Safety and Support Circles - Practice and Supervision
- Child and Family Team Meetings - Practice and Supervision
- Safety Planning - Practice and Supervision
- Behavior-Based Plans - Practice and Supervision

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### "AHA" Moments

What information was most informative or relevant for you?

What stimuli is inherently most salient for you?

What stimuli is inherently least salient for you?

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### Summary

Be aware of stimuli that are inherently most salient and least salient for you

Learn what criteria are most relevant for each type of assessment

Be skilled in identifying observable, behavioral indicators of relevant criteria

Recognize how your own culture, values, biases, and feelings impact the scope and accuracy of the information collected

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### Day One: Transfer of Learning

- Complete Developing Cultural Competence Handout B2
- Watch Broken Child Videos Part 1 and Part 2 and answer questions.

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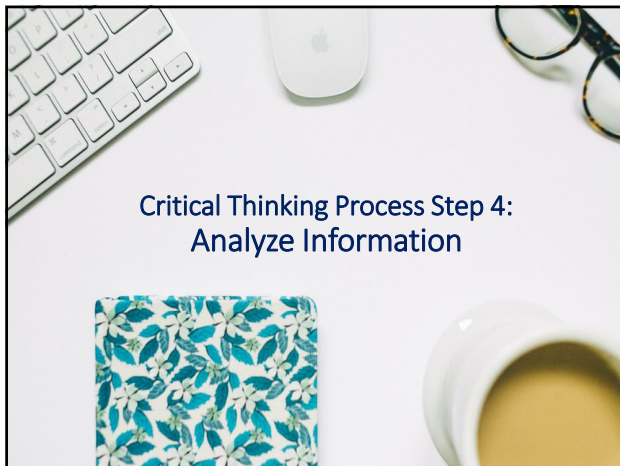
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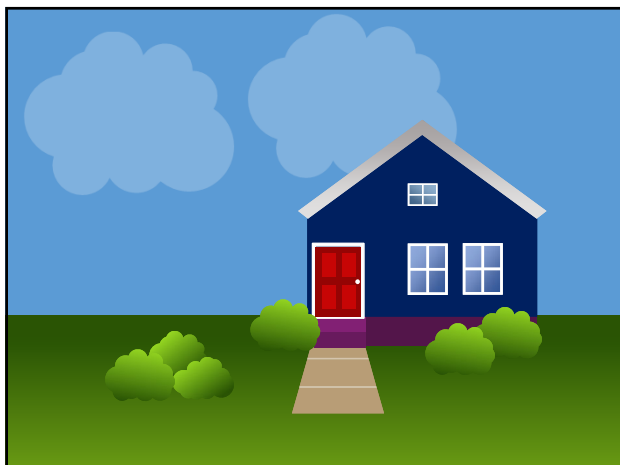
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### Safe Home Instructions

- How do children act when they live in a safe home?
- How do caretakers behave in a safe home?
- What family characteristics are consistent with a safe home?



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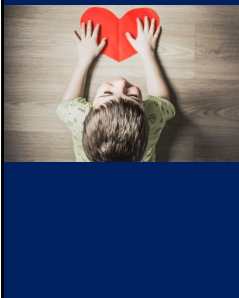
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### Children in Safe Homes



- Are able to be assertive
- Feel comfortable speaking their minds when encouraged
- Show signs of self-protectiveness (depending on age and development)
- Expect to be protected
- Demonstrate comfort and security from their identity within the family
- Are confident in the consistency of their home/safety
- Indicate that their caregivers are protective and that siblings/family members are supportive
- Are comfortable around others because they have regular contact outside of their home
- Show no indication of maltreatment

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### Caregivers in Safe Homes



- Perform their duties in ways that can be observed
- Are very open
- Have accurate perceptions of reality
- Are effective problem solvers
- Recognize the presence of problems and the need to address them
- Are alert to dangers and problems their children may face
- Demonstrate conscience and empathy
- Verbalize and demonstrate concern for their child's safety and well-being
- Show positive attachment and bonding
- Are nurturing
- Maintain control over their behavior and emotions
- Are willing to accept external support from their family network and others

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## Families in Safe Homes



- Demonstrate confidence in maintaining consistency and stability
- Are socially integrated into the community
- Have clearly defined roles and proper boundaries
- Show effective means of coping with stress
- Have a strong family identity and commitment to family preservation and protection
- Have adequate living arrangements and resources
- Can meet child-specific needs

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## Handout H-1: Dynamics of Child Maltreatment



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## Handout H-2: Maslow's Hierarchy of Needs



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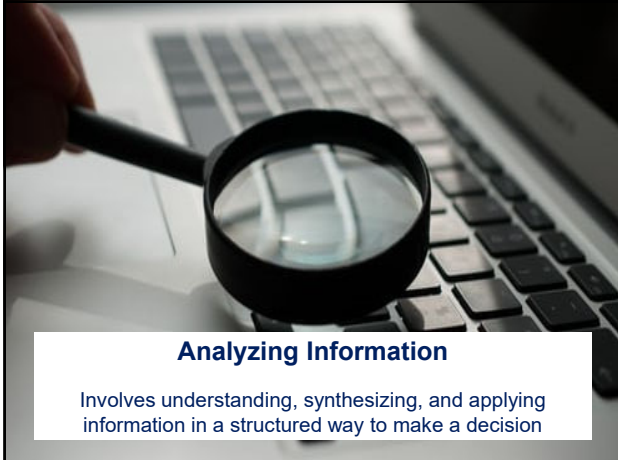
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**Analyzing Information**

Involves understanding, synthesizing, and applying information in a structured way to make a decision

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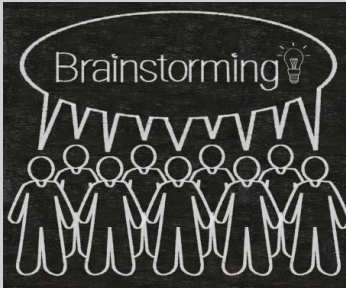
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**Assessment Errors to Avoid**

What are some errors or mistakes that workers can make that render an assessment incomplete or inaccurate?



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Our assessments are *ineffective* if we:

- Draw conclusions with insufficient or erroneous information
- Do not have relevant information
- Speed up the process
- Don't know the area being assessed
- Draw conclusions from only part of the information



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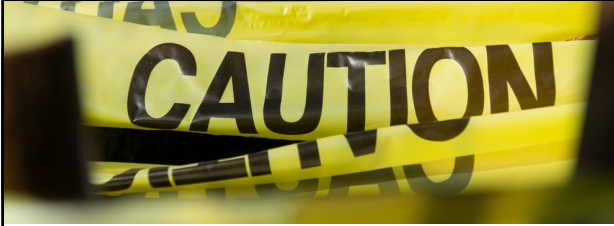
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**Personal Factors that Cloud Assessments**

- Cultural aspects of the FSS or family
- Bias of previous information
- Confirmation bias
- Limited available information

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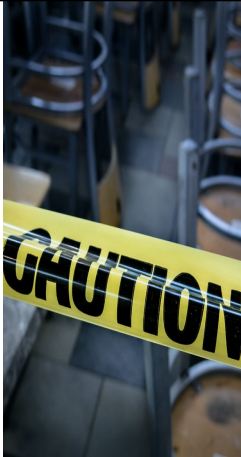
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**Personal Factors that Cloud Assessments**

- Emotional condition of the assessor
- Personal involvement in the situation
- Environmental conditions



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What are some ways you've learned to manage your personal emotions and reactions so that you can objectively analyze information?

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## Summary

**All families have areas that need improvement**

**All families have protective qualities**

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## Critical Thinking Process Step 5: Make and Test Hypotheses

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How do you know whether your interpretation of the information is accurate?

Test it. Make an educated guess and draw a tentative conclusion about what is really happening.

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A doctor has gathered detailed information from a patient that suggests the patient has a chronic chest condition. The patient's symptoms include a hacking cough, wheezing, and chest pain. The patient is a heavy smoker and also has a long history of allergies. The doctor has gathered information about the patient's lifestyle, health history, and symptoms. However, taken together, the data still point to several potential explanations—bronchitis, pneumonia, emphysema, lung cancer, and chronic seasonal allergies, to name a few.



Hypothesis:  
Medical Analogy

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In medicine, it is easy to see the dangers of jumping too quickly to conclusions. If the doctor decides to treat for bronchitis without further information gathering (which can include formal testing), a more serious condition could easily be overlooked. However, presuming cancer and scheduling the patient for lung surgery would be overly intrusive and unnecessary if the patient has allergic rhinitis.



Hypothesis:  
Medical Analogy

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The physician must consider all the possibilities and continue gathering more specific and detailed information to help sort through all the possibilities before coming to a final conclusion (i.e., diagnosis.) Because the final conclusion (diagnosis) will drive the treatment plan (surgery, antihistamines, inhalers, antibiotics, or recommendations to quit smoking), it becomes clear that the assessment information must be thorough and accurate.



Hypothesis:  
Medical Analogy

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A FSS is interviewing the mother of a seriously neglected infant and trying to identify the circumstances and conditions that have contributed to neglect. Throughout the interview, the mother appears drowsy, only half listening. She is lethargic, and it's difficult for her to connect her thoughts and focus on the interview. She keeps rambling, going off on tangents, and repeating herself. Her conversation is disjointed at times and, while the FSS understands the words, the mother's meaning is not clear. The mother periodically sits quietly and stares out the window, seemingly unaware that the worker is even in the room. She appears immune to her infant's cries.



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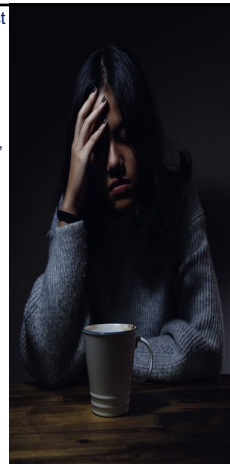
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- Mom is on drugs that impair thinking and affect responses.
- Mom does not want to talk to FSS and is avoiding interview.
- Mom is mentally ill and has a thought disorder, such as schizophrenia.
- Mom is either chronically or situationally depressed.
- Mom is physically ill and is disoriented from fever and infection.
- Mom has severe hearing impairment.
- Mom has intellectual disability.
- Mom has combination of the above.
- Mom has none of the above.



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### What should the FSS do next?

- Use historical information
- Ask the mother
- Ask other sources close to the mother (family or friends)
- Apply knowledge of the signs and symptoms of physical and mental illnesses and substance abuse
- Refer the mother to a psychiatrist or a medical doctor for a more definitive diagnosis

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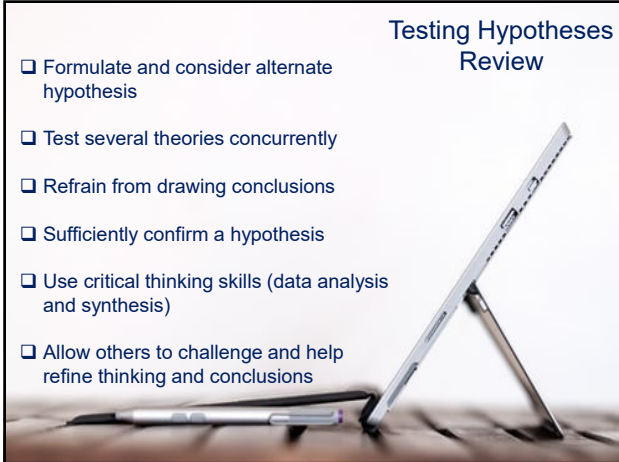
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**Testing Hypotheses  
Review**

- ☐ Formulate and consider alternate hypothesis
- ☐ Test several theories concurrently
- ☐ Refrain from drawing conclusions
- ☐ Sufficiently confirm a hypothesis
- ☐ Use critical thinking skills (data analysis and synthesis)
- ☐ Allow others to challenge and help refine thinking and conclusions



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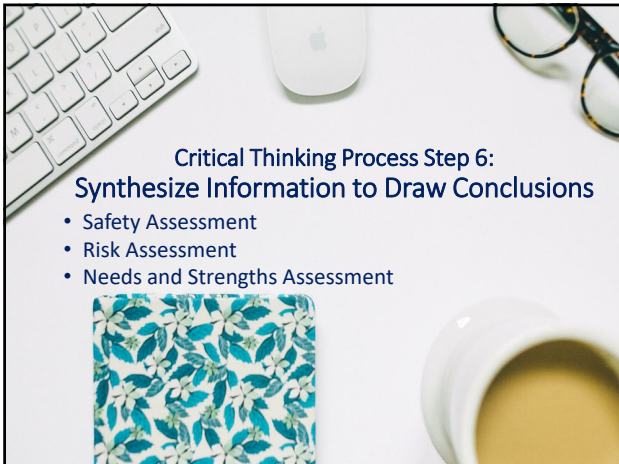
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**Critical Thinking Process Step 6:  
Synthesize Information to Draw Conclusions**

- Safety Assessment
- Risk Assessment
- Needs and Strengths Assessment



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***Purposes of Safety Assessment***

- To identify children who have been or are likely to be seriously harmed in the very near future
- To address immediate and serious harm
- To develop intervention plans to stabilize or make alternate placement
- To provide data for case disposition

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**What are some other times when a FSS might assess safety?**

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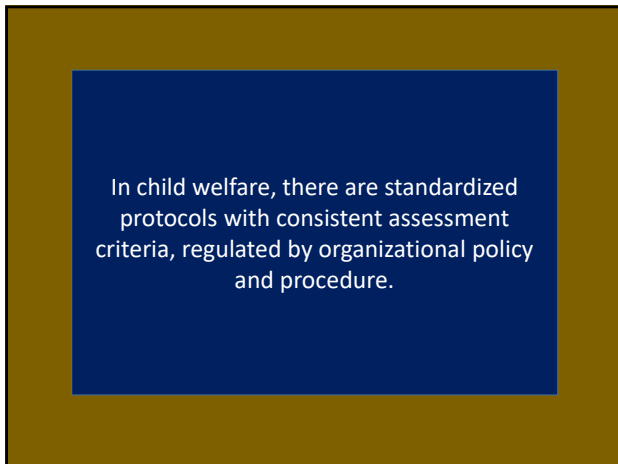
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Handout J:  
**Safety Assessment  
Factors**



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***Factors That Threaten Child  
Safety:***

Caretaker caused or threatened serious physical harm.

Caretaker's history of maltreatment and the current situation suggest safety may be an immediate concern.

Caretaker fails to protect child from serious harm or threatened harm by others.

Nature of injury & caretaker's questionable or inconsistent



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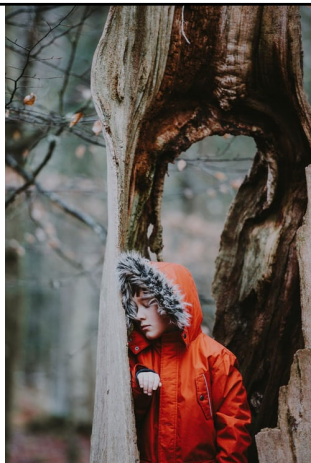
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***Factors That Threaten  
Child Safety:***

Family is refusing access to child, or is likely to flee, or child's whereabouts are unknown.

Child is fearful of caretaker, other family members, or people living in or having access to the home.

Caretaker fails to provide supervision necessary to protect child from potentially serious harm.



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### *Factors That Threaten Child Safety:*

Caretaker fails to meet child's immediate needs for food, clothing, shelter, medical and/or mental health care.

Child's physical living conditions are hazardous and immediately threatening based on age and developmental status

Caretaker's substance abuse seriously impacts ability to supervise, protect, and care for child.

Caretaker's behavior toward child is violent or out of control

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### *Factors That Threaten Child Safety:*

Caretaker describes child in predominately negative terms or has unrealistic expectations that negatively impact the child.

Child sexual abuse is suspected and circumstances suggest immediate concern.

Caretaker's physical, intellectual, or mental health seriously affects current ability to supervise, protect, or care for child.

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### **Consider...**

- Historical Information
- Child Vulnerability
- Protective Capacities

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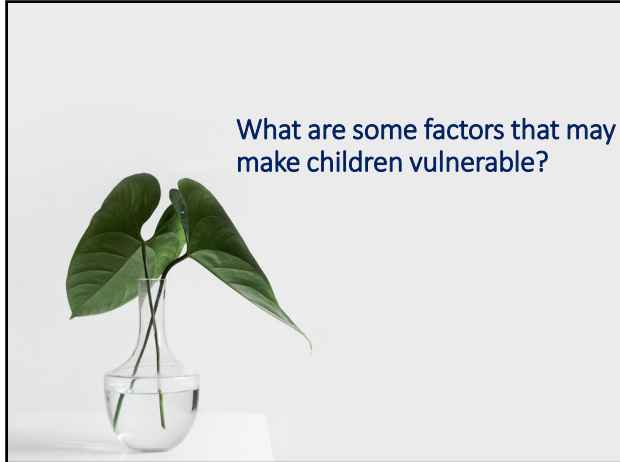
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What are some factors that may make children vulnerable?

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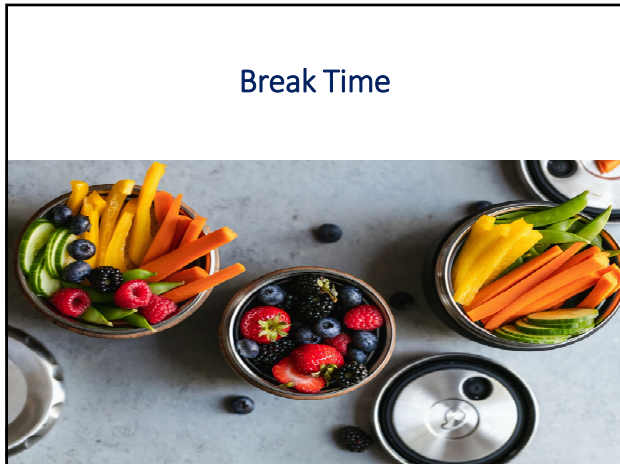
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Break Time

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*Mayday! Mayday!*

- Engine fire
- 40 MPH winds
- Low fuel
- Co-pilot passed out
- Radio failure
- Missing luggage

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Completion of a safety assessment or reassessment provides information for FSS to develop short-term intervention plans called safety plans.

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### *A Safety Plan Should:*

- Address immediate danger of serious harm
- Have explicit time limits
- Be realistic
- Be specific to the family and child
- Include method for monitoring implementation
- Consider involvement of others to ensure protection of the child



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### Handout J: **Safety Assessment Factors**



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What was salient from the “Patricia” video?

Is anyone willing to share a personal reaction to Patricia?



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### Safety Assessment

- Discuss your safety assessment and safety decision noting:
  - safety threats
  - protective capacities
  - relevant historical information
  - child vulnerabilities
- Identify questions for which there is still insufficient information



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How were you able to deal with any personal reactions about Patricia in order to make an objective, professional assessment of the current situation?



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What are some ways we can remain family centered and hopeful about change when knowing that the family has a history of maltreatment, criminal involvement, previous removals, substance abuse, or other serious problems?



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## Summary

**FSS must make decisions about safety**

**Decisions involve balancing safety factors and protective factors to determine if immediate action must be taken**

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## Risk Assessment



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### *Principles of Risk Assessment*

- A technology to determine, as accurately and consistently as possible, the probability of future child maltreatment
- Designed to estimate the likelihood of serious harm in the distant future
- Provides information to support case decision



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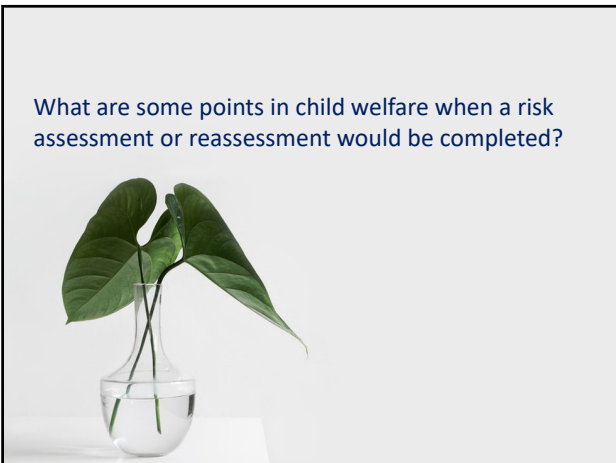
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What are some points in child welfare when a risk assessment or reassessment would be completed?



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A risk assessment is simply the tool that standardizes the most relevant criteria to be assessed.

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What are some common factors that increase future risk to children?

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*Factors almost universally related to increased risk of child maltreatment:*

Substance Abuse



Domestic Violence



Serious Mental Illness or Mental Health Concerns



Young or Single Parents with Multiple Children



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Handout K:  
**Risk Assessment  
Factors**



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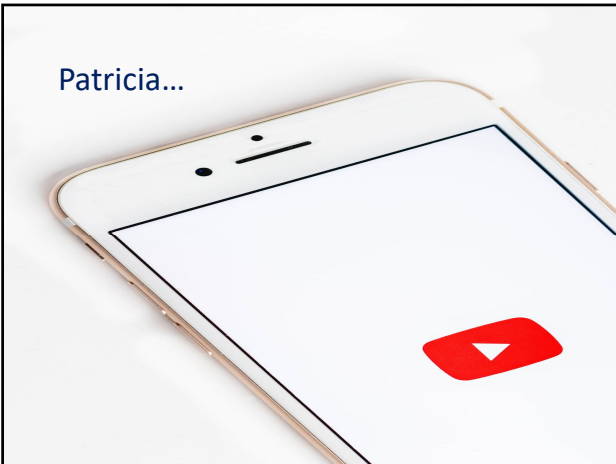
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Patricia...



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What was salient and relevant in this segment?

Has your reaction to Patricia changed based on her progress?



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## Summary

Risk assessment identifies  
likelihood  
of future maltreatment

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## Child and Adolescent Needs and Strengths (CANS) Assessment



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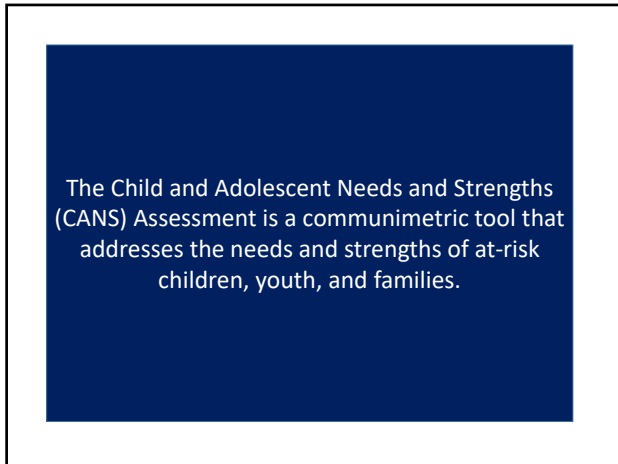
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### *Child and Adolescent Needs and Strengths (CANS)*

- Delineates specific objectives of service intervention
- Identifies the most appropriate activities and services to meet family needs
- Formalizes the information into a case plan to guide services and interventions

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### *Child and Adolescent Needs and Strengths (CANS)*

CANS assesses a family's strengths and needs by identifying the most relevant contributors to maltreatment

CANS assessment must be individualized to each family

CANS assessment must be completed on every child in the family and the child's caregivers

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### *Child Functioning & Capacities*

- Emotional/behavioral skills
  - Family relationships
- Medical/physical health
  - Child development
- Cultural/community identity
  - Substance abuse
  - Education
- Peer/adult social relationships

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## Adult Functioning & Capacities

- Substance use or abuse
- Emotional stability
- Sexual Abuse
- Resource management & basic needs
- Parenting skills
- Household relationships/domestic violence
- Own history of abuse/neglect
- Social/community support
- Physical health
- Communication skills



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## CANS

Assessment  
requires more time  
than either safety  
or risk assessment

Explores more  
factors in greater  
depth



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### CANS Certification and Training

Information and updates about the CANS may be found on the following websites:

- [www.csa.virginia.gov](http://www.csa.virginia.gov) (State CSA website)
- [www.canstraining.com](http://www.canstraining.com) (training and certification site)
- <https://csa.canvas.virginia.gov> (news and updates)

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What are some examples of protective factors (strengths) from your experiences in working with parents?

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### Application CANS

- History is important, but we care more about the present
- Maltreatment is complicated
- Cannot use a simple cause and effect model

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### Challenges

#### Some may:

- be ashamed of their behavior
- be suspicious and threatened by agency involvement
- fear that full disclosure may result in removal of the child
- lack insight and may not be aware of all the reasons they may have maltreated the child
- be trying to hide illegal activity (i.e., substance abuse, domestic violence)
- not see the relevance of questions they perceive are not directly related to the referral

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How can you, as FSS, encourage families to fully disclose information?



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### CANS – Extended Support

- evolving
- ongoing
- guides intervention



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### Handout L: Family Assessment



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## Summary

The CANS addresses the needs and strengths of children, youth, and families.

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## Critical Thinking Process Step 7: Make a Well-Informed Decision

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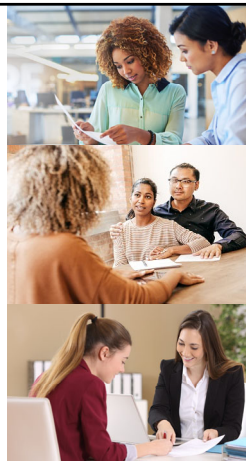
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## Key Points

- Discuss your cases with your supervisor
- Remind yourself to be attuned to the family and attend to relevant information, whether it is salient or not.
- Prepare yourself for each interaction with family, to assure that you are up to date on the family's situation, and can be free from bias.
- Recognize possible differences when working with families of different cultural backgrounds



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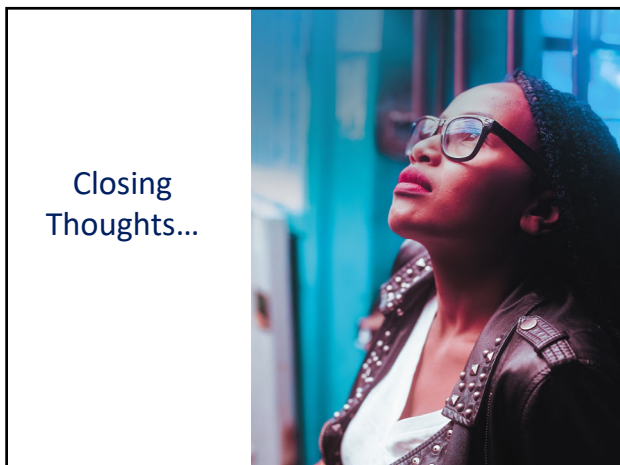
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