

# ***PRIMER HANDS ON- CHILD WELFARE***

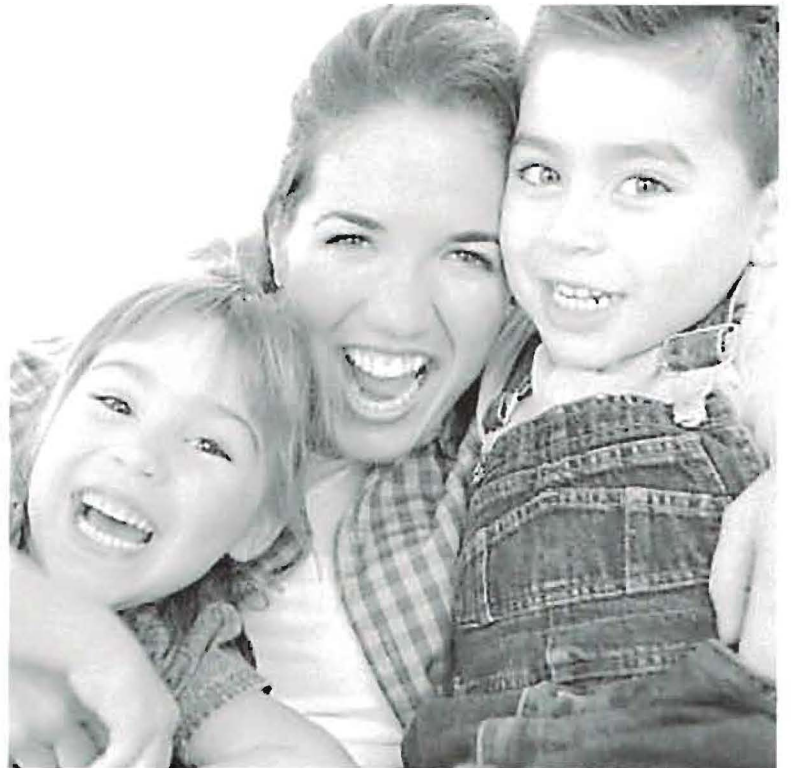
## **HANDOUT 4.1**

### **How Family-Centered Are You?**

The Rhode Island Coalition for Family Support and Involvement  
(401) 727-4144 or (401) 456-8072

THE RHODE ISLAND COALITION  
FOR FAMILY SUPPORT AND INVOLVEMENT

*Family-Centered Practice:  
How are we doing?*





## What is the Rhode Island Coalition for Family Support and Involvement?

We are a Coalition of family-centered groups and individuals whose mission is to ensure that all public policies, practices and services in the state are family-centered.

The Coalition includes organizations such as Rhode Island Parent Information Network (RIPIN), Parent Support Network of Rhode Island (PSN), Sherlock Center on Disabilities at Rhode Island College, Rhode Island Children's Crusade, PAL, the Providence Schools' Department of Family and Community Engagement, and UCP Rhode Island. The Coalition welcomes others to join our efforts.

We recognize that parents and families play a pivotal role in the lives of children. Families have the responsibility to participate as equal partners in planning and are the ultimate decision-makers for their children. The Coalition has developed this *Family-Centered Practice Rating Scale* as a tool for RI families, providers, schools and communities to evaluate and improve how we in Rhode Island support families. We hope this will help you examine what you do and plan meaningful change.

For further information or more ideas and assistance in how to improve your "family-centered practice," call Cheryl Collins at RIPIN 401.727.4144, ext. 52 or Claire Rosenbaum at the Sherlock Center 401.456.8072.





## *Family-Centered Practice: How are we doing?*

### **HOW TO USE THE FAMILY-CENTERED PRACTICE RATING SCALE**

Read the question in blue italics. Look across and find the column that best describes your programs. Ask yourself: How are they doing? Could they be doing better? How?

***Families:*** Think about the programs or supports that serve your family (school, child care, social services, etc.) You can use this rating scale to compare various programs that serve or could serve your family, so you can choose one that best makes you, the family, the center of what they do. Share the rating scale with your program staff and administrators and offer to help them think about ways they can improve.

***Program or school staff and administrators:*** Think about the programs where you work. You can use the rating scale to identify areas of strength and areas that need improvement. Partner with the families you serve to compare how they rate your programs. How would they suggest that you become more family-centered? Use the rating scale with your family advisory boards and school improvement teams.

***Local, regional or state policy-makers:*** Think about the programs that you know and set policy for. Use the rating scale to evaluate how well they work with and for the families they serve. Encourage programs to partner with families they serve to evaluate their programs and become more family-centered. Use the rating scale to evaluate how well your policies foster equal partnership with families in developing services and supports within the community.



# Do your programs, supports or services..

## ...focus on the strengths of the child and family?

### 0 - NOT AT ALL

Helps family focus on the problems that the child or family face.

### 1 - MAKING AN EFFORT

Assesses all child and family needs.

Looks for solutions to be effective in spite of family weaknesses.

### 2 - DOING OK

Identifies all child and family strengths as well as any problems.

Develops comprehensive plan to address problems.

### 3 - DOING WELL

Helps family develop list of their own strengths, cultural uniqueness, abilities and resources.

Helps family identify areas where they want or need help.

Uses this information to build plan for support.

### 4 - DOING VERY WELL

Helps family to identify ways to address areas of concern that build on their strengths, cultural uniqueness, resources and abilities.

Helps family take a direct role in planning support for their family.

Encourages family to share information and experiences with other families.

## ...support relationship building and community membership?

### 0 - NOT AT ALL

When problems are identified, only offers segregated, specialized treatments and therapies.

Child and family remain isolated from their larger community.

### 1 - MAKING AN EFFORT

Provides any necessary special treatment or services within natural settings.

Helps reduce the child's isolation and makes treatment more useful.

### 2 - DOING OK

Helps child and family recognize their own uniqueness.

Helps identify resources for support within the family's own culture and community.

### 3 - DOING WELL

Uses family-identified resources to support active participation of the child and family in activities of their own culture and community.

Helps promote friendships.

Helps identify opportunities for giving back to the community.

### 4 - DOING VERY WELL

Helps the child and family form long-term positive relationships within their own culture and community.

Provides ongoing information, support and guidance to family and their identified resources to make this happen.

## ...foster mutual trust and respect between families and program staff and/or administration?

### 0 - NOT AT ALL

Staff and families share little or no information with each other.

Staff or administration may view families as obstacles to helping the child.

Families may be afraid to question the authority of the staff or administration.

### 1 - MAKING AN EFFORT

Families feel free to ask questions of staff.

Staff take time to answer families' questions completely.

Staff are considered the experts on the growth and development of the child.

### 2 - DOING OK

Families feel free to ask questions;

*and*

Staff value the role of the family as the constant in a child's life.

Staff take time to find out about the family, its culture and lifestyle.

Staff gather information from the family about the child's life beyond the program they are involved with.

### 3 - DOING WELL

Families are free to ask questions; staff value the role of the family and its culture;

*and*

Families and staff see each other as partners, equally concerned with the growth and development of the child.

When problems arise, families and staff turn to each other to help solve the problem together.

### 4 - DOING VERY WELL

Families are free to ask questions; staff value role of the family and its culture; families and staff see each other as partners;

*and*

Program administrators routinely turn to families as valued consumers to help with ideas for improving the program, supports or services.



### *...promote family choice and control?*

#### 0 – NOT AT ALL

Professionals make all the decisions about which services to provide, when, and how.

Family has no “say” in these decisions.

#### 1 – MAKING AN EFFORT

Professionals develop a child’s plan.

Family has a chance to approve the plan before services begin.

#### 2 – DOING OK

Staff asks family to identify goals that are important to them.

These goals form basis of child’s support plan.

#### 3 – DOING WELL

Families prioritize goals and needed services.

Family chooses providers.

Providers control how service is delivered with family input.

#### 4 – DOING VERY WELL

Families identify, choose, and prioritize supportive services based on their preferences and goals.

Family decides who, where, when and how these supports will be provided.

### *...offer families good information and access to information?*

#### 0 – NOT AT ALL

Little or no information is available for families.

Families either do not seek more information or can find no answers when they do.

#### 1 – MAKING AN EFFORT

Information for families is available, but is often difficult to understand and in English only.

Families accept information from staff.

Sometimes this information is confusing, out-of-date, or unreliable.

#### 2 – DOING OK

Information for families is available and simple to understand.

It is available in various formats and in languages spoken by families in the community.

Either interpreters or bi-lingual staff are available when needed.

Staff welcome questions from families seeking further information.

Staff are knowledgeable to provide accurate and up-to-date information.

#### 3 – DOING WELL

Information is available for families in ways and languages they will understand.

Program hires bi-lingual staff when the community requires.

Well-informed staff point families to a variety of other places for information, including local and national parent organizations.

When requested, staff help families in evaluating information that they gather to help with informed decision-making.

#### 4 – DOING VERY WELL

A rich variety of information is easily available for families from many sources.

Staff (bi-lingual, if necessary) assist families in finding and using information they need for their decision-making.

Staff encourage and provide opportunities for families to share their information and experiences with each other.

Families learn to gather, evaluate, use and share information.

### *...include families in policy decisions and program planning?*

#### 0 – NOT AT ALL

Administration and/or staff make all program and policy decisions.

Families are not part of policy decisions and planning.

#### 1 – MAKING AN EFFORT

Program includes one or two family members on policy-making boards or committees.

#### 2 – DOING OK

Families make up at least half of any board or committee that decides policies and program planning.

#### 3 – DOING WELL

Families make up at least half of decision-making bodies;

*and*

These families represent cultural and social diversity of community served.

Program supports families in actively participating as policy decision-makers.

#### 4 – DOING VERY WELL

Families representing culture of community make up half of decision-making bodies.

Program supports families in these roles;

*and*

Program develops other ways for all families to voice their opinions on important policy decisions.

For further information or more ideas and assistance  
in how to improve your "family-centered practice," call  
Cheryl Collins at RIPIN 401.727.4144, ext. 52 or  
Claire Rosenbaum at the Sherlock Center 401.456.8072.