

- Good afternoon, my name is Catarolyn Johnson. I am the learning and development facilitator here at the Center for Child Welfare located at the University of South Florida. Thanks again for joining us today for our safety planning series, with our presenter Tarrin Reed, who is the senior project director with Action for Child Protection. And so I'm gonna go ahead and turn it over to Tarrin. Thank you, Tarrin.

- Great, thank you again to USF for hosting these webinars. This is the third in the series that we've been working on, and then we're gonna focus on information collection. We're gonna focus today on the Family Functioning Assessment and in particular information collection. So some of our workshop objectives, we're gonna talk about and identify and explain the purpose and focus of the Family Functioning Assessment. We're gonna identify the structure of the Family Functioning Assessment, and identify and explain sufficient information collection to ensure accurate safety and risk decision-making. So when we think about the Family Functioning Assessment I wanna go ahead and launch a quick poll for you all. And so Catarolyn is gonna launch that and you'll have about 45 seconds to complete the poll. And the question that's being asked in the poll is Family Functioning Assessments are? And you can select your response. Responses were about 91% of you said that it is a process to assess families, and you are absolutely correct. When we think about the Family Functioning Assessment, it is the process by which we go about identifying which families have children that are unsafe in a need of ongoing protective supervision whether that be on a nonjudicial or judicial matter. There's some key practice objectives that the Family Functioning Assessment seeks to achieve. The first being determining children that are unsafe, and secondly figuring out ways to protect those children that are unsafe, and that's through our establishing and managing safety plans. We also want to and we have to by our statute verify the occurrence of maltreatment. We also need to identify any problems that are associated with impending danger, threats and caregiver protective capacities. And when we think about the Family Functioning Assessment in the larger scale of things is then we must identify what must change in order to ensure safety permanency, and well-being for children. We also throughout the course of our Family Functioning Assessment, we'll be assessing for progress and levels of intrusiveness meaning our safety plan being either an at-home moving to an in-home or an in-home moving to an out of home. We also use the Family Functioning Assessment for our families that we've identified as safe to identify community-based supports based upon that risk assessment. So the Family Functioning Assessment is focused on safety and on risk as well as permanency and wellbeing. When we think about the risk assessment, the risk speaks to those factors and the need for intervention or referrals due to the risk factors not being addressed. So the Family Functioning Assessment while it's identifying safety, it also helps to inform what we would be doing at the end of our investigations. If we've identified a family that has some risk factors that are not being met. What I mean by that, is there some static risk factors that the only thing that could really assist in changing them, maybe time, such as say, you have a child who's underneath the age of two. Well, eventually they will become three and so that risk factor will decrease. The number of children is a risk factor that static that the only way that that's gonna change is, if say children age out, or maybe it's a blended household and you have a separation and some children leave with their biological parents out of the house. The other thing that is fairly static is the number of reports, so again, we can't really change how many reports have come into a family. So there are some risk factors that are static, that are information will help inform, whether or not the risk factors that we've identified are things that are in need of some sort of intervention. When we think about the Family Functioning Assessment it is not a one-time occurrence, it is not something that's myopic or

even deficit driven. We try to ensure that our Family Functioning Assessments are viewed in terms of a process, not necessarily a destination, that they're multi-dimensional and that their strength and child focused, and that we're engaging our families in the Family Functioning Assessment. I want to be really clear that the Family Functioning Assessment is not the document. And we're gonna talk more about what I mean by that in the next couple of slides. The other thing that I want to be clear is that sometimes we associate the Family Functioning Assessment to what goes on with the PI. The Family Functioning Assessment is a process that goes on throughout the life of the case. It begins with the investigator and continues on through case management should a family move on to access further interventions. So in particular, if you look at the practice objectives, in terms of identifying what must change to ensure safety permanency and well-being, that's focused on our case managers primarily. Identifying problems associated with impending danger and caregiver protective capacities. Why we do that at the PI level, we take a deeper dive into understanding the family dynamics and conditions and the degree to which caregiver protective capacities are diminished, through our case management, ongoing Family Functioning Assessment and progress update. The assessment for progress and the level of intrusiveness also continues throughout the case management intervention. So when we talk about the focus of the Family Functioning Assessment, so we're talking about this process that occurs with families is family centered and family engaged. The focus of the Family Functioning Assessment is that we are looking at households where the alleged maltreatment is or has occurred. Sometimes we have blended families, split families, where we have kids that are spending time with mom or dad or significant others, and so the maltreatment may have happened why they were at dad's, but maybe by the time the report came in, they're back at mom's. So it's where the household, where the alleged maltreatment is or has occurred. We also are looking at caregivers within that household who have caregiving responsibility. We have lots of blended families, we have families that have grammies and grandpas and aunts and uncles that are living with us, but that doesn't necessarily mean that those aunts and uncles and grandmas and grandpas are in a caregiving role. So we're focusing on caregivers within the household, but have caregiving responsibility. That's not to say that we're ignoring the grammies and the grandpas and the aunts and uncles and the roommates and the significant others, it's that we will be assessing them but we may not be capturing our assessment when we document it on the Family Functioning Assessment form. We're looking at children who reside in the home, regardless of whether they're victims or not. And we're looking at the caregivers actions, reactions behaviors that may have an impact on child safety or risk. The other thing that we're looking at is whether or not their child's actions or reactions or behaviors that may have an impact on safety and or risk. This is the overview of the Family Functioning Assessment process as it begins at the CPI level, so when I keep saying that the Family Functioning Assessment is a continual process, it does have some finite decision-making points, and they're based on the assessment process, and the objectives that we're seeking to achieve. So if we think about the finite decision points for the PI we start off with our initial contact and frequently we're making the decision around present danger. If it's not present danger, then we're moving on to information collection, if it is present danger then we know that we have a stop point of finite decision point that we've made, where we need to take some action before we can proceed on to information collection. And that's through the development of a present danger safety plan. After we've established our present danger safety plan we come back together, we're looking at that information collection. We utilize that information collection to inform our assessment in regards to impending danger. If we've identified impending danger, then we're looking at children that are unsafe. That again is a finite decision point. If children are unsafe, then we do our analysis through our safety planning

analysis to determine what is the least intrusive least restrictive safety plan that we need to put into place to ensure child safety. That's gonna be either in-home or an at-home safety plan, and then we develop the plan. If we've determined that kids are not unsafe and that they're safe, then we need to assess the family in terms of their risk assessment. That risk assessment information is gathered when we are doing our information collection. So if you think about some of the risk assessment factors that we are looking at, one being as is if there is substance misuse that's ongoing, or that has occurred in the past, we're looking at whether or not children have special needs, and if so, what those special needs are and whether or not they are not being met. We make a determination about engaging families and preventative services based upon the risk factors and whether or not those risk factors are not being addressed by the family, through our assessment process. If they're not being addressed then we engage with families to provide them referrals, that they can then access intervention services based upon those risk factors. In terms of case management the Family Functioning Assessment continues. We will look at the intervention stages at case management through preparation, introduction, exploration, and case planning, in terms of preparation what we're looking to do at case management is to review the information prior to the case transfer, the staffing, to identify any gaps of information, to gain a better understanding of the family, to be able to look at the prior history, so if we equate preparation to what occurs in the PI, which is pre-commencement, we're doing a lot of the same things in terms of how are we preparing to best engage and work with this family. The next intervention stage is that introduction. And that's how we go about in case management, formulating a relationship with the family in terms of the assessment process and the outcomes that we're hoping to achieve, in terms of gathering sufficient information, identifying what must change, identifying the families change strategies, and also letting the family know what is the difference between my role as a case manager and what the PI's role was. Or primarily focused on engaging and partnering with the family at that point in time. Exploration is where we are taking those information collection domains that the PI did a foundational assessment on, and we're going deeper with the family to try and understand those further family dynamics and understand the behaviors and the conditions that are going on in the home and understanding the root cause of why the family has come to our attention is in need of services. We're looking at what must change through that information collection in relationship to the identified impending danger and the diminished caregiver protective capacities that we've identified. We're assessing for where the family's at, in terms of motivation for change, and we're building with them, their family goal, and also understanding the danger statement in terms of how the danger threats are manifested within the home. The final stage that's informed by our information collection is the case planning. And this again is done in collaboration with the family for them to identify what must change and the avenue in which they are going to work to achieve that change. That is gonna be at the completion of the ongoing Family Functioning Assessment, and will be the basis for your case plan outcomes. So when we talk about the Family Functioning Assessment I just wanna pause for a second and talk about that the Family Functioning Assessment is a process. When we think about the process, it's what we do out in the field, it's what we do with families, it's the records we review. It's the people that we collaborate with. The Family Functioning Assessment is not the documents, oftentimes I'll hear from folks and we've heard it even when we're doing case consultations, we've heard it through some of the questions that have been raised is whether or not I need to do a Family Functioning Assessment. And I'm sure most of you are aware of the streamlined Family Functioning Assessment guidance. The Family Functioning Assessment process occurs with all families, where and how you document your Family Functioning Assessment is the streamlined documentation, it is not the streamlined process. So I

wanna just be very clear that the Family Functioning Assessment is what is done and the assessment that is completed, how or where you document that your information collection and your decision-making does not change the assessment process, all right? So let's talk about information collection. So information collection, they should all seem very familiar to you. Information collection is based upon six core areas of information, we call them the domains. So we look at the domains, we're looking at the extent of maltreatment the surrounding circumstances, child functioning adult functioning, general parenting practices and then disciplinary practices and behavior management. Again, these should all be relatively ingrained in you now, as we've been practicing for several years but this is the basis of our information collection is these six domains. We're gonna go through each of the six domains, but prior to doing that, I want to reiterate that the information collection drives our decision making. Several years ago, I think it was about 2016. I did a presentation at the summit that was, I sort of had an interesting title, it was What Does The Buying House Have To Do With Critical Thinking? And you can access that on the center's website, it was recorded, if we think about major life decisions that we make in our lives, whether it's buying a house, buying a car, making the decision to marry somebody we base our decisions based upon information. We oftentimes seek out others to help us reconcile information, we may seek out others to provide us information, whether that be family or friends or research on the web, our own observations we review all the information that is available to us to come to the best rate decision. So when we think about information collection it drives almost every decision that we make in life, right? From when we go to the grocery store to the type of cereal that we wanna buy, or the type of milk that we wanna buy. We are always using information to drive our decision-making and then the Family Functioning Assessment, it is the same. We're looking at observations, we're looking at reviewing of information, we're engaging with family and friends, we're also looking at the family, including the parents and the children and the other household members to provide us with information, to help us come to the best rate decision about child safety and risk. We utilize the information collection protocol, and I mentioned this last week when we were talking or two weeks ago, when we were talking is that this information collection protocol is critical, because it outlines our policies and our procedures in terms to how we are gonna get the best information possible. It's a uniform and systematic approach that describes how an activity or process will be carried out. So we think about the information collection protocol for the PI, we look at it from two different standpoints. One is whether or not children are at home, which lately with COVID, we have a lot of children at home, or the children are not at home. So if the children are at home, we're looking at doing an introduction with the parents introduction meaning, explaining who we are, why we're there, and what we need to achieve in terms of our assessment process. We're then doing our interviews with our identified victim children, the siblings, the non-maltreating caregiver, the maltreating caregiver and then we're doing closure with the parents. If children are not at home, then we're interviewing the child victim, we're moving out of their siblings, we're gonna do introduction with the parents, interview the non-maltreating caregiver, interviewing the maltreating caregiver and then do closure with the parents. Throughout our information collection protocol, when we have opportunities for collaterals, say, if you're interviewing at a school, then we should be gaining those collaterals as well. Say if it's at the home, and there happens to be a relative at the home engaging with that relative in terms of collateral as well. For case management we also have an information collection protocol. We're looking at the case manager having frequent contact, quality contact with the parents and the children. And starting off that quality contact begins with the parents when it moves on to case management and then onto the children. We're looking for the case manager to have frequent quality contact with collaterals that can inform, the

ongoing Family Functioning Assessment and subsequently the progress update. We also are looking at reports that we are receiving from our service providers or from people that we've engaged with to provide assessments of our families. So we're constantly in information collection mode within case management, we get asked this question a lot. What is sufficient, when is sufficient? What's the definition of sufficient? If we think about the definition of sufficient in terms of the Family Functioning Assessment, we're looking at enough information to meet the needs and the proposed end, so if you think about from the PI standpoint that proposed and is a determination about whether or not kids are safe or unsafe, and so we look at the information and the domains to be sufficient to support that decision. If it doesn't support the decision and there are gaps in information, then when you say that that information is not sufficient. For case management, we're looking at, excuse me, we're looking at sufficient information and ongoing Family Functioning Assessment to clearly identify, what must change and also where the family is at in terms of their engagement and their family goal or achieving change. We're looking at the scaling and the caregiver protective capacities, the scaling of the child's needs, and we're also looking at how those caregiver protective capacities are associated to the danger statement, and the danger threats that we've identified. We're trying to answer in case management, what must change and how it is going to change. On progress updates, we are looking at sufficient information to support whether or not changes is being achieved in progress or not achieved at all, and if so, then what must change within our approach in terms of the case. We're trying to answer safety permanency in well-being as well as risk. We're trying to answer impending danger and the danger statement, the child's needs, case plan outcomes, planning for safety, and then our progress. So we're gonna go through the six information collection domains. Every single time that I go through this, I try to put this in some layman's terms for everybody, so that we can understand what exactly we are assessing, so that then it can also help to inform, how we then will subsequently document our assessment. So the first domain is maltreatment, so this is Florida's definition of maltreatment, it's behavior that is harmful and destructive to a child's cognitive, social, emotional, or physical development. Maltreatment if you think about it in the most layman sense is harm that occurred as a result of the maltreating behavior. So when we think about this domain, in terms of maltreatment the maltreatment domain is asking us to answer what is the maltreatment that is alleged and or occurring. So if you think about some of the cases that you may have received, frequently we get cases where the allegation is made for one thing. But throughout our assessment, we identify that there's additional maltreatments. We would need to add those maltreatments because we've been assessing them, and come to conclusions about whether or not that maltreatment did or did not occur. Underneath this domain we're seeking to answer the type and the finding, and we're utilizing our child maltreatment index. So if you ever questioned about whether or not you should be looking at verifying something or not substantiating or no indicators, the best resource for you is to look at the child maltreatment index, and specifically look at what is that maltreatment? What is the definition of it? What are some examples of it, and how could I qualify that it was, or was not occurring? When we say type and finding, the finding also relates to the who. So when we identify our type and our finding, we need to identify who the person is that either alleged to have caused the maltreatment, or for verifying who did cause the maltreatment. We need to speak to who's responsible for that behavior, and then we also need to speak to who has been alleged to have been harmed, or who has been harmed. So this would be your child victims or if they didn't come in as a child victim, you may have designated them as a child victim. We need to know how they were not harmed, or how they were harmed. And some things that we wanna highlight in this domain is a condition of the child, so for example, if we received a report in terms of physical abuse with injuries, we would want to

articulate how there were injuries, what they look like, the severity of them, the location on them, if they had any impact on the child's mobility or functioning in any way, shape or form, and whether or not if there wasn't any, how we described that there wasn't any. We also wanna talk about the emotional and physical makeup of the child. So for example we know that sometimes there may not be physical indicators of maltreatment, but there may be emotional indicators. So for example if you have a family where it's been alleged that there has been intimate partner violence that's occurring in the home, and you have a child who is fearful of the persons in their home, that would be something that you would capture in this domain to speak about the emotional impact on the child based upon the maltreatment. You wanna give a brief description of the events either supporting or negating the maltreatment. When I say brief, this is your synthesis of all the information that you've obtained throughout your assessment. You may find that you have lots of information in terms of maltreatment, but if everybody's saying there's a rock wall behind me, you don't need to go and say, "Mom said, there's a rock wall, dad said, there's a rock wall, Bob said, there's a rock wall." You can simply say there was a rock wall as confirmed by collaterals, which will be identified then furthering your sources. When we look at the sufficient information in this domain we wanna make sure that we've captured the what, the who, and the how, in terms of the incident of maltreatment. How bad it was or how it wasn't bad and how what is alleged is not occurring, okay? The nature of now treatment is our next domain. And I have a second poll that I want to go ahead and launch here before we get into talking about it. So I'm gonna go ahead and have Catarolyn launch the poll. This poll is a true false, this domain is where we need to document all the criminal and CPS history. Is that true, or is that false? All right, so we've got the results. So we've got a 49/41 splits. So 49% said that this was false, 41% said that this is true. This is actually a false statement, the reason being is that we're looking at the surrounding circumstances nature of maltreatment that is associated to the maltreatment that we are assessing. So if we think about prior history and criminal history, what we're looking for is a criminal history and the prior history that is relevant to the current maltreatment that we have been assessing. That's an odd to say that that information is not important that it isn't relevant in terms of our overall assessment but in terms of capturing and being clear and concise in our assessment narratives, we want to focus in on the related criminal information and the related prior history. So for example, if we have been involved with the family for 10 prior reports due to environmental hazards and our current report is about environmental hazards we would wanna capture that prior history in terms of the environmental hazards. If this is the first report for environmental hazards and say, we had a report three years ago, that had to do with physical abuse, we don't need to go into depth about the prior physical abuse, unless there's a correlation between that physical abuse and the current environmental hazards. In this domain we're looking at, in terms of the maltreatment, we're looking at the duration in the history of the maltreatment that is alleged to have been occurring. We wanna look at what has been occurring in the home that has led to the maltreatment. Currently, with our current state of affairs and with our global pandemic, we've seen a lot of cases that have come in in terms of isolation and also lack of resources. We've seen a lot of families that are struggling financially and economically, we wanna capture when the maltreatment began in relation to what is occurring in the family now. We also wanna look at the explanation in terms of what the family, friends collaterals say about the maltreating behavior, whether it's alleged or confirmed, what did they see, what did they observe? What were some things that they maybe were concerned about that were leading up to the maltreatment, or if they were actually there for the maltreatment what they saw and observed in terms of everybody that was involved. We also wanna capture whether or not there are other factors that are going on in the family that may assist us in explaining the occurrence of

maltreatment, or the reason for maltreatment being alleged. So if we think about this, we have a lot of going on with our families. And sometimes there's economic challenges, sometimes there's marital discord, sometimes there's a new family dynamics that have occurred. We wanna understand what is going on in that family that has led to the allegation of maltreatment and or the validation of maltreatment, and or the negation of the maltreatment occurring. When we look at sufficient information for this domain in particular, we're looking at the how and the what and we wanna include history that is relevant to the incidence of these maltreatment if there's been any prior maltreatment that's related, any prior services interventions. So you heard me mentioned the family that had the 10 priors for the environmental hazards. We would want to capture what interventions have occurred in the past, and whether or not those interventions were or were not successful. We also wanna capture any relevant criminal history. So if there is relevant criminal history, in terms of the family that has to do with the environmental hazards or say an intimate partner violence, we would wanna capture that. We don't necessarily need to capture that the parent was driving with their license suspended 10 years ago, when that has no weight or bearing currently on what the maltreatment is that we're there for. We also wanna capture any negative conditions in the home and negative conditions, negative family conditions can be a variety of things, we all experienced negative family conditions. It's whether or not those negative family conditions are tipping over into an impending danger or unsafe family condition. So I have another poll for you as we move into child functioning. Go ahead, so this poll is, would you describe your child as happy, healthy, and free from abuse and neglect if I asked you to tell me about your child, true or false? All right, so 57% said that this was false. 34% said that this was true. I'm hoping we all said it was false, right? So when we think about child functioning and in particular, the assessment of child functioning and then subsequently the documentation of child functioning, and for those of you that have kids, or have kids that are close to you like nieces or nephews, or even godchildren. Frequently when we talk about our own children we don't go around saying, I have a happy, healthy, free for many obvious signs of abuse or neglect 20 year old or 19 year old, or seven year old or six year old. We describe our kids for who they are. So when we think about the information collection and the assessment process for child functioning we're seeking to understand who these children are as individuals, right? We need to figure out like what makes them tick? What are some of those likes and dislikes? And I'm not talking about their colors, frequently we see in narratives, you know, Bobby likes the color blue. Well, that's great, but that doesn't tell us a whole lot about Bobby in and of itself. So we're looking to understand how these children function on a day to day basis, we want to know what others see in them, in terms of their strengths or their challenges, what their routine or structure may look like. We also wanna see what their siblings may say about them. So we think about that again, that engagement aspect of engaging the totality of the family to be able to speak about each child individually and uniquely, and then taking that information and synthesizing it to give us a clear picture, of who that child is. We wanna look at their overall functioning on a day to day and not just that day that we saw them. So frequently we'll see in case notes, or even in the Family Functioning Assessment documentation where it will only speak about the PI or the case manager when they saw them at that moment in time. And what we know is that moment in time is really just that a moment in time and does not define how a child is pervasively. I'll give you a good example, I have a one and two year old grandchildren. If you were to see one of them in a moment of time, depending on what that time was such as like getting ready for bed, you may say like really sort of temper tantrum, angry little boy. That's just a moment in time for him, right? In terms of what you may have seen versus how he performs or how he acts throughout the rest of the day. Some things that we need to consider as we're doing our

assessment of child functioning is their age, the age of the child, we also need to be looking at their milestones. So really great reference for everybody is, CFA 170-1, there's an ages and stages matrix that's in there, that'll assist you to identify where should children be based upon their age and their development, and also gives you some guidance in terms of what would be indicators of potentially behaviors that are associated to maltreatment. So I encourage you to utilize that resource. We asked one to look at any habits that they have, any likes or dislikes, in terms of not just colors or foods but if there are things that the child really enjoys doing and that is part of their routine, then incorporating that. Or if there are things that the child is very strongly against and dislikes, capturing that as well. We wanna look at their daily abilities, so if you talk about ages and stages for three-year-old, we wanna look at their daily abilities. Can they dress themselves, can they undress themselves? Are they starting to potty train, are they formulating sentences? Can they communicate their wants and their needs, right? We also need to reconcile what each child's needs are because not every child is the same. So if we have children that have needs such as a child who is diagnosed with autism, what exactly does that autism look like for that specific child and what are his or her needs based upon their autism. We also wanna think about our older youth, in terms of their goals and their preparation for adult living, so we think about our 14, 15, 16, 17 year olds, where are they at in terms of preparing themselves to become adults in the relative near future? We wanna look at any school or social experiences, social experiences could be daycare, preschool, pre-K, it could also be if they're involved in any sports or activities, and what those peer interactions look like, how they do within those peer interactions and also within school. This is not just a reciting of what their grades are, but looking at where they're at developmentally in school and whether or not their needs are being met. We also wanna encompass the the family interaction for the child, what does it look like? Do they get along, do they have typical sibling squabbles or is it that they have some pretty strong opinions and thoughts against their sibling that leads to frequent arguing or bickering, and how the family is addressing that. When we think about why we're answering this question around child functioning, we are answering this is because we need to understand whether or not children are developing on target, or if they have needs that are related to maltreatment that may need to be addressed. So for example, in environmental hazards we may see kids that are not developing because they are not getting adequate food and nutrition. That may mean that they are borderline on a failure to thrive, or they may have a need in terms of increased caloric intake. We need to know that especially if we've identified these children to be unsafe, because we need to figure out a way to meet those needs. We also want to make sure that this gives us an understanding, of how the child is developing in regards to social and family relationships. Are they developing on target or are they not? Are there things that are going on that are resulting in a child either being withdrawn or maybe they're attention seeking, maybe they're exhibiting negative behaviors in hopes of gaining attention, or maybe they're withdrawn because the family is so chaotic that they are unable to cope or manage. This gives us an understanding also of how others view the child. So if you think about some of our impending danger threats we have dangerous threats that are associated with child functioning, as well as the parental response to the child in terms of whether or not parents view or act towards their children in extremely negative ways, whether or not parents are meeting emotional and behavioral needs, whether or not parents are meeting even medical needs. So we have to have a good understanding about the child in order for us to answer some of those larger impending danger threats that are occurring. When we think about case management in terms of information collection for child functioning this helps us to scale those child needs and make a determination of what types of things need to be addressed, from the case management aspect, maybe on a case plan or even in the placement setting. Why do we need

to know these things, right? If children are safe we need to confirm their needs are being met, this is not to say that we have parents out there that may be sub-par and maybe they're not meeting those needs as well as we think they should be meeting those needs, but if they're being met and the child is safe we may be able to provide them a referral, if it's a high risk or very high risk, but otherwise we have validated that there is nothing within child functioning that is indicating, that this child is unsafe. If they're unsafe, then we are responsible as the agency to meet those child's needs, that speaks to the wellbeing aspect of safety permanency, and well-being. We need to be looking at their mental, physical, and social interaction, to ensure that all of their needs are met. So sufficient child functioning domain is going to answer what are the needs of the child? What are the strengths of this child? And are there any child conditions that impact the child's safety whether it be emotional, behavioral or medical? If we can't answer those at the end of our assessment then we have an insufficient child functioning and we have to go back and reconcile and identify where our gaps of information are. Our next domain is adult functioning. So there's another poll here that I wanna launch for you guys, and I'll read it to you as Catarolyn is getting it posted, this is a true, false. The assessment of adult functioning should be done for all household members over the age of 18. Is that true or false? All right, so our poll results, we had 40% that said true and 53% that said false, so this is a little tricky. When we talk about adult functioning is that we are assessing all adults in the household in terms of their adult functioning. We may not document in the formal Family Functioning Assessment and FSFN, the adult functioning, if they are not somebody that is providing significant caregiving responsibility. But we are assessing all the adults in the household. So remember when I said earlier today about the assessment is the process, the document is where we document our assessment outcomes and determinations in order for us to identify whether or not somebody is or is not providing the significant caregiving role and responsibility in the household, we have to assess them. We have to gain their understanding of what their role is in the household and through doing that, we are also assessing their adult functioning. So when we talk about adult functioning, we are looking at who the parents and caregivers are as people, independent of the fact that they are caregiving or not caregiving. We wanna understand who they are on a day-to-day basis. We want to understand what others see of them and how they see themselves. We're looking for that overall functioning of, from day-to-day just not when we see them. So things that we wanna consider, life experiences, any habits that are good or negative, right? Their likes and dislikes as well and again, we're not talking about types of foods or colors. Their daily abilities, so when we talk about daily abilities we're looking at this from the standpoint of, is this adult able to meet their own daily needs? So for example do they have a physical disability or impairment that they're unable then to meet their daily needs and are relying on others. Do they have a mental disability that is prohibiting them from meeting their daily needs as well? We wanna look at any needs that they may have in terms of emotional or physical needs. We wanna look at their employment and just not their employment today, but their employment pattern. So when we think about employment pattern, we're looking at whether or not the family, the parent adult is stable. Do they have the capacity to obtain and maintain employment? Or is this somebody that is constantly getting jobs, losing jobs, getting jobs, losing jobs, right? We wanna look at their social experiences in particular their relationships with others. I just got done reading a case I think it was yesterday. And the mom had three children and nowhere in the PI's assessment, or even in the case management's assessment, did it ever mentioned or talk about the father of these children and the relationship that they had together, which the relationship may have some significance, in terms of how this mom is currently functioning, she's pretty severely depressed, she's been raising kids alone, she lacks income and resources, she's really struggling, and so trying to understand what that

relationship was like why there isn't support from her past significant other. Was there any sort of trauma that she experienced from her relationship with the children's father to help us understand how that may currently be affecting the mom, or how it's not currently affecting the mom. We also wanna look about relationships with others not just from an intimate standpoint, but also from friends and social supports, who are the supports of the family? What does that look like? How have they been supportive and how has the parent utilize those supports in the past, or even currently? We're trying to understand an overall picture of this adult as who they are and how they have come to this current place in their life. Again, this oftentimes we'll see in the documentation part of the Family Functioning Assessment, where it goes on and it talks about like where they were born, and they were raised in a two parent household that may be relevant to how somebody is functioning today, but it may not, and so part of your assessment is understanding, that how people are functioning today may or may not be shaped from their parents, or maybe it very much is shaped from their upbringing and what to then document that's relevant. What are we answering? We're answering whether or not parents or caregivers are able to manage their lives currently and historically. So I think we can all agree that most of the time that we get involved with families, it is at a high point in their lives. There is usually something that has gone on that has resulted in us being called to their home. So we wanna understand from a historical standpoint, in terms of resiliency, in terms of problem solving in terms of ability to recover, how things have gone for them historically that may then help us, especially if we're looking at this from a case management standpoint to identify strategies and interventions, to help them be successful in the future. Again, as I mentioned this is a family engaged strength-based approach, in terms of our Family Functioning Assessment, and so we don't wanna negate the fact that say, the family was doing very, very well for a long period of time, and they've had some really horrific negative family conditions that have arisen and maybe they're not handling it very well. We don't wanna negate all of the great things that they've done as an adult, right? It also gives us an understanding of how the parents or caregivers are managing those negative family conditions either currently, or historically. There's lots of families that have a high degree of resilience, and so we want to be able to capture on the resiliency in terms of how they've been managing, negative family conditions. For example, a negative family condition could be that you have a child that has special needs, you may be a single parent, you may be struggling financially but you have been managing and keeping children safe throughout that period of time. It's still a negative family condition, but they're doing it, and so we wanna make sure that we're capturing that for them as well. It also helps us to understand how others are viewing the parents and caregivers when we are engaging those collaterals about adult functioning. So it's just not on myopic viewpoint of the parent, we're looking at what we've observed, what the parent has shared with us, and reconciling that with collaterals. Sometimes as when we meet with families they may want to paint the best picture of themselves for us, and I understand that, and I appreciate that, but sometimes there are things that collaterals provide to us, that we then need to go back and reconcile with the parents. Again, we're not looking at this from a completely deficit driven aspect in the Family Functioning Assessment. We're trying to gain a realistic assessment of the family that takes into all different facets of both strength-based as well as recognizing needs. It also informs how the parents or caregivers, actions, behaviors, emotions are or are not resulting in threats to child safety. So, for example I mentioned to you I've been reading some cases lately, there was a danger threat that was identified that was for violent, impulsive, and acting dangerously, like the number one dangerous threat that's utilized, and when I looked at the adult functioning domain, there was no information there that articulated how the father was violent, impulsive were acting dangerously. A

matter of fact, it spoke very highly of him and mentioned no aggressiveness hostility, complications whatsoever. So we can't say on one hand somebody is violent, impulsive and acting dangerously and then not understand it in our adult functioning, and so we would say in that case, the domain was insufficient, and we need to be able to gather that information to support how an adult is functioning in terms of being violent, impulsive and acting dangerously. In the adult functioning domain, we are going to capture relevant criminal history as well as relevant prior CPS history, where there have been interventions. So for example, if we're trying to understand the parent, caregivers actions, behaviors, and emotions we may need to incorporate prior criminal history and what that criminal history was, and what was the outcome of that criminal history. So for example the father who's violent, impulsive, and acting dangerously, if he's had 10 restraining orders against him, and he's battered several individuals that would be relevant information into his adult functioning that I would be exploring with him, with collaterals, and coming to a conclusion in my adult functioning domain about how his violence is resulting in threats to child safety. Why we need to know this, for children are safe we need to confirm that their parents or caregivers are able to manage their own lives, in order to provide safety for their children, right? So as adults, we have to be able to take care of ourselves before we can take care of others. So we need to make sure that adults have that capacity to do so. For children that are unsafe we need to understand how those parents and caregivers actions have resulted in unsafe family condition, in order to sufficiently plan for safety and to guide our further case management actions. When we look at the sufficiency of that, some things to consider as you're reviewing case information what has shaped and how they've managed their lives, how they're currently managing their lives and historically what are their strengths and also their needs. And what are those behaviors that are resulting in dangerous conditions for the child? All right, let's talk about parenting. So parenting general, it's a parenting general oftentimes I see cases where it talks about like whether or not a pregnancy was planned or unplanned, or how children were delivered either C-section or other ways. When we talk about parenting general, it's not so much how a child got here, it's what has occurred for that parent since they've had their children. So some of the things that we're looking at are parenting practices, what are the parenting practices that go on in the household? You know, I've heard some folks say, well, you know, I'm a hands-off parents, you know? Or I'm a helicopter parents. So defining what those practices are. We also wanna look at their belief about being a parent, right? So when we talk about belief, we're not talking about, like I always wanted kids, I feel good about being a parent, it's really where they are aligned in terms of their role as a parent. Is their belief that their first and foremost priority in life is their children, or is their children number three, four, five, six on the list, we also wanna understand their reasons for being a parent, being a parent doesn't mean that you actually birth to a child, or that you're even biologically related to the child. We have lots of families where it is a blended family, where there is no biological relation between the child and their parents. And so we have opportunities to explore what the reason for being a parent is, why they have taken on this role or responsibility in terms of being a parent. We also wanna talk about their plan and their approach to parenting, right? So when we talk about plan and approach to parenting is, in terms of structure and routine, and why they are doing the things that they're doing as a parent, what are they hoping to achieve in terms of outcomes for their children? We also wanna talk about the daily parenting practices. So we're talking about routine and structure that goes on in the house, is that a co-parenting situation? Is that a 70/30 situation, who does what who's better at what? And why it may be set up that way? And then also addressing 'cause this is real for all of us that are parents, there are struggles and challenges with parenting. It is not all sunshine and rainbows, and oftentimes when we read the Family Functioning Assessment narratives or the

documentation of them, is it's all sunshine and rainbows? Well, any of you on the webinar know, parenting is not sunshine and rainbows. And so how families are addressing those struggles and those challenges in particular, when you think about our current global pandemic, there are lots of unique struggles and challenges that are going on that families are having to sort of weather the storm. The things that we need to consider when we're assessing the parenting general, is the age of the kids. How I parents a one and two year old, will look very different than how I'm parenting a 15 and 16 year old. So I need to reconcile the parenting strategies and practices, and my belief and also my approach in terms of the ages of the children. I also wanna consider any structure or routine or lack of structure and routine, and the implication that that has on children. I wanna look at the involvement that parents have with their children in terms of school or activities. And I also need to be able to take my child functioning that was sufficient, that identifies the needs of the kids and reconcile that to parenting. So what I mean by that is that if we have children that have special needs, whether it be autism or whether that'd be learning disabilities or maybe it's developmental delays, are the parents aligned and understand those needs and are taking action to address those needs, or are they not aligned? And they don't recognize those needs, and they've taken no action, right? We also need to look at the family interaction in terms of parenting, as I mentioned, we have lots of blended families, we have lots of people that are co-parenting in separate households. What does that look like in terms of struggles, challenges, or even the plan? I may have one plan, for the children when they're at my home, but when they go to their dad's home or their mom's home that plan may look very, very different and how is that impacting then me as a parent and my co-parenting relationships. So when we're assessing parenting we wanna make sure that we are gathering information from others about the parenting practices and observations of the parents to be able to inform our overall assessment of parenting. What are we answering? So we're looking for whether or not the parents are providing for the care, structure and development of their children to meet their children's needs. Again, we're not putting any weight or judgment in terms of they don't do it the way I would do it is are they doing it and is it good enough? That should be the threshold. It gives us an understanding of how the parents and caregivers view their role and responsibilities as caregivers. Are they somebody that's abdicating their role and responsibilities to others? That really, they didn't wanna be a parent. Maybe they're a young parent, maybe they're ill-equipped to be a parent, and so therefore they've abdicated those roles and responsibilities. It also gives us an understanding of how others are viewing the parenting and again, we all have judgements about how people parent their children. There are things that I do as a parent that maybe my husband wouldn't do as a parent. It still doesn't rise to the level of where it is not meeting the child's needs. And so that's one of those things that sometimes we have to be very clear, about what our biases are, when we're looking at parenting practices. So why do we need to know? If children are safe, we need to confirm that their needs are being met by their parents or caregivers. If they're unsafe, then there's a need is that someone is gonna be providing for their wellbeing. So we need to understand in terms of continuity for kids, what their parenting practices were, or that they had experienced because we need to be able to meet the needs of those kids in terms of the parenting practices. We also know that are impending danger threats that are associated to parenting, such as not meeting basic needs including supervision, that if we've identified that the parent is not meeting those basic needs, whoever is going to be assuming the care and responsibility for those kids, has to be able to meet those needs. So food, shelter, supervision, their emotional, physical needs and also their alignment and bonding. When we talk about the sufficiency of the information, we're looking at who the parents and caregivers are, and how they parent their children, we're reconciling that with the needs of the children and how the

parents or caregivers are meeting those needs. And do they understand the role of parenting and are they demonstrating parenting practices that are supporting and guiding their children. All right, poll number five as we move into, how do you discipline your kids? So this pulls another true, false, this domain is only concerned with if parents use physical discipline, true or false. All right, so 88% of you said false and you were absolutely right, yes, it is not just concerned with whether or not parents use physical discipline but I will tell you in reading lots and lots of cases, one of the most static statements that we see is like mother does not or father does not use physical discipline. So when we think about parenting discipline behavior management, I would love to rename this domain just to behavior management or parenting behavior management 'cause oftentimes we get thrown with this word discipline. And we oftentimes think about discipline from a physical standpoint, when we're talking about discipline, we are looking at a couple of different things, one is expectations, what are the expectations that the caregivers have for their children? What I mean by expectations is in terms of behavior in terms of responsiveness, in terms of responsibility, right? So if you think about expectations for a one-year-old versus expectations for a 10 year old, 11 year old or maybe a 16 year old. Are those expectations realistic, are they aligned with the child's needs and development? We also wanna look at how they communicate those expectations, are there things that the parent has in their head, about how a child should perform an act that they're not communicating in a clear, consistent manner, and or if they are communicating them, are they using effective communication to be able to articulate the expectations of them as parents, in terms of child behavior and also management. We wanna look at what are the rewards and consequences for the child when expectations are not met. So when we think about these expectations for example. If the expectation is that you put all your toys away, prior to going and watching TV at night, if the expectation if not putting your toys away is not met, what is the consequence? What is a natural consequence for the child and is it communicated? And is the child of a developmental age that they can understand the cause and effect relationship? What are the roles within the household for discipline and management of behavior? So for example, is it that I have mom or dad or significant other, that is the one that is the enforcer of the rules and the expectations in the household. And what does that look like? Does that emanate fear for children towards one parent versus the other, are the expectations and the roles in the household consistent? So for example, it may be that parent A, is more lenient and it doesn't matter whether the choice get picked up or not, it's still TV time. Whereas the other parent is not lenient and holds to those expectations, and there won't be TV time. And how that then affects the overall disciplinary practices and behavior management for kids, so things that we wanna look at as we're considering these four areas is the age of the children. So our expectations in align with the age of the child. If their rules in the household, are they established or not, and are they understood by the household? So for example, and a great assessment strategy for those is asking kids, right? So if you go back to our information collection protocol we're starting with the kids. So a good question to ask is, you know, what are some things that are expected of you in the house? Or do you have chores, or what do you do that you know you're not supposed to or that would get you into trouble? And if kids aren't able to answer that, in terms of like, I don't know or I don't do anything, or, "Yeah, if I don't do this, this and this, then I don't get to play my Xbox, PS five," whatever the new fangled device is. So you're looking then to then reconcile that information with the parent about the rules and whether or not kids do or do not understand them. We also wanna explore the consequences, what are they and are they known? And are they reasonable consequences? So for example, if the parent is imposing consequences that are unreasonable in terms of the needs of the child, in terms of what the rule was that was broken, and now is creating more trauma or not trauma,

but more turmoil on the household that may be unreasonable consequences or the rule breaking or not meeting an expectation. I forget that you know, I think I may get this thing wrong but oftentimes they say like you know, the punishment is to fit the crime. And so when you think about like something very minuscule you wanna not like you're grounded for the next six months, right? So you wanna make sure that there's that alignment. We also wanna understand the rationale for those rules and expectations, so why is it that the family has put these expectations into place for their children? Is it that they want them to understand manners and rules within society and abide by them? Is it that they are putting unrealistic expectations and are setting standards that are too high that's constantly creating concerns about self-worth for children, right? We also want to understand the roles of the caregivers. So are they aligned or are they not aligned? And what do they say about each other in terms of behavior management and discipline? So what are we answering? We're answering whether or not parents and caregivers are able to manage children, so what I mean by this is if we have children who have needs or high energy or may have some behavior concerns, are the parents able to manage those children, or are they resulting to inappropriate means of behavior modification? So for example, I know that you guys have heard of cases where, you know, kids are getting locked in rooms, locked in closets, or where you may have teens where the parents' response to their negative behaviors to lock them out of the house and tell them they're not welcome back in the home, right? So we're trying to understand whether or not those parents and caregivers are able to manage their children. It also gives us an understanding of how they're managing the children's emotional and social development around norms. I don't know if any of you've ever been to like a grocery store or even a restaurant and you look over and like the kids like thrown food across the aisle and like screaming at the top of their lungs, and the parents are just over there just still eating, it's like, that's probably not a norm, right? So how are they responding to societal norms and expectations? It also gives us an understanding of how others view the parents and caregivers expectations and consequences. Whether or not others view what the parents are doing in terms of growing and developing their children that's reasonable and also is effective, right? I used an example one time when I was a worker where the mom said, Oh, I use a one, two, three magic, which this was several years ago, and I don't think they really use it anymore. In her interview with me and then I got a chance to observe her and her son, and she attempted to use the one, two, three magic strategies. And the kid clearly had not any idea what the mom was talking about, and she finally just said to me, yeah, I just started using it the other day when you and I met, right? So she had not been using any sort of behavior modification prior to that, but felt the need to give me something that she thought I would want it to hear which clearly was not occurring in my observation, right? So sometimes we have folks that say, you know, I don't use physical discipline, I don't yell, I'm not a yeller. But others that will say, yeah, she's a yeller, and yes, she uses physical discipline. Again, we're not putting weight and judgment on physical discipline, we're trying to understand what is the cause that results, what is the action that results in physical discipline? And to what degree is that physical discipline effective or not effective, and whether it's harmful or not? It also informs how parents or caregivers in terms of their emotions and behaviors when they're managing these children's behaviors that are resulting in threats, child safety, we get a lot of reports in terms of physical injuries that when you go out and you're assessing... Folks that are using physical discipline that may have tipped the scale and it has gotten to the point where they've left a mark or an injury, you wanna try and understand what is the emotion that is going on with that parent that has resulted in that physical injury to the child. Were they actually calm and had a calm demeanor as they were delivering their discipline, their behavior management, or is it that they've lost control of their responses to children and their behaviors then as then resulted in them

using excessive force when disciplining children. So why we need to know, if they're safe, we need to confirm that parents or caregivers are able to manage the development of children regarding the norms and the structure of that we are hoping for children to achieve. If they're unsafe, we need to understand how the parent's inability to manage that disciplinary behaviors has resulted in an unsafe family condition in order to sufficiently plan for safety and to guide further case management actions. So if you think of one of our dangerous threats around child should have serious emotional symptoms and or behaviors, parenting general information directly correlates to those impending danger threats, and so therefore we need to understand what their responses are. We're looking for sufficient information around those rules and expectations and the consequences that are both positive and negative. So when we talk about the positive and the negative again, this is one area where we need to be cognizant about our own bias in terms of spanking or not spanking or using physical discipline or not using physical discipline. We have to be concerned with where physical discipline then crosses over to physical abuse and harm and injury. And I think I'll stop on that, and just leave you with just please be cognizant of our own biases around the use of physical discipline. 'Cause this domain goes further than just whether or not we're using physical discipline or not. It has to do with the disciplinary practices and the behavior management. We also wanna look at if there's variation in the rules and expectations and whether or not the families aligned in terms of the rules and expectations. So I'm gonna pause there and open it up to some questions.

- [Catarolyn] I guess this is more common since I had a mom who was 16 and I was unable to put her info or put her into the adult functioning because she is a child. It only lets me put someone who is 18 or older.

- Yeah, so I've seen a couple of those cases that have come in where you have kids that are having kids. And I don't believe it will allow you to, what I would say in that regard is you wanna be able to capture well, I guess two things. One, if the report is on as a parent caregiver to her child then you wanna be able to capture her parenting general and her parenting discipline behavior management. And you may just wanna expand upon your child functioning to capture here is who she is. Yes, she's still technically a child, but she is a parent, and so this is my parenting general for her and this is my parenting discipline behavior management underneath her child functioning section. I saw some other ones that are coming through, right? In terms of the Family Functioning Assessment and information collection frequently we will hear from folks or we'll even see in documentation that, you know, the parent refuse to answer any questions. Well, that's when we need to look at our collaterals and we go back to that information collection protocol right? So I may be a parent and I may say to you, "Thanks, but no, thanks, I'm not answering any of your questions," but if you've interviewed the children and this is where every interview that you do be thinking about all the domains in their totality. So as I'm interviewing, say one of the children victims, I'm asking not only about them, but I'm asking about their other household members. So I'm asking about mom, I'm asking about dad, I'm asking about maybe it's mom and mom or dad and dad. I'm asking about who is in their household and understanding who they are through the lens of a child. So that when I get to the parent and whether or not they do or do not wanna engage with me, I already gathered information about them to help inform my overall Family Functioning Assessment. And the same thing with collaterals. You know I may have a collateral at the school that I'm

gonna ask not just about my child victim, but I'm gonna ask about if there are the other siblings that are going to the school. And then I may also ask about what the level of involvement they've had with the parents in terms of understanding their involvement with the kids in the school, understanding their interactions with others and things of that nature. So you know, go back to the assessment process is exactly that is the process, right? We're continually gathering information and trying not to be myopic in that I'm sitting and I'm talking to Tarrin, and I'm only asking Tarrin about Tarrin. I'm gonna be asking Tarrin about her husband, her children, because I'm trying to gather information from multiple different viewpoints. And I'm trying to understand the different dynamics that are going on within the household. And the same thing, regardless of whether this is a PI or case management is the same thing. So from a case management standpoint I'm going, and say doing a home visit to my out of home safety plan provider who's grandma, I'm asking grandma just not about like, "Hey, how are things going since you've been taking care of your grandkids?" I'm trying to understand what grandma's view is on mom, dad, mom, mom, dad, dad, whoever, and utilizing that in my ongoing Family Functioning Assessment. And then also subsequently progress, right? So as families start to work on their case plan outcomes the things that I'm gonna be asking grandma is has she noticed a difference in mom? And if so, in what regards, you know, has she noticed that she is more even tempered than her interactions with their kids are more playful, right? So it's that constant assessment utilizing the information collection domains as sort of your framework to be engaging with families in regards to understanding who they are and how best to engage with them and ultimately assist them in being successful.

- [Catarolyn] Okay, and we have, it says the safety plan danger threat description versus the FFAHO, reasons for the ongoing involvement dangerous statement are not the same information, and it has a question mark. So I guess they're asking the question.

- Yeah, so here's what I will say, the safety summary then in the Family Functioning Assessment for the investigation should clearly articulate how the identifying impending danger threats have crossed over the impending danger threshold criteria. It shouldn't just be a restatement of the incident, it should be how we've taken this information. And we've said let's say, you know, not meeting basic needs. So if we think about the impending danger threshold criteria we're gonna break that down by how the imminence, the observable, the severity of the situation, how the child is vulnerable to that severe situation, right? So it's just not that they're vulnerable but that they're vulnerable to that specific family condition that is occurring. And we're gonna capture that in our safety planning analysis or not safety planning analysis, safety summary. As we move on to the ongoing Family Functioning Assessment, we're looking at the danger statement, where we may have more information than what the PI had to further understand how that impending danger is manifesting, and so our danger statement may change but the same criteria would be applied in terms of applying the impending danger threshold criteria and clearly articulating how that family condition has crossed over the impending danger threshold criteria or all of those impending danger threats that you've identified.

- [Catarolyn] So we do have, and I want to say that this may have come in, as you were talking, it says, who would go in the adult section then?

- So be it, remember this, we have the assessment process. Part of my assessment process is that I'm assessing all these individuals that may be underneath this household. And I'm coming to the conclusion about the determination around safety in terms of who is responsible for the caregiving of these children. So oftentimes I use my own household as an example, because my mother-in-law lives with us she would be somebody that you would come in and you would assess, and you would ask her questions, and you would wanna understand her role within this household. And you would ask the same of my husband and I, and our son at that time that he was, you know, he's not an adult, he is an adult but he was a youth. And throughout the assessment, what you would hear from me my husband, my son is that, yes, she's a household member but she has no significant caregiving responsibility. And that my assessment of her is that she doesn't pose a danger or any of weird family condition that is affecting the household composition of what's going on, and I'm gonna capture that in my case notes, in terms of my interview and my assessment of her. But when I go to document my Family Functioning Assessment in FSFN, she would not be in the adult functioning or in the parents or caregiving. And I would be able to, if I questioned as a supervisor or anybody that came back and said like "Hey, where's the other person that lives in the household?" I can go to that case notes and I can clearly see how everybody has identified her and she identified herself as somebody that does not provide caregiving responsibility. So you're assessing, right? So that the work is the assessment, the documentation is where I am capturing my decision-making and the information that I'm utilizing to make my decision. So and I wanna say that one more time because we get lots and lots of questions on this. Everything I do, right? Who I talk to, records I review, everything, that is the Family Functioning Assessment. And I capture in case notes who I've talked to, I capture in case notes sometimes even like review of documents, I'm taking all that information at the end and I'm saying, this kid is safe, or this kid is unsafe. At that point in time is when I go then to document the decision that I've made. So all the information that I've gathered has led me to the conclusion that this child is safe. When I go to document my decision in FSFN whether it be, whether it met the streamline or not is I'm gonna be clear and concise about here's child A, here's child B, here's child C, and I'm gonna take all the information that I've gathered and I'm gonna synthesize it down to be able to give a clear concise picture of every single person that I have assessed that is to inform my decision. So child A this is who child A is, I don't need to document dad said, mom said, she said, he said, this is who I talked to, it's not a cut and paste of your case notes over into the Family Functioning Assessment document. It is what did everybody say? What are the consistencies, and who this child is that I've taken and I've condensed down to give a clear concise picture of this child? And the same thing for parents and the same for parenting general. So oftentimes we get folks that'll say, this just seems duplicative, I already wrote this in my case note. A case note is a document to document your contact with whoever and relevant points. The assessment is the synthesis of your decision making and the information that you are utilizing to support your decision, does that?

- [Catarolyn] And I think that kind of makes it a little bit clearer because we do have a question it reads, can we document extended family that the child may identify as a close connection in this area?

- Yeah, I mean so think about it this way, like in terms of well, let's take a look at it from parenting general. So if I as a parent, I'm utilizing my parents as supports that may be part of my parenting practices, right? And it's like, yeah, you know what? I'm a single parent I'm working full time. You know, a huge support to me as my parents who, you know come on the weekends and pick up my son for a couple of days, it allows me sort of a breath of fresh air, right? It allows me to sort of collect myself. So identifying those resources and supports is great, how you then would utilize it to support your decision-making, is something that you'd have to look at in terms of whether or not that is relevant overall. And I don't know if I'm answering that clearly, but I mean, kids go and spend time at other people's houses all the time, and we don't include them in our Family Functioning Assessment. We're really looking at the household composition and collaterals that can support how people are not functioning, that doesn't result in an unsafe children. Thank you guys again, and I think that's it.

- [Catarolyn] So thank you all so much for your time and your attention and have a great day. Thanks, Tarrin.

- [Tarrin] Yeah, my pleasure.