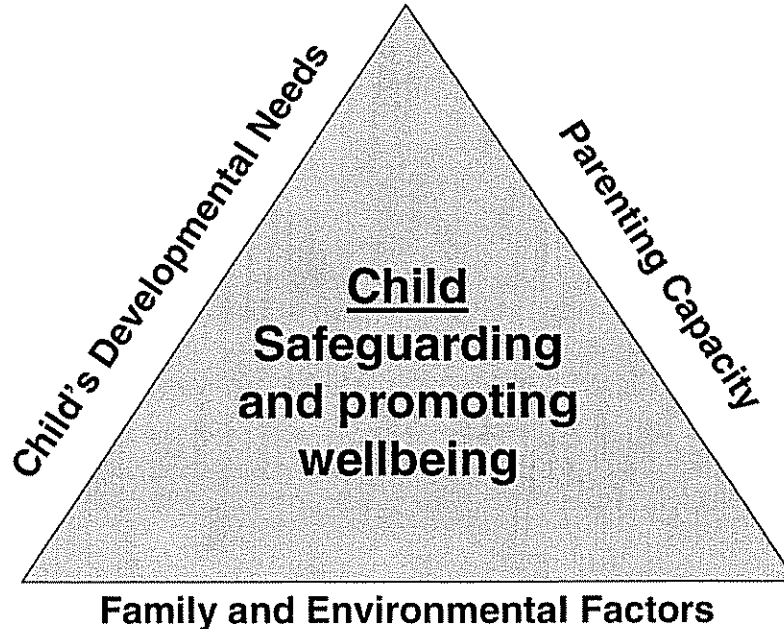


An Assessment Framework for Children/Youth in Need of Intervention and their Families

Assessing whether a child/youth is in need of intervention and understanding the nature of these needs requires a systematic approach which uses the same framework or conceptual map for gathering and analyzing information about all children/youth and their families, but discriminates effectively between different types and levels of need. It requires a thorough understanding of:

- the developmental needs of children/youth;
- the capacities of parents or caregivers to respond appropriately to those needs; and
- the impact of extended family and significant others and environmental factors on parenting capacity and children/youth.

These factors are described as three inter-related systems or domains, each of which has a number of critical dimensions. The interaction or the influence of these dimensions on each other requires careful exploration during assessment, with the ultimate aim being to understand how they affect the child/youth or children/youth in the family.



This analysis of the child/youth's situation will inform case planning and intervention services to secure the best outcomes for the child/youth. All assessment activity and subsequent planning and provision of services must focus on ensuring that the child/youth's wellbeing is safeguarded and promoted.

Dimensions of a Child/Youth's Developmental Needs

Assessment of what is happening to a child/youth requires that each aspect of a child/youth's developmental progress is examined, in the context of the child/youth's age and stage of development. This includes knowing whether a child/youth has reached his or her expected developmental milestones. Account must be taken of any particular vulnerability, such as a learning disability or a physically impairing condition, and the impact they may be having on progress in any of the developmental dimensions. Consideration should also be given to the socially and environmentally disabling factors that have an impact on a child/youth's development, such as limited access to services or societal discrimination. Children/youth who have been maltreated may suffer impairment to their development as a result of injuries sustained and/or the impact of the trauma caused by their abuse. There must be a clear understanding of what a particular child/youth is capable of achieving successfully at each stage of development, in order to ensure that he or she has the opportunity to achieve his or her full potential.

The **Child/Youth's Developmental** dimensions are described on the following page. These descriptions are intended to be **illustrative** rather than comprehensive of the different components of each dimension.

When caseworkers are undertaking an assessment of a child/youth's developmental needs, they should:

- identify the developmental areas to be covered and documented;
- plan how developmental progress is to be measured;
- ensure proper account is taken of a child/youth's age and stage of development;
- analyze information as the basis for planning future action.

DIMENSIONS OF CHILD/YOUTH'S DEVELOPMENTAL NEEDS

Health

Includes growth and development as well as physical and mental wellbeing. The impact of genetic factors and of any impairment should be considered. Involves receiving appropriate health care when ill, an adequate and nutritious diet, exercise, immunizations where appropriate and developmental checks, dental and optical care and, for older children/youth, appropriate advice and information on issues that have an impact on health, including sex education and substance misuse.

Education

Covers all areas of a child/youth's cognitive development that begins from birth. Includes opportunities: for play and interaction with other children/youth; to have access to books; to acquire a range of skills and interests; to experience success and achievement. Involves an adult interested in educational and cultural activities, progress and achievements, who takes account of the child/youth's starting point and any special educational needs.

Emotional and Behavioural Development

Concerns the appropriateness of response demonstrated in feelings and actions by a child/youth, initially to parents and caregivers and, as the child/youth grows older, to others beyond the family. Includes nature and quality of early attachments, characteristics of temperament, adaptation to change, response to stress and degree of appropriate self-control.

Identity/Cultural

Concerns the child/youth's growing sense of self as a separate and valued person. Includes the child/youth's view of self and abilities, self-image and self esteem, and having a positive sense of individuality. Race, religion, age, gender, sexuality and disability may all contribute to the child/youth's identity. Feelings of belonging and acceptance by family, peer group and wider society, including other cultural groups.

Family and Social Relationships

This dimension illustrates the development of empathy and the capacity to place self in someone else's shoes. Includes a stable and affectionate relationship with parents or caregivers, good relationships with siblings, increasing importance of age

appropriate friendships with peers and other significant persons in the child/youth's life and response of family to these relationships.

Social Presentation

This dimension concerns the child/youth's growing understanding of the way in which appearance, behaviour, and any impairment are perceived by the outside world and the impression being created. Includes appropriateness of dress for age, gender, culture and religion; cleanliness and personal hygiene; and availability of advice from parents or caregivers about presentation in different settings.

Self Care Skills

Concerns the acquisition by a child/youth of practical, emotional and communication competencies required for increasing independence. Includes early practical skills of dressing and feeding, opportunities to gain confidence and practical skills to undertake activities away from the family and independent living skills as older children/youth. Includes encouragement to acquire social problem solving approaches. Special attention should be given to the impact of a child/youth's impairment and other vulnerabilities, and on social circumstances affecting these impairments in the development of self care skills.

Additional Resources:

www.med.umich.edu/1libr/yourchild/devmile.htm

www.kidsgrowth.com/stages/guide/index.cfm

www.child.gov.ab.ca (link development chart)

Dimensions of Parenting Capacity

Critically important to a child/youth's health and development is the ability of parents or caregivers to ensure that the child/youth's developmental needs are being appropriately and adequately responded to, and to adapt to his or her changing needs over time. Again, these descriptions are illustrative rather than comprehensive of all parenting tasks. It is important that parenting capacity is considered in the context of the family's structure and functioning, and who contributes to the parental care of the child/youth.

In family situations where there is cause for concern about what is happening to a child/youth, it becomes even more important to gather information about how these tasks are being carried out by each parent or caregiver in terms of:

- their response to a child/youth and his or her behaviour or circumstances;
- the manner in which they are responding to the child/youth's needs and the areas where they are experiencing difficulties in meeting needs or failing to do so;
- the effect this child/youth has on them;
- the quality of the parent – child/youth relationship;
- their understanding of the child/youth's needs and development;
- their comprehension of parenting tasks and the relevance of these to the child/youth's developmental needs;
- the impact of any difficulties they may be experiencing themselves on their ability to carry out parental tasks and responsibilities (distinguishing realization from aspiration);
- the impact of past experiences on their current parenting capacity;
- their ability to face and accept their difficulties;
- their ability to use support and accept help;
- their capacity for adaptation and change in their parenting response.

Observation of interactions is as important to the assessment as the way they are described by the adults involved.

The parenting tasks undertaken by fathers or father figures should be addressed alongside those of mothers or mother figures. In some families, a single parent may be performing most or all of the parenting tasks. In others, there may be a number of important caregivers in a child/youth's life, each playing a different role that may have positive or negative consequences. A wide range of adults, for example grandparents, step relations, day care staff or baby sitters, may have a significant role in caring for a child/youth. A distinction needs to be clearly made between the contribution of each parent or caregiver to a child/youth's wellbeing and development. Where a child/youth has suffered

significant harm, it is particularly important to distinguish between the capabilities of the abusing parent and the potentially protective parent. This information can also contribute to an understanding of the impact the parents' relationship with each other may have on their respective capacities to respond appropriately to their child/youth's needs. The quality of the inter-parental relationship has an impact on the child/youth's wellbeing and will be considered more explicitly in the following section on family and environmental factors.

DIMENSIONS OF PARENTING CAPACITY

Basic Care

Providing for the child/youth's physical needs, and appropriate medical and dental care. Includes provision of food, drink, warmth, shelter, clean and appropriate clothing and adequate personal hygiene.

Ensuring Safety

Ensuring the child/youth is adequately protected from harm or danger. Includes protection from significant harm or danger and from contact with unsafe adults/other children/youth and from self-harm. There is recognition of hazards and danger both in the home and elsewhere.

Emotional Warmth

Ensuring the child/youth's emotional needs are met and giving the child/youth a sense of being specially valued and a positive sense of their own racial and cultural identity. Includes ensuring the child/youth's requirements for secure, stable and affectionate relationships with significant adults, with appropriate sensitivity and responsiveness to the child/youth's needs. There is appropriate physical contact, comfort and cuddling sufficient to demonstrate warm regard, praise and encouragement.

Stimulation

Promoting child/youth's learning and intellectual development through encouragement and cognitive stimulation and promoting social opportunities. Includes facilitating the child/youth's cognitive development and potential through interaction, communication, talking and responding to the child/youth's language and questions, encouraging and joining the child/youth's play, and promoting educational opportunities. Enabling the child/youth to experience success and ensuring school attendance or equivalent opportunity. Facilitating child/youth to meet challenges of life.

Guidance and Boundaries

Enabling the child/youth to regulate its own emotions and behaviour. The key parental tasks are demonstrating and modeling appropriate behaviour and control of emotions and interactions with others. Parents provide guidance that involves setting boundaries, so that the child/youth is able to develop an internal model of moral values, conscience, and social behaviour appropriate for the society within which they will grow up. The aim is to enable the child/youth to grow into an autonomous adult, holding their own values, and able to demonstrate appropriate behaviour with others rather than having to be dependent on rules outside themselves. This includes not over protecting children/youth from exploratory and learning experiences. Includes social problem solving, anger management, consideration for others, and effective discipline and shaping of behaviour.

Stability

Providing a sufficiently stable family environment to enable a child/youth to develop and maintain a secure attachment to the primary caregiver(s) in order to ensure optimal development. Includes: ensuring secure attachments are not disrupted, providing consistency of emotional warmth over time and responding in a similar manner to the same behaviour. Parental responses change and develop according to child/youth's developmental progress. In addition, ensuring children/youth keep in contact with important family members and significant others.

Family and Environmental Factors

The care and upbringing of children/youth does not take place in a vacuum. All family members are influenced both positively and negatively by the extended family and significant others, the neighbourhood and social networks in which they live. The history of the child/youth's family and of individual family members may have a significant impact on the child/youth and parents. Some family members, for example, may have grown up in a completely different environment to the child/youth, others may have had to leave their country of origin because of war or other adverse conditions, and others may have experienced abuse and neglect as children/youth.

The narration and impact of family histories and experiences can play an important part in understanding what is happening currently to a family. An adult's capacity to parent may be crucially related to his or her childhood experiences of family life and past adult experiences prior to the current difficulties. The family may be in transition, for example refugee families.

An understanding of how the family usually functions and how it functions when under stress can be very helpful in identifying what factors may assist parents in carrying out their parenting roles. Of particular importance is the quality and nature of the relationship between a child/youth's parents and how this affects the child/youth. For example, sustained conflict between parents is detrimental to children/youth's wellbeing. The quality of relationships between siblings may also be of major significance to a child/youth's wellbeing. Account must be taken of the diversity of family styles and structures, particularly who is considered family and who is important to the child/youth.

The impact of multiple caregivers will need careful exploration, with an understanding of the context in which the care is being provided.

FAMILY AND ENVIRONMENTAL FACTORS

Family History and Functioning

Family history includes both genetic and psycho-social factors. Family functioning is influenced by who is living in the household and how they are related to the child/youth; significant changes in family/household composition; history of childhood experiences of parents; chronology of significant life events and their meaning to family members; nature of family functioning, including sibling relationships and its impact on the child/youth; parental strengths and difficulties, including those of an absent parent; the relationship between separated parents.

Extended Family & Significant Others

Who are considered to be members of the extended family by the child/youth and the parents? Includes related and non-related persons and absent extended family. Who are considered to be significant others by the child/youth and the parents? What is their role and importance to the child/youth and parents and in precisely what way?

Housing

Does the accommodation have basic amenities and facilities appropriate to the age and development of the child/youth and other resident members? Is the housing accessible and suitable to the needs of disabled family members? Includes the interior and exterior of the accommodation and immediate surroundings. Basic amenities include water, heating, sanitation, cooking facilities, sleeping arrangements, cleanliness, hygiene and safety and their impact on the child/youth's upbringing.

Employment

Who is working in the household, their pattern of work and any changes? What impact does this have on the child/youth? How is work or absence of work viewed by family members? How does it affect their relationship with the child/youth? Includes children/youth's experience of work and its impact on them.

Income

Is Income available over a sustained period of time? Is the family in receipt of all its benefit entitlements? Is the income sufficient to meet the family's need? The way resources available to the family are used. Are there financial difficulties that affect the child/youth?

Family's Social Integration

Exploration of the wider context of the local neighbourhood and community and its impact on the child/youth and parents. Includes the degree of the family's integration into the community or isolation, their peer groups, friendships and social networks and the importance attached to them.

Community Resources

Describes all facilities and services in a neighbourhood, including universal services of primary health care, day care and schools, places of worship, transport, shops and leisure activities. Includes availability, accessibility and standard of resources and impact on the family, including disabled members.

In families where a parent is not living in the same household as the child/youth, it is important to identify what role that parent has in the child/youth's life and the significance to the child/youth of the relationship with that parent. It cannot be assumed that parents who live apart are estranged. This arrangement may be by mutual agreement.

A wide range of environmental factors can either help or hinder the family's functioning. It is important to think broadly and creatively about the family and environmental factors described on the previous page.

Example

Careful account should be taken of how these factors are influencing both a child/youth's progress and the parents' responses. This can be illustrated by the following examples of the inter-relationship between such factors and a child/youth's development:

Family History

- A child/youth may have a genetic condition or pre-disposition, such as sickle cell disorder or Huntington's chorea, which may affect current or future physical or mental health and the need for services.

Family Functioning

- Despite a recent separation, the parents co-operate regarding decisions about key events in a ten year-old boy's life such that he continues to attend the same school, maintains a strong group of friends, and is fully supported in his education by both parents. This supports him to do well in school.

Extended Family & Significant Others

- A child/youth may have developed a close, affectionate attachment to a friend's parent who, over a number of years, compensates for chronic parental problems in the family home, giving that child/youth a sense of belonging and self-esteem. This may become a resource to be mobilized at the time of family breakdown.

Housing

- Accommodation that is damp, infested and overcrowded may be contributing to a low birth weight baby's failure to thrive and chronic ear, nose and chest problems, requiring urgent action.

Employment

- The expectation that a thirteen year-old girl will assist regularly in the family business may result in her sudden failure to keep up with schoolwork and difficult behaviour in class.

Income

- A low income over many years and parents' inability to manage on this income may mean a young adolescent is being bullied at school simply because he is wearing clothes which do not have the correct designer logo.

Family's Social Integration

- Constant racial harassment and bullying in a neighbourhood may result in a teenager from a minority ethnic family being isolated and excluded from positive and affirming friendship group experiences at a formative stage of developing his identity.

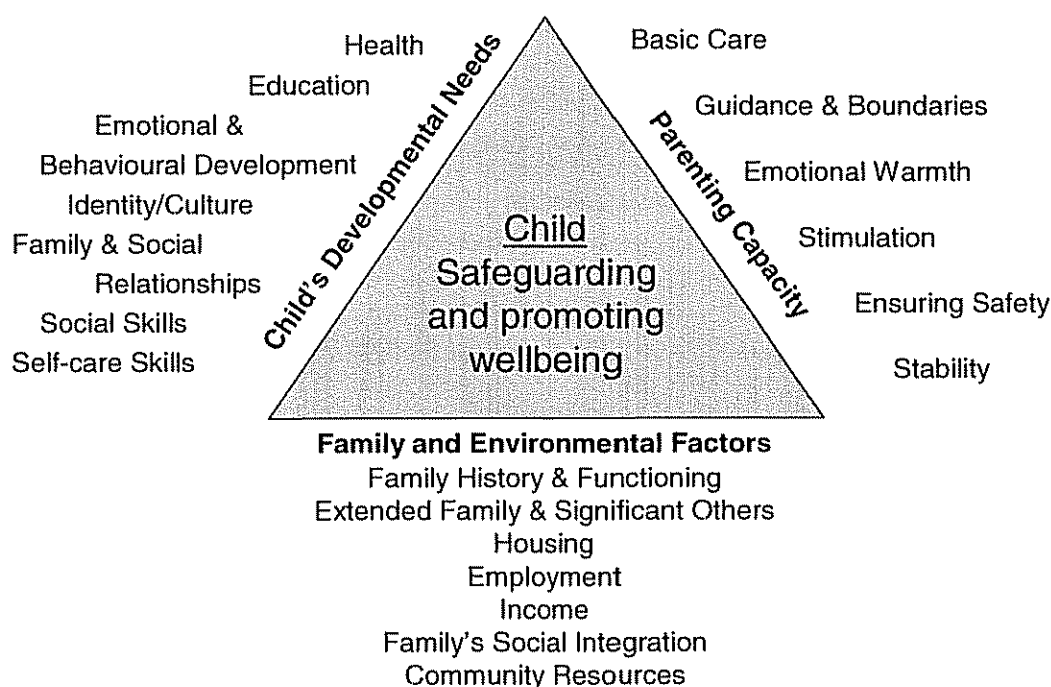
Access to Community Resources

- Knowledge of resources available in the community which are accessible and accommodate disabled children/youth may enable an isolated single mother to organize out of school care and activities for her 6 year old disabled child/youth, thus enabling her to continue working.

Summary

The complex interplay of factors across all three domains should be carefully understood and analyzed. Parents may be experiencing their own problems that may have an impact on their capacity to respond to their child/youth's needs. As examples, illiterate parents may be unable to read or respond to notes sent home from school or witnessing her mother being regularly assaulted by her father may traumatize a child/youth.

Assessment Framework Triangle



The interactions between different factors are often not straightforward. Due to the complexity of these interrelationships:

- information should be gathered and documented systematically with care and precision;
- information is checked and discussed with parents and, when appropriate, with the child/youth;
- differences in views about information and its importance are clearly documented;
- the strengths and difficulties within families are assessed and understood;
- the vulnerabilities and protective factors in the child/youth's world are examined;
- the relationship between the child/youth's outcomes and the current family, community context is clearly identified.

An Assessment Framework for Children in Need of Intervention and their Families

The Assessment Framework is, therefore, a conceptual map that can be used to understand what a child/youth is experiencing, in their multiple environments. For most children/youth referred or whose families seek help, the issues of concern will be relatively straightforward, parents will be clear about requiring assistance and the impact on the child/youth will not be difficult to identify. For a smaller number of children/youth, the causes for concern will be serious and complex and the relationship between their needs, their parents' responses and the circumstances in which they are living, less straightforward. In these situations, further, more detailed and, in some cases, specialist assessments will be required.

The Process of Assessing Children/Youth in Need of Intervention

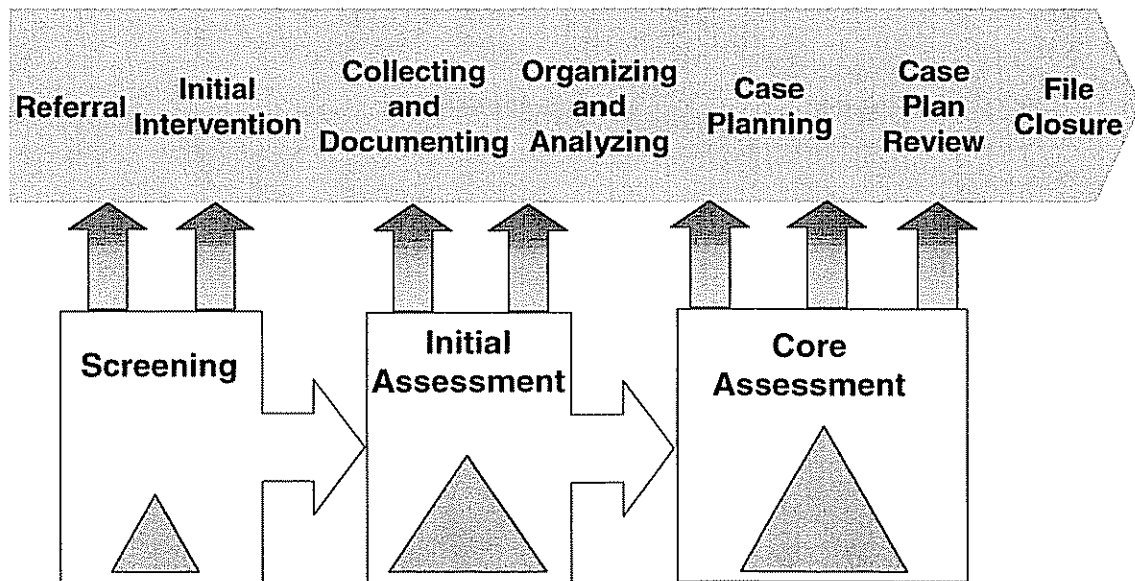
Assessment is a key component in the process of helping a vulnerable child/youth and his or her family, its purpose being “to contribute to the understanding necessary for appropriate case planning” and action. Assessment has several phases that overlap and support planning, action and review:

- clarification of source of referral and reason;
- acquisition of information;
- exploring facts and feelings;
- giving meaning to the situation which distinguishes the child/youth and family’s understanding and feelings from those of the professionals;
- reaching an understanding of what is happening, problems, strengths and difficulties, and the impact on the child/youth (with the family wherever possible); and
- drawing up an analysis of the needs of the child/youth and parenting capacity within their family and community context as a basis for formulating a plan.

The response from the caseworker to an initial contact or a referral requesting help is critically important. At that point the foundation is laid for future work with the child/youth or family.

The Assessment Tools

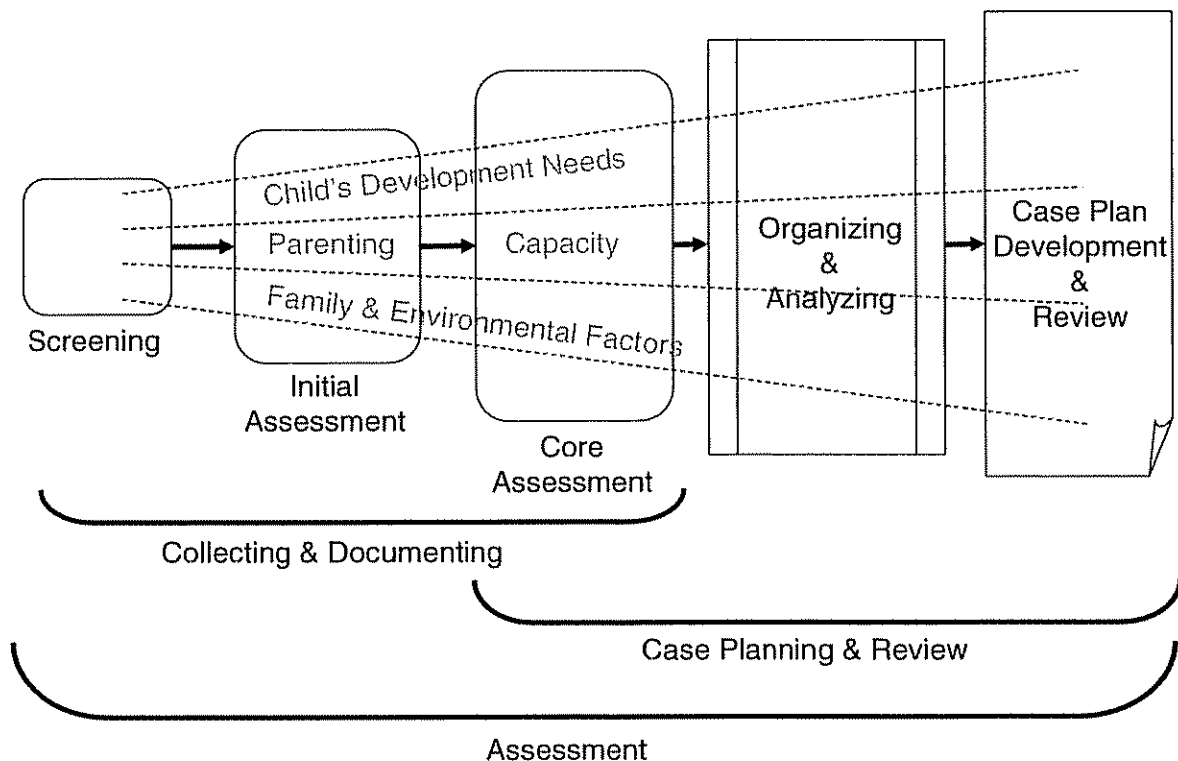
It is important that we differentiate the Assessment Framework and the assessment tools. The assessment tools (enhanced screening, initial assessment and core assessment) are key supports to the assessment framework; they are not the assessment framework. The tools are designed to ensure that complete and accurate information is always available to make informed decisions from referral to file closure.



“Good tools cannot substitute for good practice, but good practice and good tools together can achieve excellence.”

Assessment Continuum

Under the Assessment Framework, the process of assessment is treated as a continuum. Starting with screening and through to the core assessment, the assessment process is guided by the domains. As we move through the assessment process we are continually gathering greater amounts of detail in each domain. It is important that whoever is responsible for the data collection is using the same “set of lenses” so that the detail captured later in the process can be linked with the information collected at the start of the process. For example the main headings of both the initial and core records are organized according to the Assessment Framework domains and dimensions.



Initial Assessment

The Initial Assessment Document continues the process of systematic information gathering, commenced during screening activities, and the analysis of this material.

The Initial Assessment Covers:

- **The Child/Youth's Developmental Needs.** These are set out under the seven dimensions in the Assessment Framework.
- **Parents'/Caregivers' Capacities to Respond Appropriately to the Child/Youth's Developmental Needs.** It is important that parent's strengths as well as weaknesses are documented for each dimension of the Child/Youth's Developmental Needs.
- **Family and Environmental Factors which have an Impact on the Family.** The environment within which children/youth and families live can play an important role in reducing or increasing the stresses on families, depending on the support available to them.

The key purpose of the Initial Assessment is to determine the child/youth's intervention needs and determine the type of services that may be required. The fact that a decision is made to carry out a core assessment should not prevent a child/youth or family receiving services that are necessary to support them.

Completion of the Initial Assessment Record

Reason for Initial Assessment

This information will be taken from the Screening Summary and will provide brief details of why an Initial Assessment is being undertaken.

Child/Youth's Developmental Needs

The child/youth's strengths and current needs should be documented under each of the developmental dimensions listed. For example, in the case of Daniel Williams aged eighteen months:

Health Daniel was born profoundly deaf. In areas other than speech, Daniel's development is at the expected level.

Parents'/Caregivers' Capacities to Respond Appropriately to the Child/youth's Needs

Document the strengths and challenges of all parents/caregivers for each of the dimensions of the Child/youth's Developmental Needs. It is important to document not simply that an issue is present but to whom it refers and its effect on parenting capacity. For example:

Basic Care Mr. Williams is at times unable to care for Daniel. However Mr. Williams is able to respond to Daniel's needs.
Physical/Mental Illness Mrs. Williams has suffered from postnatal depression since the birth of Daniel earlier this year. Mrs. Williams is receiving medication for this.

It is also important to document in this section any adult who poses a risk of significant harm to the child/youth. For example, if a caregiver or other adult in the home has a prior involvement with intervention services this information must be documented.

Family and Environmental Factors

It is important to document factors that support families as well as those that increase stress. For example, extended family may offer a great deal of support to a young lone parent, alternatively they may compound their difficulties. It is also important to note how family and environmental factors have impact on the child/youth and family. For example:

Housing The family lives on the 10th floor of an apartment block. The exterior of the building is in poor condition. However Mr. and Mrs. Williams keep the apartment in good condition.

Analysis Of Information Gathered During The Initial Assessment

The analysis should identify the factors that have an impact on different aspects of the child/youth's development and parenting capacity, and explore the relationship between them. This process of analyzing the information available about the child/youth's needs, parenting capacity and extended family and environmental factors should result in:

- a clear understanding of the child/youth's needs, and
- what types of service provision would best address these needs to ensure the child/youth has the opportunity to achieve his/her potential.

It is important to include any evidence that the child/youth is suffering or likely to suffer significant harm.

Decisions

This section should be completed following consultation with a supervisor. (*Refer to policy on "Initial Assessment" for further information*).

Action Arising from the Initial Assessment

This section is used to document any actions taken during or on completion of the initial assessment. The boxes indicate the range of options for actions taken. (*Refer to policy on "Initial Assessment" for further information*).

Core Assessment Record

The Core Assessment record is used to complete the “Extended Assessment” activities described in the Differential Response policy.

A Core Assessment record must be completed for all opened family enhancement and protective services files. **If the extended assessment has not been completed prior to opening a file, then it must be completed upon the opening of a file.**

The core assessment will further assist the caseworker in determining the child/youth’s need for intervention and type of services required.

The core assessment will build on the information gained during Initial Assessment and/or investigation activities. The core assessment activities must be completed within a 30 working day time period.

The core assessment can occur either:

1. after the completion of the initial assessment and/or investigation and prior to opening a family enhancement or protection file if further assessment is required;
or
2. after the file has been opened in family enhancement or protection services.

In many cases a number of caseworkers and agencies will know the family. Although it is the responsibility of the caseworker to complete the Core Assessment Document information may be gathered from many other sources.

Purpose of the Core Assessment Record

The Core Assessment Record is intended to aid caseworkers undertaking a core assessment by providing a framework to systematically build on the information gathered during initial assessment/investigation in a manner which facilitates analysis and planning.

The Core Assessment Records are structured to document information in each of the three domains of the Assessment Framework.

The Core Assessment Records

There are five age related Core Assessment Records. The age bands for the Core Assessment Records are: 0–1; 1-2; 3-4; 5-10; 11-15, and 16 and over.

Structure of Core Assessment Records

The structure of each Core Assessment Document for each age band is the same. Each document can be considered to have two parts; information gathering, and analysis and planning.

Information gathering

Sources of Information

Document the sources of information and methods used to gather information during the core assessment. This includes agencies involved, meetings with family members, questionnaires and scales and other instruments used. This information can be completed as the assessment progresses.

Child/Youth's Developmental Needs/Parenting Capacity

This section records information about the child/youth's developmental needs and the parents' capacities to respond to these needs appropriately. There are a series of questions for each the dimensions within the Child/youth's Developmental Need Domain.

The first part of each section records key needs for each child/youth. A Yes/No box is included next to each of the key needs. The purpose of these boxes should be understood clearly. The Core Assessment Document is not a questionnaire. The Yes/No boxes are included to ensure that information identified from research as significant for the child/youth's development or wellbeing is documented.

The questions will assist caseworkers and supervisors to quickly identify the key factors in an assessment. However ticking the boxes alone is not enough. It is important that further information is included to provide the context for information that is documented. The space to document this information is limited. This is not to encourage caseworkers to be brief, but to be relevant. Caseworkers should consider the significance of information before it is entered into the document.

An Assessment Framework for Children in Need of Intervention and their Families
For Example – From Education Dimension, Child/youth Aged 5 –10

Stimulation	Yes	No	
Parent regularly reads, tells stories, plays counting games, and watches TV with child.	<input type="checkbox"/>	<input type="checkbox"/>	Mrs. Foli's depression means that at times she has no energy to play games with Kwane. However, Mr. Foli regularly plays with him and reads to him each evening.
Other	<input type="checkbox"/>	<input type="checkbox"/>	

Following information about the child/youth's needs, information about the parents' capacities to respond appropriately to those needs is documented. Parents' capacities are detailed across the six areas identified in the parenting capacity domain: basic care; ensuring safety; emotional warmth; stimulation; guidance and boundaries; and stability. Key parenting responses, identified from research, are included for each area. It is important to document the strengths as well as weaknesses of parents.

If any of the key areas identified are not appropriate for the child/youth or parents, they can be marked N/A. In addition, it is important that the reason the issue is not considered to be relevant is documented.

At the end of each of the child/youth's developmental dimensions is a summary section. This is to enable caseworkers to summarize the child/youth's needs and parents' capacities to respond to them appropriately. In completing this section caseworkers should consider the impact on the child/youth's development needs which are not responded to appropriately. The research information on the left-hand side of the page is intended to help with this process.

Parents/Caregivers Attributes and the Impact on their Capacity to Ensure the Child/youth's Safety from Harm and to Respond Appropriately to His/Her Needs

This section is designed to assist in determining the parental capacity to address developmental needs of the child/youth. Issues such the parents' physical and mental health, history of violence and other attributes are documented and summarized in the summary.

Family and Environmental Factors

The final section of the information gathering part of the Core Assessment Document is concerned with the Family and Environmental Factors domain of the Assessment Framework. The layout of this area is similar to those covering the child/youth's developmental needs, which includes a series of yes/no question, space for comments plus a Summary section at the end.

Summary, Analysis and Plan

A great deal of time and effort goes into the information gathering stage. This results in an assessment that focuses on describing what is happening. However, often less attention is given to the analysis of the information gathered. Analysis takes the assessment process beyond surface considerations and explores:

- why particular strengths and difficulties are present,
- the relationship between these and the implications of them for the child/youth and other family members,
- as well as considering what types of services would best help the child/youth and family members.

The second part of the Core Assessment Document therefore is concerned with analysis and planning.

Summary

The second part of the document starts with a summary of the needs, strengths and difficulties identified in each of the three domains. Youth and parents are asked for their views. This provides an opportunity for them to contribute to the assessment summary. If possible they should be encouraged to write their views themselves or to indicate them in some other form of communication, which can then be documented.

Analysis

The next section is for caseworkers to analyze the significance and consequences of the needs, strengths and difficulties identified in the assessment. This is a key stage in the assessment process. Caseworkers should consider the inter-relationship between each of the domains of the *Assessment Framework for Children/Youth in Need and their Families*. For example, a child/youth's difficult and demanding behaviour may be linked to a parent's depression, which may in turn lead to the home environment being neglected. It will be helpful to list key protective and stress factors in each domain and indicate how they relate to those identified in the other domains. It is important that strengths as well as difficulties are identified. Parental and family strengths should be built on and used to inform the plan. When analyzing the information gathered, caseworkers should also evaluate the impact on the child/youth and family of any services already provided.

Objectives and Plans

This section records the objectives and the actions which are to be achieved to ensure that all of the child/youth's identified needs are responded to appropriately. The objectives of the plan should be specific, measurable and have clear time scales. The actions should include those to be taken by the child/youth and family members, regional authorities and all other relevant agencies. It is important that the child/youth, as appropriate, and family members are involved in agreeing the objectives and actions to be taken and that they are able to comment on the plan. This will enable the plan to serve as a written agreement.

The Family Pack of Questionnaires and Scales

There is a wide range of questionnaires and instruments available for use when assessing children/youth and families. The following eight questionnaires and scales can be used following a process of familiarization with the materials, but do not require any formal training.

The chosen assessment instruments focus on the child/youth's mental health and development, parental mental health, parenting capacity and the family environment. A description of each questionnaire or scale is given below. Each questionnaire should be used for the purpose for which it was developed. They are intended to contribute to the overall assessment and should be applied with sensitivity and understanding.

- The **Strengths and Difficulties Questionnaire** incorporates five scales: pro-social, hyperactivity, emotional problems, conduct problems, and peer problems. In the pack, there are versions of the scale to be completed by adult caregivers, or teachers for children/youth from age 3 to 16, and children/youth between the ages of 11 – 16. These questionnaires have been used with disabled children/youth and their teachers and caregivers.
- The **Parenting Daily Hassles Scale** (Crnic and Greenberg, 1990, Crnic and book, 1991). This scale aims to assess the frequency and intensity/impact of 20 potential parenting 'daily' hassles experienced by adults caring for children/youth. It has been used in a wide variety of research studies concerned with children/youth and families – particularly families with young children/youth. It has been found that parents (or caregivers) generally like filling it out, because it touches on many aspects of being a parent that are important to them.
- The **Home Conditions Assessment** (The Family Cleanliness Scale. Davie et al, 1984) addresses various aspects of the home environment (for example, size, state of surfaces in house, floors). The total score has been found to correlate highly with indices of the development of children/youth.
- **Adult Wellbeing Scale** (Irritability, Depression, Anxiety – IDA Scale. Snaith et al, 1978). This scale, which was based on the Irritability, Depression and Anxiety Scale, was devised by a social worker. The questions are framed in a 'personal' fashion (i.e. I feel, my appetite is...). This scale looks at how an adult is feeling in terms of their depression, anxiety and irritability. The scale allows the adult to respond from four possible answers, and enables the adult several choices with little restriction. This could enable the adult to feel more empowered.

An Assessment Framework for Children in Need of Intervention and their Families

- The **Adolescent Wellbeing Scale** (Self-rating Scale for Depression in Young People, Birlson, 1980). It was originally validated for children/youth aged between 7 – 16. It involves 18 questions each relating to different aspects of a child/youth or adolescent's life and how they feel about these. Although children as young as seven or eight have used it, older youth's thoughts and beliefs about themselves are more stable. The scale is intended to enable caseworker to gain more insight and understanding into how an adolescent feels about their life.
- The **Recent Life Events Questionnaire** This scale was taken from Brugha et al (1985), with nine additional terms added. It focuses on recent life events (i.e. those occurring in the last 12 months) but could be used over a longer time-scale. It is intended to assist in the compilation of a social history. Respondents are asked to identify which of the events still affects them. It is hoped that use of the scale will:
 - result in a fuller picture of a family's history and contribute to greater contextual understanding of the family's current situation;
 - help caseworkers explore how particular recent life events have affected the caregiver and family;
 - in some situations, identify life events which family members have not reported earlier.
- The **Family Activity Scale** (derived from the Child/youth – Centredness Scale, Smith, 1985). These scales give caseworkers an opportunity to explore with caregivers the environment provided for their children/youth, through joint activities and support for independent activities. This includes information about the cultural and ideological environment in which children/youth live, as well as how their caregivers respond to their children/youth's actions (for example, concerning play and independence). They aim to be independent of socio-economic resources. There are two separate scales; one for children/youth aged 2 – 6, and one for children/youth aged 7 – 12
- The **Alcohol Scale** This scale was developed by Piccinelli et al (1997). Alcohol abuse is estimated to be present in about 6% of primary caregivers, ranking it third in frequency behind major depression and generalized anxiety. Higher rates are found in certain localities, and particularly amongst those parents known to social services departments. Drinking alcohol affects different individuals in different ways. For example, some people may be relatively unaffected by the same amount of alcohol that incapacitates others. The primary concern therefore is not the amount of alcohol consumed, but how it impacts the individual and, more specifically, their role as a parent.

An Assessment Framework for Children in Need of Intervention and their Families

This questionnaire has been found to be effective in detecting individuals with alcohol disorders and those with hazardous drinking habits.

Generally, these questionnaires and scales have been found to have a number of applications in practice:

- to strengthen the voice of the child/youth or family in the assessment process;
- to clarify the nature and extent of need, either raising new issues or revealing new information during their use, or enabling practitioners to reassure families of progress;
- to provide a focus for assessment and a structure to create an intervention plan;
- to provide a way of structuring discussions with families about issues the families are reluctant or feel unable to discuss;
- to provide an evidence base for reports;
- to monitor progress over time while maintaining open communication between the caseworker and family as to which areas require change and improvement in order to alleviate the child/youth's need for intervention.

The Family Pack of Questionnaires and Scales is available online at:
<http://www.dh.gov.uk/Home/fs/en>.