

North Carolina Infant-Toddler Program Procedural Guidance Family-Directed Assessment

Reference: Screening, Evaluation and Assessment Policy

Introduction

If the child is determined eligible as an infant or toddler with a disability for the North Carolina Infant-Toddler Program (NC ITP), the Children's Developmental Services Agency (CDSA) must ensure that the child receives a **Family-Directed Assessment**. The Family Directed Assessment includes the resources, priorities, and concerns of the family and the identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of that infant or toddler.

Definitions

Assessment means the ongoing procedures used by qualified personnel to identify the child's unique strengths and needs and the early intervention services and supports appropriate to meet those needs throughout the period of the child's eligibility. This includes the **assessment of the child** and the assessment of the child's family. *(For additional information, please refer to the Child Assessment Procedural Guidance's.)*

Initial Assessment refers to the **child assessment** and the family-directed assessment conducted **prior to the child's first Individualized Family Services Plan (IFSP) meeting**. This is different than the process to determine eligibility.

Requirements

1. If the child's Part C eligibility is established, the CDSA must conduct assessments of the child and family.
2. The assessments of the child and family may occur simultaneously with the eligibility determination evaluation. Note: Evaluation is not required to determine eligibility for all children.
3. Unless clearly not feasible to do so, all family-directed assessments must be conducted in the native language of the family members being assessed, in accordance with the definition of native language.
4. The **family-directed assessment** must:
 - A. Be voluntary on the part of each family member participating in the assessment;
 - B. Be based on information obtained through an assessment tool and through an interview with those family members who elect to participate in the assessment; and
 - C. Include the family's description of their resources, priorities, and concerns **related to enhancing the child's development**.

Procedures

1. The Initial and Ongoing Family-Directed Assessment Process:
 - A. Is conducted through personal and individualized interviews with family members with the assistance of a routines-based parent interview tool and should not be a ‘form’ completed by the family;
 - B. Allows the family the opportunity to choose to share successes and to share the challenges for which they want help and support; and
 - C. Creates an environment in which parents are made to feel comfortable about contributing as important team members initially and throughout their enrollment in the NC ITP.
2. During initial contacts with families, and during the evaluation and eligibility determination process, it is important to establish rapport and discuss concerns when interviewing the family. For children who are determined eligible for the NC ITP, this family-directed assessment process will continue in more detail using a routines-based parent interview tool.
3. While the family-directed assessment is voluntary on the part of any family member who participates, there are no written consent requirements for conducting the family-directed assessment.
4. A family often extends beyond the parents, and the family-directed assessment may include other caregivers, siblings, grandparents, and other extended family members.
5. A summary of the information gathered from the family-directed assessment is documented in Section II of the *NC ITP IFSP* form and updated at least annually, and more frequently when new information and/or concerns are shared by the family. Documentation should include the name of the assessment tool used.
6. Family-directed assessment is an ongoing process. The information a family chooses to share, along with other pertinent information such as child assessment findings, provides the foundation for developing outcomes for the family and child and for identifying appropriate services, resources, supports, and strategies to achieve those outcomes.
7. All IFSP team members are responsible for participating in the multidisciplinary IFSP Team’s family-directed assessment of the resources, priorities, and concerns of the child’s family, as related to the needs of the child, in the development of integrated goals and outcomes for the IFSP.
8. Good communication skills are essential in helping families make decisions about sharing their concerns, priorities, and resources, and in facilitating the sharing process. Active listening, self-awareness, selective self-disclosure, reflection, paraphrasing, sharing perceptions, using family-friendly language, and using open-ended questions are all important during these discussions and throughout the IFSP process.

Family-Directed Assessment Tools

A routines-based parent interview tool helps to identify family priorities, resources, and concerns related to supporting the child's development in the context of the child's and family's everyday routines and activities.

Below is a list of frequently used Family Directed Assessment Tools (non-exhaustive)

- **Eco-mapping**
- **Therapist as Collaborative Team Members for Infant Toddler Community Services (TaCTICS), including the Getting to Know your Child worksheet**
- **Family and Community Engagement Tools (FACETS)**
- **Routines-Based Interview (RBI)** (McWilliam & Clingenpeel, 2003)
- **Asset-Based Context (ABC) Matrix;** (Wilson & Mott, 2006)
- **The Scale of Assessment of Family Enjoyment within Routines (SAFER)**
- **Roadmap for Assessing Meaningful Participation (RAMP)**