Child Strengths and Needs Assessment Guide (FFA-Ongoing and Progress Updates)



Categories:

 Behavior: Are behaviors conforming to developmental expectations? Does the child show empathy? Does the child have motivation to please others or avoid punishment? Does the child violate rules and expectations in disruptive ways to their normal routines or relationships? Is the child old enough to think about life choices (over age 3)? Are the child's behaviors extreme in nature?

Example: Joshua tends to be respectful toward his caregivers and he is willing to follow all house rules. Joshua, at times though, tends to have issues with certain staff members and he tends to be dismissive or defiant to them. However, these incidents are occasional, maybe once every couple of days. Staff reports no concerns with him.

2. Emotion: Does the child have a wide array of experiences and emotions? Can they manage them according to appropriate developmental ability? Does the child have occasional outbursts or disruptive issues that occur, but do not interfere with the child's ability to function? Does the child have uncontrolled emotions that cause disruptions in their life? Are their emotions so out of control that they regularly interfere with life? Do they exhibit signs of trauma, such as bedwetting, overeating, weight loss or gain, or indications of self-harm?

Example: Kianna has been reported by the foster parent to be very emotional and has ongoing mood swings. She screams and cries a lot over minor issues and engages in such disruptive behavior that she is unable to remain in school for significant periods of time. The child wets the bed nightly and does not eat much.

3. **Development/Early Learning (Only applies to children 0-5):** Are the children meeting basic milestones? For example, walking at 1-2, speaking at 1-2, grasping, etc. If there are delays, are they receiving appropriate services like Early Steps, occupational therapy, etc.? If they are not, what is the extent of the delays? If they are, what progress or lack of progress are they making?

Example: Alex is a two year old who is developmentally on target. He can talk and make short sentences. He can feed himself and is able to grasp utensils and food. He is able to run and has started jumping.

4. Academic Status (Applies only to children 6 and older): How is the child doing in school? How are their grades? Are they involved in extracurricular activities? If they have an IEP or 504 Plan, how are they doing? Are they meeting their goals? If they are not, what are the barriers?

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Example: Tyrone is a 16 year old male who is reading at grade level and maintains a mixture of A's, B's, and C's. He routinely mentions that he does not like school all that much, but he finds it easy and keeps his grades up solely to maintain a spot on the football team.

5. Positive Peer/Adult Relations: How does the child relate to others? How does the child relate to adults? Does the child maintain friendships? If the child does not, what is going on? Is the child being bullied or do they appear socially isolated? Is the child too young to assess for this? (0-3).

Example: Andrea is reported to be a loner. She is reported to be alone all the time and does not engage with others. There are concerns she is picked on due to the fact she dresses different than the other children in her school. Teachers report that she does not make eye contact and rarely engages with them unless forced to.

6. **Family Relations:** How are the relations of the family? How are the family interactions when observed? Is there a bond between the children and the caregiver/parent in the home? How does the child get along with other family members? Are there concerns with the child being comfortable in the home? Does the family respond negatively to the child?

Example: Terri enjoys being around her parents and has a good relationship with her brother. She engages in play with them and the family reports having board game night every Wednesday.

7. **Physical Health:** How is the child physically? Are they having any health concerns or issues? Is their dental current? Are they consistently healthy? Do they have any diagnosis? Does the child have a chronic condition? Is it being managed well? Has the child gone to the hospital recently? What is the caregiver doing to help the child? Is the child talking medications consistently?

Example: Lin has been reported by the caregiver to be in good physical health. She has no medical diagnosis being addressed. She is regularly involved with sports and the caregiver reports that she is doing well in those activities.

8. Cultural Identity: Culture is tough to ask questions about. However, when discussing culture, the case manager needs to look at factors such as race, class, ethnicity, religion, LGBTQ status, and so on. When assessing culture, you are assessing if they have a support network and if they feel they belong in the home where they are currently residing. You would also assess the child to see if they have motivation to explore their culture.

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Example: Max is an 11 year old boy of Middle Eastern descent. He feels that although the caregivers are well meaning, they don't understand him. Max also reports finding it difficult to make friends in school due to his ethnicity.

9. Substance Awareness: What does the child know about drugs and alcohol? Does the child have any knowledge of how drugs and alcohol affect the family? Is the child old enough to know about drugs or alcohol? Also, is the child actively using drugs or alcohol?

Example: Joshua recently was released from The Harbor, a substance abuse facility for recovery of teenagers due to ongoing difficulties refraining from alcohol and street drugs. Joshua reports that things were going well for him at the center and that he has learned a lot as to how drugs affect his body as well as his ability to engage in activities and school.

10. **Preparation for Adult Living Skill Development (13+):** Is the child participating in the development of independent living skills? Is the child engaged in work or vocation? Does the child have long term goals? Does the child have good relationships and connections? If the child is lacking in skills, or their expectations are unrealistic, what are the barriers for the skills and what ideas does the caregiver have for helping the child move forward?

Example: Victoria wants to go to cosmetology school when she graduates from high school and has reported that she is currently working at Sonny's 20 hours a week. She reports that it is not interfering with her school work. The caregiver reports that Victoria is doing well academically and that she has been looking at different schools for study.

(Note: Using the <u>Child Development Matrix</u> would be beneficial during assessment process)