



The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Providing

Concrete Support in Times of Need

Robin Perry (Lead Evaluator), Christen Lancaster (Cone Park Library Resource Center Community Research Coordinator), Celia George, Ruth Goodman, Lovell Haughton, Lashon Jenkins, Diane Johnson, Artie McMillan, Erica Reed, Stephanie Seawright, and Toni Spoliansky (CP SFSA Team)

**Institute for Child and Family Services Research** 



This report was funded by the Children's Bureau; Administration on Children, Youth, and Families; Administration for Children and Families, U.S. Department of Health and Human Services, under grant # 90CA1868. The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of the Children's Bureau.

#### **Table of Contents**

	Page
Introduction	1
The CP Library Resource Center—Brief History	1
The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs	2
The CP Strengthening Families Self-Assessment Team	5
Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/ Action Items Associated with Supporting Families by Providing Concrete Supports in a Time of Need	9
How Does Cone Park Library Resource Center Respond Immediately When Families are in Crisis?	9
How Does Cone Park Library Resource Center Provide Information and Connections to Services in the Community?	12
How Does Cone Park Library Resource Center Help Families to Develop Skills They Need to Identify their Needs and Connect to Supports?	16
Fidelity of Concrete Supports and Services to CSSP Protective Factor	17
Appendix A: The Strengthening Families Self-Assessment Tool	20
Appendix B: Electronic Version of Concrete Support Questions of SFSA Tool	62
Appendix C: SFSA Tool for Community-Based Programs—Concrete Support Results	75

#### Suggested Citation:

Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2022). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Providing Concrete Support in Times of Need*. Tallahassee: Institute for Child and Family Services Research.

#### Introduction

This report summarizes findings from, and recommendations developed by the Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) team utilizing a standardized process developed by the Center for the Study of Social Policy. This report focuses specifically upon findings generated from the utilization of the Strengthening Families Self-Assessment Tool for Community-Based Programs (and associated processes) by the CPLRC SFSA team with a specific focus on items/measures associated with supporting families by providing concrete support in times of need. Concrete Support in Times of Need is one of five protective factors that serve as an organizing framework for the structure and delivery of supports and services to the neighborhood/community served by the Cone Park (CP) Library Resource Center. Specific strengths associated with providing concrete supports have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

#### The Cone Park Library Resource Center—Brief History

Partnership for Strong Families (PSF), the lead community-based care agency under contract with the Florida Department of Children and Families (since 2003) to provide comprehensive child welfare services in 13 North Central Florida counties, has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in North Central Florida. PSF's efforts began in 2007 to develop a network of Family Resource Centers (FRC) that emphasize a strengthening family approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

The PSF Resource Center model is built upon a multi-system collaborative focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care. One of the major strengths of the Resource Center model utilized at the four existing sites (which includes the CP Library Resource Center) is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There is a strong history of collaboration with each of the existing three Resource Centers in Gainesville. Over time, a network of over 75 community partners (across all sites) has been developed. These collaborative efforts have been well documented in select Resource Center reports (for each RC and PSF), website and social media posts, Resource Center pamphlets/infographics, news reports, and select publications. The services provided are free and are intended to be responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons and enhancement of the community's ability to leverage resources to benefit some of Gainesville's most at-risk populations.

The first Family Resource Center (RC) developed by Partnership for Strong Families was the Library Partnership FRC (developed in collaboration with the Alachua County Library District) which opened its doors to the community in July 2009. In 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, a historically under-served community. Due to the existing perceived success of the Library Partnership Resource Center, along with the identified needs of the community, PSF was asked to partner with ACLD to also open a resource center at the Cone Park Library. As southeast Gainesville was considered a "hotspot" of high rates of reported child maltreatment, PSF eagerly agreed to move forward with this new venture. Prior to opening the new

Resource Center, PSF met with the community, assessed household needs, and established collaborative partnerships. Through community meetings and assessments, several local needs were identified that the new Resource Center could help address. The following local needs were identified: GED services, concrete and educational supports for children and parents, meaningful engagement and empowerment of parents and access to healthcare in southeast Gainesville. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Resource Center began operating full-time in May 2014.

All Gainesville Resource Centers are frequently described as "one-stop-shops" for local resources. Patrons may walk into the RCs for immediate access to available services or meet with professional RC staff to help determine needs and connect with local resources. Services provided through the RCs are voluntary and are free of charge to all community members as the result of community partnerships, various funding opportunities, and both monetary and in-kind donations.

The basis of PSF's RC model is the Strengthening Families Approach and Protective Factors Framework (Center for the Study of Social Policy [CSSP], 2014). The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each RC. Although there may be some common services and supports across RCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each RC. The five protective factors include:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the CP Library Resource Center at providing concrete support in times of need. This report represents one small element of a comprehensive process evaluation meant to advance knowledge regarding the functioning, responsiveness, and impact of PSF Family Resource Centers upon the communities they serve. Since supports and services at the CP Library Resource Center are structured in accordance with the CSSP Protective Factors Framework, the Strengthening Families Self-Assessment Tool for Community-Based Programs, and associated processes (see below) are being used to help determine the fidelity of specific implementation strategies (in accordance with the above noted framework) at providing concrete support and strengthening families. This process will help identify existing strengths of select supports and services and help identify areas for potential improvements.

#### The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs

The Strengthening Families Self-Assessment Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) that will aid each in assessing the extent to which each of the RCs have implemented services/activities to engage and strengthen families with respect to

each of the protective factors<sup>1</sup>. The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Resource Center has implemented services/activities in alignment with core strategies for building each of the following protective factors (see above).

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). See Appendix A for a copy of the assessment tool and protocol. Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) two administrative and direct service staff, three community collaborators, and three parents who have been active participants in the program (or whose children participate in the program). The four parents/patrons initially selected to be members of each assessment team were chosen from a list of patrons that consented to be part of the broader study and who, following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons), received services or participated in activities linked to protective factors. These processes were followed in the establishment of the CPLRC SFSA Team, although only two community collaborators were able to actively participate in the process. Composition (see below) includes two administrators and direct service staff (Lashon Jenkins and Erica Reed), two community collaborators (Diane Johnson and Stephanie Seawright), and four Community Ambassadors (Celia George, Ruth Goodman, Lovell Haughton, and Artie McMillan). The term "Community Ambassador" was decided by the Team to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) contributions to this process. Profiles of team members are denoted below.

As highlighted in **Appendix A**, there are a series of indicators and associated items linked with each Protective Factor. These indicators and items represent a series of actions/activities, program elements, protocols, and policies associated with implementation of services meant to enhance each Protective Factor according to best-practice/evidence-based standards. For services and supports focused on Concrete Support there are 8 indicators with 39 associated items for which each team member is asked to individually rate their level of item statement agreement on a five-point Likert-type scale (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree) with an option for Not Applicable. This same scale is used for an assessment of all Protective Factor items/indicators. Collectively (for Concrete Support services/activities), responses to these assessment items are meant to respond to the following questions:

\_

<sup>&</sup>lt;sup>1</sup> For more information regarding CSSP's Strengthening Families and Protective Factors Framework, please see: https://cssp.org/our-work/project/strengthening-families/ Additional information regarding the self-assessment model and associated methodology, tools, and recommended processes, see: https://cssp.org/our-work/projects/self-assessments-for-programs/ and Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: https://www.strengtheningfamiliesevaluation.com/national/

How Does Cone Park Library Resource Center Respond Immediately When Families are in Crisis? (Items 4.1.1 through 4.3.6)

How Does Cone Park Library Resource Center Provide Information and Connections to Services in the Community? (Items 4.4.1 through 4.6.5)

How Does Cone Park Library Resource Center Help Families to Develop Skills They Need to Identify Their Needs and Connect to Supports? (Items 4.7.1 through 4.8.6)

Team members received an orientation to the CSSP Protective Factors Framework, its relationship to the CP Library Resource Center service model, and the Strengthening Families Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. See Appendix B for a copy of the electronic version of the tool associated with Concrete Support questions/items (the focus of this report). For the electronic versions, each Team member was provided a unique (and secure) web link and a QR code, providing them with two electronic link options for responding to the survey (a preference/option desired by team members) but informed to respond only once. Although the names of members/respondents were known to all team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a team member completed a paper version of the tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the Lead Evaluator was available via phone and e-mail to field any questions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members complete their scores, these data were shared via a written summary report (see Appendix C for the SFSA Tool for Community-Based Programs—Concrete Support Results) highlighting the distribution of responses by Team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is not itemized in the tool protocols (it is left to the Team), the Lead Evaluator suggested some processes and the team made initial decisions regarding how to proceed. Each question and associated items were reviewed collectively and then as individual items. For many items, established consensus and agreement was evident, especially for select items and questions identified as observed strengths of the CP Library Resource Center. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (including by role of the respondent as a stratum) and /or the weighted mean score for a select item was below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences and a collective decision was made regarding whether an action item was needed or should

be considered. The team engaged in facilitated brainstorming to identify potential recommendations for action items. Although action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation will follow the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

The initial meeting of the CPLRC SFSA Team took place on July 21, 2021. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet monthly over an extended timeframe through the fall months instead other options, including multiple times over a more concentrated time frame. Communication with, between, and among individual team members could take place in-between meetings but all discussion and brainstorming activities would take place during in-person, web-based, or hybrid meetings. Due to variations in community spread of Covid-19 during this timeframe, the meeting format changed/varied in accordance with safety concerns and Partnership for Strong Families service and administrative pandemic protocols. Subsequent meetings that involved the discussion of Concrete Support items took place on November 17, 2021. The dates and times of meeting were in accordance with preferred times and schedules of all team members and attendees.

#### The Cone Park Strengthening Families Self-Assessment Team

As denoted earlier, a team of dedicated community ambassadors, CPLRC staff, and collaborative partners worked together to engage in a comprehensive assessment of the supports and services provided by the CPLRC in accordance with the CSSP's protective factors framework. The biographies of these team members are detailed below.



Celia George has been a patron at CPLRC since 2015. She is a Florida native and has spent much of her life living in Gainesville, FL. She graduated from the Santa Fe College Police Academy and went on to work with the University of Florida Police Department. During her time as a police officer, she moved near Morningside Nature Center which is only a few miles from the present location of CPLRC. She has raised two daughters who have gone on to be college graduates, building upon her successes. When Celia retired, she turned her attention to her grandchildren and began using the Fred Cone Park Facilities with them. She has made sure they are included in CPLRC summer camps, family events and activities like Homework Help and Girl Scouts. One of her granddaughters currently participates in the Girl Scouts program at CPLRC. She frequently uses the track behind the Cone Park library and attends the food distribution programs. She has been an

encouragement to her twin grandchildren who have started using the track as well. She wanted to be a part of this SFSA Team because "I want to help make a difference". Celia loves Cone Park because "it serves so many different purposes and meets the needs for so many families in the community".



**Ruth Goodman** has been a patron at the CPLRC since 2019. During that time, she also utilized services at the SWAG Family Resource Center and the Library Partnership Library Resource Center. She was born and raised in the French West Indies but after visiting the United States as a young woman she decided to stay and make a life for herself in the US. She married at age 19 and has raised 4 children with her husband. After retiring as a lead teacher for 20 years, Ruth now focuses on assisting with her 10 grandchildren. One of the ways she does this is by reaching out to the Resource Centers. She is happy to be a part of the Cone Park Library Resource Center because "it's very helpful and informative for children and families and the community". Ruth wanted to be a member of our Strengthening Families Self-Assessment Team because she wants to be a part of any work that could potentially help keep families together.



**Lovell Haughton** has been a patron of the CPLRC since August 2020. She is a native of New York but has been in this community for 30 years. Lovell has experience working with community organizations, resources, and support services for those diagnosed with HIV. Her drive to care for others pushes her forward in everything that she does. She strives to maintain and build partnerships with families and be a support and liaison for them. She also acts as a support for her family and 7 grandchildren. Lovell has enjoyed working with the CPLRC because it's community and family oriented.



Lashon Antonia Jenkins first became involved with the CPLRC 10 years ago, as a patron to the CPL. Lashon is a Gainesville native, residing on the eastside of town, where the CPLRC is located. For the past 10 years, she has been an employee with Partnership for Strong Families in the adoptions department. She has worked directly with CPLRC as an intern this last year to satisfy requirements for her Master of Social Work degree. Currently, Lashon holds a Bachelor of Arts in Psychology and a Master of Human Services degree. Her parents also live in the community, and she makes time to visit them regularly between school, work, and an occasional rest. Lashon likes the way patrons are treated by the staff as they seek services that they do not have access to, like computer use or emergency food and clothing. She is glad to be a part of the SFSA Team because "when we know how to

grow, it will make it that much better."



**Diane Holt Johnson** was born in Newark, New Jersey and has worked in Gainesville, FL for six years. She graduated from the University of Pennsylvania with a BA in Sociology and the University of South Florida with a master's degree in Library & Information Science. Diane has a lifetime of experience volunteering in churches, non-profit and social service organizations (i.e., United Way, Take Stock in Children, Boys & Girls Club, Reading Pals, American Cancer Society, local Community Development Corporations, and grassroots neighborhood associations.) She and her husband of 42 years, Derryl, have raised six children, who are their proudest accomplishments. She loves the CPLRC because it values families and works to preserve them; emphasizes preventing and protecting families from disasters rather than correcting after the problem has festered; and provides programs to "help families help themselves" as much as possible. Diane has

been glad to be a part of the SFSA Team because it gives voice to the patrons, who historically have not been asked to have input into the programs and services designed for them.



Artie McMillan has been a patron at CPLRC since 2014. She has been a part of the local community for 14 years and frequented the Cone Park Library before the Resource Center opened. Artie has dedicated her life to serving others and has compassion for people who have fallen on hard times and are experiencing homelessness. She knows what it's like to struggle and wants to help people in need. Artie also has an entrepreneurial spirit and has managed her own restaurant, daycare, and prayer ministry in the past. Her dream would be to work on a Tiny House community that could serve as a one-stop center for people experiencing homelessness, offering practical help to get stabilize them. She lives with her son and her two grandchildren that she legal custody of through Partnership for Strong Families. In 2014, she began seeking regular services at CPLRC when the children came to live with her. Artie loves the care and compassion that is displayed at CPLRC and says, "you

can feel the good energy". She joined the SFSA Team because she trusted Erica's advice that she would be a good fit and because she wants to make a difference and have her voice heard, "not as a victim but as the victor".



**Erica Reed** has been the Resource Center Manager of the CPLRC since 2016. She has been in this community her entire life and many of her family members live in the community. Erica graduated from the University of Florida with a B.S. degree in Family, Youth and Community Sciences with minors in nonprofit organization, leadership, and human services. In addition to her education, she has experience working as a Guardian Ad-Litem, a case manager for high-risk cases and in licensing foster homes. Erica has been married for 23 years and lives at home with her husband, two boys and two girls. She has a genuine compassion for people and loves the CPLRC because it gives her the opportunity to help individuals and families in need. Erica is pleased with the SFSA Team process because it brought together a team with a common goal of wanting to make things better and because she wasn't alone in the process.



**Stephanie Seawright** has been a member of the Gainesville community since 1987 and has been working with the CPLRC since 2017. She helped developed the local A. Quinn Jones Museum and Cultural Center in Gainesville and works with her church and sorority to be of service to mankind. With a lifetime of experience serving others, Stephanie chooses to collaborate with CPLRC because she loves that the staff are helpful and care about the community they serve. As the Chief Operations Officer of the Central Florida Community Action Agency, she works to bring services like the "Fight for your Money" class to patrons of the Resource Center. Stephanie chooses to be a part of the Strengthening Family's Self-Assessment team because she is impressed with the work that the Resource Center does and wants to be a part of its success in any way.

Although not formally members of the CPLRC SFSA Team, Robin Perry (Lead Evaluator) and Christen Lancaster (Community Research Coordinator for the CP Library Resource Center) attended each of the CP SFSA Team meetings, they, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended the majority of the meetings served as key supports for Team processes. Robin Perry provided initial training and overview of the Center for the Study of Social Policy's SFSA Tool for Community-Based Programs and associated processes for review of findings and development of an action plan and recommendations by the team. Robin Perry was the lead facilitator of select group meetings; summarizing findings generated from the self-assessment tool/survey, asking questions, and clarifying team members' views as they discussed survey results with the goal of moving toward a consensus of perspective related to select survey questions and recommended action items for the CP Library Resource Center. Christen Lancaster is the Community Research Coordinator for the CPLRC and a principal on-site contact for team members. Ms. Lancaster maintained regular contact with team members and distributed meeting materials; aided with facilitation of group processes, and (along with Robin Perry) took detailed notes of comments and discussion items. Toni Spoliansky served as an information support and assisted in answering any questions individual team members had about the funded project and the role, function, and support of Partnership for Strong Families for the CPLRC. It is important to note that the role of the above three individuals was seen as supportive in nature. An empowerment perspective was adopted, as a team they would decide the meeting schedule and facilitation process with all members assuming equal status as knowledge experts with respect to community needs and the role, value, functioning, and responsiveness of the CPLRC to community need related to supporting families through the promotion of parental resilience. There was no effort by those in supportive roles to censure conversation and discussion points, as feedback was regularly sought regarding facilitation processes and preferences of group members for these processes. All notes were converted into minutes that were distributed to team members for their review, edits, and approval. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (the team decided on monthly two-hour meetings) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings (which would then be discussed with all Team members at the next in-person, virtual or hybrid meeting).

# Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/Action Items Associated with Supporting Families by Providing Concrete Support in Times of Need

The following represents a summary of key findings and recommendations by the team for questions and items associated with providing Concrete Support. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the SFSA Tool for Community-Based Programs—Concrete Support Results; distributed to all team members as a starting point for discussion and brainstorming activities. For the purposes of the summary, findings are presented in accordance with the broader questions select items/sets of questions the tool was structured to answer. Each summary is followed by an itemization of select discussion points. Unlike the review of services and supports linked to other protective factors, the team did not identify any action items for CPLRC related to concrete supports. Collectively, it was assessed that CPLRC is very responsive to the expressed need of patrons for select concrete supports and services. Findings detailed below reinforce the value and utility of concrete supports and services for community members and households and the efficiency and effectiveness of staff in responding to these identified needs in a supportive and non-stigmatizing manner. The provision of concrete supports to families in times of need is CPLRC's greatest strength.

## How Does Cone Park Library Resource Center Respond Immediately When Families are in Crisis?

Table 1 (see below) provides a detailed summary of the individual items/questions associated with a measure of how the CPLRC responds immediately when families are in crisis, and the average team score (weighted) associated with each. The following scores were associated with each rating of each item response, where Strongly Agree=5, Agree=4, Neither Agree nor Disagree=3, Disagree=2, Strongly Disagree=1. The weighted average score for each item reflects the average score across all team members, excluding any Not Applicable responses. There were no SFSA tool items for which the majority of team members thought were not applicable. At most, there was one team member who found select items represented in Table 1 to be not applicable. The team Scores (weighted average) cells are color coded by where green represents team consensus of Strongly Agree and Agree, yellow represents scores in the Neither Agree nor Disagree range, and red represents a level of Disagreement (either Disagree or Strongly Disagree). Findings in Table 1 highlight a team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 14 of the 15 items/indicators of how (CPLRC) responds immediately when families are in crisis; with only 1 within the Neither Agree nor Disagree range. There were no item/indicators for which there was a consensus of disagreement.

The supportive environment and proactive efforts of staff to connect with patrons/parents reinforces a caring environment and helps build trust and social capital within the neighborhood/community... CPLRC is perceived...as a valued member and contributor to the community

There was uniform consensus in the assessment that staff at CPLRC and CPL are engaging and responsive to parents and families in times of distress and crisis. The supportive environment and proactive efforts of staff to connect with patrons/parents reinforces a caring environment and helps build trust and social capital<sup>2</sup> within the neighborhood/community. With respect to concrete supports CPLRC is perceived by the team as a valued member and contributor to the community. This status is maintained given that supports and activities are implemented with clear fidelity to the CSSP model as such relates to how: parents are encouraged to turn to staff in the event of a crisis, staff proactively respond to signs of parent or family distress, and how staff and the program supports families experiencing extreme difficulties or crises. There was consensus among the team that the following activities, supports/activities, and actions are implemented with fidelity at CPLRC:

- 4.1 Parents are encouraged to turn to staff in the event of a crisis through:
  - 4.1.1 The fact that staff listen, show concern and share their own personal challenges as appropriate in informal conversations and regular interactions.
  - 4.1.2 Materials regularly provided to participating families.
  - 4.1.3 Information on which staff members can help families with particular issues.
- 4.2 Staff proactively respond to signs of parent or family distress by:
  - 4.2.1 Expressing concern and offering help in line with the program's philosophy and resources.
  - 4.2.2 Offering to connect families to resources, including help lines, community resources or public agencies.
  - 4.2.3 Making space available for staff to meet with parents privately.
  - 4.2.4 Ensuring that parents can talk with staff members with whom they are the most comfortable.
  - 4.2.5 Being sensitive and responsive to the impact of family stress on children.
  - 4.2.6 Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).
- 4.3 When a family is experiencing extreme difficulties or crisis:
  - 4.3.1 At least one staff member with a close relationship with the family reaches out to the family proactively.
  - 4.3.2 If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.
  - 4.3.3 The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.
  - 4.3.5 If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.
  - 4.3.6 Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.

<sup>&</sup>lt;sup>2</sup> The term "social capital" used here relates to the "…ability of individuals to benefit from their membership in social networks or other social structures" (CSSP, 2003, p.13). See: Center for the Study of Social Policy (2003). Strengthening Families Through Early Care & Education: Protective Factors Literature Review. https://www.matrixoutcomesmodel.com/EvaluationMenu/Protective\_Factors\_Literature\_Review.pdf

...supports and activities are implemented with clear fidelity to the CSSP model as such relates to how: parents are encouraged to turn to staff in the event of a crisis, staff proactively respond to signs of parent or family distress, and how staff and the program supports families experiencing extreme difficulties or crises.

Table 1: How Does Cone Park Library Resource Center Respond Immediately When Families are in Crisis?	Team Score
4.1 Parents are encouraged to turn to staff in the event of a crisis through:	(Weighted Average)
4.1.1 The fact that staff listen, show concern and share their own personal challenges as	
appropriate in informal conversations and regular interactions.	4.71
4.1.2 Materials regularly provided to participating families.	4.57
4.1.3 Information on which staff members can help families with particular issues.	4.14
4.2 Staff proactively respond to signs of parent or family distress by:	4.14
4.2.1 Expressing concern and offering help in line with the program's philosophy and	
resources.	4.00
4.2.2 Offering to connect families to resources, including help lines, community resources or	
public agencies.	4.43
4.2.3 Making space available for staff to meet with parents privately.	4.00
4.2.4 Ensuring that parents can talk with staff members with whom they are the most	
comfortable.	4.25
4.2.5 Being sensitive and responsive to the impact of family stress on children.	4.00
4.2.6 Keeping family issues confidential unless given explicit permission to share information	4.50
(except when potential abuse or neglect is at issue and a report is made).	4.50
4.3 When a family is experiencing extreme difficulties or crisis:	
4.3.1 At least one staff member with a close relationship with the family reaches out to the	4.38
family proactively.	4.38
4.3.2 If the family wants assistance, staff members, including supervisors or a staff team, work	4.43
with the family to help them manage the crisis.	4.45
4.3.3 The programs has resources for family assistance, such as diapers, transportation, a safe	4.25
sleeping environment or even emergency funds.	4.23
4.3.4 The program has flexible hours of operation to accommodate families outside of regular	3.50
business hours.	3.50
4.3.5 If the family agrees, staff connect the family to resources outside the program that can	
help them, such as medical or mental health specialists, or services such as respite care or	4.25
emergency crisis services.	
4.3.6 Staff continue to offer support to the family and monitor the situation daily until the	4.00
situation is manageable.	

There was only one item whether the consensus rating with neither agree nor disagree:

4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.

Variance in responses to this item existed between Community Collaborators and Community Ambassadors. Community Collaborators felt that the CPLRC should be open with the same hours as the Cone Park Library. The current Cone Park Library hours are 10am-6pm Monday through Friday and

Saturdays 10am-5pm, whereas the Cone Park Library Resource Center is open 10am-5pm Monday through Friday. The CPL recently extended their hours to 6pm to accommodate requests from patrons. The CPLRC Manager (Ms. Reed) has not been asked to extend the hours of the CPLRC. It was noted that prior to 2016 the CPLRC was open for a short time on Saturdays, but its utilization was low and did not warrant staffing. Ms. Reed and the Community Ambassadors believe that the current hours "work well" and are conducive/sufficient for patrons getting help. Should CPL identify patrons on Saturdays or hours when CPLRC is not open, contact information of patrons (and any identified service requests or needs) is taken and shared with Ms. Reed. These actions reinforce the existence (identified in other reports) of a strong collaborative working relationship between CPLRC and CPL. In crisis situations CPL staff have also called Ms. Reed from their landline so the patron can speak to her directly. Ms. Reed makes daily efforts to accommodate patrons by taking her lunch break at 2pm so that she is available at noon when patrons come in for services during their typical lunch break. These efforts are noteworthy given staff resources (there is one full-time employee). Hours of availability are limited by the number of staff, available resources, and accommodations/physical space. Hours of operations cannot always be responsive to changes in the "...ebb and flow of interest" (as noted by team members) for different services and supports. Thus far, the current schedule (aligned with typical "business days and times") is considered the most "proactive" times for being open. One Ambassador commented that most families have "other things" to do on the weekend and noted "I think it [the current schedule] works." Subsequent to this discussion, no action item was identified.

# How Does Cone Park Library Resource Center Provide Information and Connections to Services in the Community?

Table 2 highlights a series of items associated with CPLRC efforts at disseminating information and providing connections to services and supports within the community related to the provision of concrete supports. Among the six items affiliated with 4.4, there was consensus agreement that staff proactively respond to signs of parent or family distress by:

- 4.4.1 Expressing concern and offering help.
- 4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.
- 4.4.4 Being sensitive and responsive to the impact of family stress on children.
- 4.4.5 Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).
- 4.4.6 Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.

Again, as noted earlier and in other reports, these findings reinforce that the caring and responsive actions and attitudes of CPLRC and CPL staff are a valued asset toward engaging and establishing

trusting relationships with parents and families that, subsequently, enhance the likely receipt of needed concrete supports.

...these findings reinforce that the caring and responsive actions and attitudes of CPLRC and CPL staff are a valued asset toward engaging and establishing trusting relationships with parents and families that, subsequently, enhance the likely receipt of needed concrete supports.

There was only one item (affiliated with 4.4) that received a consensus neither agree nor disagree rating related to staff proactively respond to signs of parent or family distress by:

4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.

Home visitation is not a standard advertised service (given existing staff resources) for the CPLRC; however, such does take place when necessary circumstances exist. Some team members were unaware that any home visits have ever taken place while others have experienced it firsthand. As one example, as a CPLRC Intern, Ms. Jenkins assists with the diaper bank program where she sometimes brings diapers to the homes of patrons that do not have the capacity (due to transportation and/or childcare demands, etc.) to pick them up. Home visits are also routinely being done (volunteers and interns have been of great assistance in these activities) with food distribution events, where food is brought to those individuals too frail to attend the event. In addition to food distribution, other concrete supports (e.g., bus passes, diapers/infant care items, etc.) have been dropped off for parents with no means of transportation, those on bed rest, veterans, and those physically unable to visit the RC. Community Ambassador Ms. McMillan expressed her gratitude at personally receiving this delivery service when she was on bed rest or didn't have any transportation. This service is unadvertised and unknown to many but critical to those receiving the service. Many of the services at the CPLRC are similarly individualized and not advertised. These extra efforts are made to help maintain the autonomy and respect the privacy of the patron. These services and the commitment of staff, interns, and volunteers were praised as it was noted by one Ambassador that "...everybody and everyone seems to do good." Given existing resources do not permit the standardization and advertisement of home visitation services, yet such are taking place (resources permitting) in a targeted manner for those most in need, the team did not recommend any action item.

Many of the services at the CPLRC are similarly individualized ... These extra efforts are made to help maintain the autonomy and respect the privacy of the patron. These services and the commitment of staff, interns, and volunteers were praised as it was noted by one Ambassador that "...everybody and everyone seems to do good."

Table 2: How Does Cone Park Library Resource Center Provide Information and Connections to Services in the Community?	Team Score (Weighted Average)
4.4 Staff proactively respond to signs of parent or family distress by:	
4.4.1 Expressing concern and offering help.	4.43
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.	4.50
4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.	3.25
4.4.4 Being sensitive and responsive to the impact of family stress on children.	4.38
4.4.5 Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).	4.38
4.4.6 Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.	4.13
4.4b Parents are encouraged to share information about community resources (e.g., toy exchanges, resale shops, play lots, family activities), as well as more formal services.	3.63
4.5 The program maintains up-to-date information about services in the community that includes hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to be included are:  •Eood pantries •Bealth providers •Domestic violence services •Shelters •Bespite care for children •Alcohol and substance abuse services •Mental health services (for adults and children) •Economic supports •Eegal assistance •Quality early care and education	4.50
4.6 The program actively builds collaborative links with other service providers by:	
4.6.1 Bringing services on site, when possible.	4.71
4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.	4.29
4.6.3 Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.	3.88
4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.	3.86
4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.	3.71

Efforts at disseminating information about and linking patrons to existing resources and concrete supports within the community (in addition to supports offered at CPLRC) were praised by the team and reflected (see Table 2) in the consensus agreement with the following items:

4.5 The program maintains up-to-date information about services in the community that includes hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to be included are:

- Food pantries
- Health providers
- Domestic violence services
- Shelters
- Respite care for children
- Alcohol and substance abuse services
- Mental health services (for adults and children)
- Economic supports
- Legal assistance
- Quality early care and education
- 4.6 The program actively builds collaborative links with other service providers by:
  - 4.6.1 Bringing services on site, when possible.
  - 4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.

There were four items where the consensus assessment was neither agree nor disagree. There was limited discussion by the team with respect to these rating with no recommended action items. Among these four items, there was only one item (4.4b) for which one team member expressed disagreement; while a few members either found select items not applicable or neither agreed nor disagreed with statements due to limited knowledge of activity/service implementation. The four items in question included:

- 4.4b Parents are encouraged to share information about community resources (e.g., toy exchanges, resale shops, play lots, family activities), as well as more formal services.
- 4.6 The program actively builds collaborative links with other service providers by:
  - 4.6.3 Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.
  - 4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.
  - 4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.

Although there was not consensus agreement (nor disagreement) on 4.6.3 and 4.6.4, CPLRC staff and PSF representatives have identified that memorandums of understanding exist for a plethora of community agencies, services, and supports across a wide range of service areas and need classifications as expanded in (Lancaster et al., 2021a) and (Lancaster et al., 2021b). In addition, the team has acknowledged in other reports (Perry et al., 2021b), and as part of discussion related to findings in this

report, that CPLRC and CPL have been responsive and effective in the direct provision of and/or linking patrons to concrete supports within the community.

## How Does Cone Park Library Resource Center Help Families to Develop Skills They Need to Identify their Needs and Connect to Supports?

Table 3 highlights findings associated with assessment items gauging the extent to which CPLRC helps families to develop skills they need to identify their needs and connect to supports. Consensus agreement existed for 10 of 11 indicators, suggesting that staff do a good job helping parents to identify and mobilize their own resources to address their families' needs (4.7) and support family leadership when they make referrals to outside services (4.8). There was no item detailed in Table 3 for which any team member disagreed with (see Appendix C). The consensus neither agree nor disagree rating for 4.7.5 (connecting parents to peer-to-peer navigation support) reflects select members' perspectives and comments denoted in other reports (Perry et al., 2021a; Perry et al., 2021b). that highlight some hesitancy in the formal development of select peer-to-peer initiatives to accommodate patron confidentiality and privacy matters. Regardless, the team rated CPLRC staff in a "very positive" manner on these items. There seems to be general agreement that CPLRC does a good job in providing concrete supports to its patrons and helping families in crisis with concrete supports. These assessments were based on first-hand knowledge (especially among the Community Ambassadors) where supports were provided in a non-stigmatized manner with helpful and meaningful links to service providers for concrete supports and services related to all other protective factors. Collectively (see Table 3), consensus agreement was demonstrated with respect to the following:

- 4.7 Staff help parents to identify and mobilize their own resources to address their families' needs by:
  - 4.7.1 Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.
  - 4.7.2 Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.
  - 4.7.3 Encouraging parents to advocate for themselves and their child.
  - 4.7.4 Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.
- 4.8 When staff make referrals to outside services, they support family leadership by:
  - 4.8.1 Brainstorming with families about what resources would be helpful.
  - 4.8.2 Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.
  - 4.8.3 Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).
  - 4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).

- 4.8.5 Following up with families on referrals to ensure that they were satisfied with the services they received and providing help in advocating for themselves if they were not satisfied.
- 4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).

Consensus agreement existed for 10 of 11 indicators, suggesting that staff do a good job helping parents to identify and mobilize their own resources to address their families' needs...and support family leadership when they make referrals to outside services.

Table 3: How Does Cone Park Library Resource Center Help Families to Develop Skills They Need to Identify their Needs and Connect to Supports?	Team Score (Weighted Average)
4.7 Staff help parents to identify and mobilize their own resources to address their families' needs by:	
4.7.1 Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.	4.13
4.7.2 Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.	4.50
4.7.3 Encouraging parents to advocate for themselves and their child.	4.50
4.7.4 Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navi- gate through service systems.	4.25
4.7.5 Connecting parents to peer-to-peer navigation support.	3.86
4.8 When staff make referrals to outside services, they support family leadership by:	
4.8.1 Brainstorming with families about what resources would be helpful.	4.29
4.8.2 Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.	4.38
4.8.3 Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).	4.38
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).	4.50
4.8.5 Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.	4.00
4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).	4.00

#### **Fidelity of Concrete Supports and Services to CSSP Protective Factor**

As denoted earlier, the SFSA Team identified the weighted average team score as the consensus measure for each item associated with the Concrete Support in Times of Need assessment questions. Following the development of a consensus rating, individual item scores were converted —in keeping

with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014)<sup>3</sup> method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree or Disagree, and Not Applicable. Within the tables denoted in this report, any green shaded cells (Agree and Strongly Agree) reflect a score of 1 and any yellow (Neither Agree or Disagree), red (Disagree and Strongly Disagree), or no shade (Not Applicable) reflects a score of 0 (zero). As observed, there were no red or no shade cells in each table. These scores were summed for the Concrete Support in Times of Need Protective Factor where scores <50% of the total score possible represent low fidelity, 50-74% represent moderate fidelity, and >75% possible scores represent high fidelity. The aggregate fidelity score from all tabled findings is 32 (of a possible score of 39) or 82%, suggesting that the services and supports associated with the Concrete Support in Times of Need Protective Factor were implemented with high fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework. The series of action items recommended by the CPLRC SFSA Team are appropriately targeted to enhance the fidelity score of provided supports and services addressing parental resilience.

...the services and supports associated with the Concrete Support in Times of Need Protective Factor were implemented with <u>high fidelity</u> to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

#### References

Lancaster, C., Perry, R., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021a). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Knowledge of Parenting and Child Development.*Tallahassee: Institute for Child and Family Services Research.

Lancaster, C., Perry, R., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021b). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social and Emotional Competence of Children.*Tallahassee: Institute for Child and Family Services Research.

<sup>&</sup>lt;sup>3</sup> Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

Tarr, J., Harnar, M. A., & Ahsan, N. (2014). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Unpublished whitepaper presented at the National Association for the Education of Young Children's annual conference in Dallas, TX.

Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021a). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience*. Tallahassee: Institute for Child and Family Services Research.

Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021b). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social Connections.* Tallahassee: Institute for Child and Family Services Research.

## Appendix A

### STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR COMMUNITY-BASED PROGRAMS



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### ABOUT THE SELF-ASSESSMENT

The Program Self-Assessment helps programs determine how well they are implementing strategies to strengthen families. The Self-Assessment is based on findings from a national study that identified exemplary programs across the country. It allows all programs to compare their practices with those of the exemplary programs and identify areas for improvement. The Self-Assessment outlines how the protective factors can be supported through small but significant changes in program practice. It is written for programs committed to working with and supporting the families they serve. Versions of the Self-Assessment are available for:

- · Center-based early care and education programs
- · Family child care settings
- Home visiting programs
- Community-based programs such as family resource centers

While there is significant overlap across these different versions, each also contains unique strategies specific to each setting.

The Program Self-Assessment materials in this document are applicable to community-based programs serving children and families. The concrete actions described in the self-assessment can be carried out in a variety of settings such as family support and parenting education programs, health care settings, community centers and others. The strategies described can be implemented without creating new staff positions, making significant changes to existing facilities or raising additional financial resources.

#### **ORGANIZATION**

The Self-Assessment outlines practices used by exemplary programs to support families, organized around five protective factors:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- · Concrete Support in Times of Need
- Social and Emotional Competence of Children

Each section starts with a brief description of the protective factor and core strategies for building that protective factor. Self-Assessment items are organized under each of these core strategies. In this version of the Self-Assessment there

is also a special section about <u>Responding to Possible Child</u> <u>Abuse or Neglect</u>.

#### **COMPLETING THE SELF-ASSESSMENT**

While the Self-Assessment forms may appear long at first glance, most sections have fewer than ten items. To make the process easier, the forms address specific practices; thus, multiple practice examples often appear under a single strategy. While the time it takes to complete the Self-Assessment will vary from program to program and from form to form, on average, each form can be completed in approximately 90 minutes.

CSSP strongly recommends that programs create a Self-Assessment team that represents a number of different perspectives at your program, including:

- Administrative staff and/or program director
- · Direct service staff
- Parents who participate in the program (or whose children participate in the program)

Including a diverse group of participants in the Self-Assessment evaluation process allows programs to benefit from a large variety of viewpoints and perspectives. Once a team has been identified, the process begins by following the steps outlined below.

First, each member of the team should fill out the Self-Assessment forms individually.

Next, the team should convene to share and compare assessments. Teams should use this time to discuss rating results that differ among various team members, giving each person an opportunity to describe why they rated the practice the way they did and—if appropriate—to provide an example. Once everyone has had a chance to speak, all team members should be given an opportunity to re-rate the practice. It is not necessary for the entire team to come to consensus on every practice, but it is important that all team members come to understand each other's perspectives and that a final decision is made on how to rate the item based on broad input.

The consensus version of the Self-Assessment can be entered online at <a href="www.mosaic-network.com/gemslive/cssp/">www.mosaic-network.com/gemslive/cssp/</a>. Completing the Self-Assessment online allows the program to print reports showing strengths and areas to focus on improvement, as well as to link to parent and staff surveys.



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CREATING AN ACTION PLAN**

Once all team members have re-rated the practices, the team should identify areas where the program scored highly. Next, the team should create a sustainability plan to keep these areas strong. In developing a sustainability plan for each successful area, teams should be sure to specify:

- · Key reasons for success in the area
- What needs to be done to ensure continued strength in the area
- Who will be responsible for maintaining successful outcomes in the area

Next, the team should highlight practice areas that a majority of the team rated poorly. While we encourage programs to work on each of these areas eventually, the team can begin by deciding whether each poorly rated practice should be addressed (1) immediately, (2) over time, or (3) not at all. Again, teams should allow time for discussion and

reevaluation if/when team members disagree on practice ratings. When a majority of team members identify items that should be addressed immediately, teams should brainstorm plans to improve associated area outcomes. Teams should be sure to specify:

- The expected results
- All required resources (including staff hour costs)
- · A timeline for achieving the desired results
- · Who is responsible for each action step
- Check-in points for monitoring implementation progress
- How and when longer term action steps will be addressed/implemented

#### PARENTAL RESILIENCE

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

visits are unexpected.

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		45.	Strongly agi	Wifes 3.	. Weither age	ge not disaftee	jee Stangh di	sages Comments
	d affirm the central role of parents in their teraction with families including policies, ication.							
1.2 The program has multiple avenues for regular communication with families.	1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.							
	1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.							
	1.2.3 Staff regularly ask parents about their observations of their child.							
1.3 All family members are made to feel welcome:	1.3.1 Someone is available to greet families when they come in.							
	1.3.2 Staff are respectful even when family							



PARENTAL RESILIENCE: SELF-			Strongly age	Per 3.	Meither agr	disagles dis	strongly disc	gree Applicable
		49.	, K	'5	'''		, A	Comments
1.4 Staff develop mutually respectful relationships with all family members by:	1.4.1 Taking time to get to know family members individually, by name.							
an failing members by:	1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.							
	1.4.3 Regularly inquiring about what is happening in their lives.							
	1.4.4 Providing emotional support and encouragement.							
	1.4.5 Sharing appropriate information about themselves.							
	1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.							
	1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.							
	1.4.8 Using intake forms, applications and surveys that are gender-neutral.							



PARENTAL RESILIENCE: SELF How do programs demonstra		45	Strongly agget	es 3: Heiner	gee Indiscate	es strongly disagn	ce Comments
1.5 Staff show that they value fathers and are sensitive to their unique needs by:	1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.						
neeus by:	1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.						
	1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.						
	1.5.4 Providing peer activities or services that are man-to-man, father-to-father.						
	<b>1.5.5</b> Engaging male participants to greet other men at program activities.						
	<b>1.5.6</b> Establishing ongoing partnerships with community resources that provide services to fathers.						
	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.						
	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.						
	<b>1.5.9</b> Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.						



PARENTAL RESILIENCE: SELF-How do programs honor each culture, history and approach	ı family's race, language,	5; Stan	A. Here 3. N	teither agree Inchieses	gee Met Application	
1.6 Program staff ensure that all families, regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.  1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.  1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.  1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.  1.6.5 The program displays diverse families and family structures in books, posters and program materials.					Comments
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.  1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.  1.7.3 Designed or selected to reflect the culture(s) of the community served.					



					Meither agri	or disagr	*/ */	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		Strongly ag	See /	, agr	e ne	Strongly die	a thicaite
How do programs demonstrat	e that parents are valued?	6	Strong!	Agree 3	Heither O.	Disagit.	Strong!	A Applie
		,,						Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	<b>1.8.1</b> Inviting partner organizations to provide workshops for staff on working with diverse families.							
ties to develop skills and knowledge to work effectively with diverse families. Staff development may include:	<b>1.8.2</b> Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.							
	1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.							
1.9 The program seeks to reflect the community and families it serves by:	<b>1.9.1</b> Building a staff that reflects the community and families served.							
rammes it serves by.	<b>1.9.2</b> Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.							
	1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.							
	1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program's community is mono-lingual, mono-ethnic or mono-cultural.							
1.10 The program supports participating immigrant and refugee families by:	1.10.1 Ensuring that staff are knowledge- able about immigrant and refugee families' unique challenges and can help address them in a respectful manner.							
	1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.							



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS  parents to manage stress effectively?	8.	Hilligh agige	Bee 3: Hei	2.Di	har disagree	Hot Hot	gree haricalite	
								Comment	s
proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, militar other family crises Changes or fluctuations in a challenging behavior, fearfu	ences ed appointments y deployment, family dissolution, job loss or a child's emotional state, acting out, distress, il behavior, inappropriate language/behavior signs of abuse or neglect (such as bruises) or								
1.12 The program provides regular opportunities for parents to relieve stress	1.12.1 Linking parents to organized support groups.								
parents to relieve stress through:	1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.								
	1.12.3 Organizing spa days, exercise classes or other parent-only social activities.								
	1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.								
	1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.								



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	5; Strut	N. Hee	Meither 2gr	dieaglee	stangy dist	Lage Comments
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and current from other staff	1.13.1 Understanding the impact of family crises and/or loss on all family members— especially children—and how to respond appropriately.						
and support from other staff members on:	1.13.2 Supporting families' immediate and long-term plans.						
	1.13.3 Talking to families about difficult issues and helping them access additional help.						
	1.13.4 Maintaining confidentiality.						
	1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.						
	1.13.6 Understanding trauma and its impact on children and how staff can help.						
	1.13.7 Other community agencies providing specialized services to families and children.						



PARENTAL RESILIENCE: SELF- How do programs support par build decision-making and le	rents as decision-makers and help	્રિક ક	Strongly at	ikules 3:	Meither 25's	disagles	Strongly dis	adde the comments
1.14 Staff receive program support when working with families under stress through:	<b>1.14.1</b> Acknowledgement and support for their efforts from supervisors and administrators.							
	<b>1.14.2</b> Opportunities to process their own emotional reactions with appropriate support.							
	1.14.3 Access to a mental health consultant.							
	1.14.4 Time off if needed.							

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS  How do programs support parents as decision-makers and help build decision-making and leadership skills?			Strongly ag	White 3.	Meither agre	disagles 1:	z trongly dis	agge <sup>®</sup> S. Maricalle Comments
1.15 Staff reinforce parental authority by:	1.15.1 Respecting parents' directions and/ or decisions about their children.							
	1.15.2 Learning about parents' expectations and limits for their children.							
	1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.							
	1.15.4 Understanding the parenting and child behavior norms of the parent's culture.							
	1.15.5 Being careful not to contradict a parent in front of his or her child or other children.							



					,		,	, , ,
	rents as decision-makers and help	/	Strongly age	, ,	ither agre	g rardisast	ee Strongly dis	gage e
build decision-making and le	adership skills?	43.	Stru A: P	dies 3:	V.	dist 1:	Sire M	J. A.P.
								Comments
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							
	<b>1.16.2</b> Parents are informed about the confidentiality policy and what it means to them.							
	<b>1.16.3</b> Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.							
	1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.							
	1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.							
	<b>1.16.6</b> All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.							
	1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
1.17 Parents and staff develop family plans together that:	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.							
	<b>1.17.2</b> Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.							
	1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.							
	1.17.4 Are updated regularly.							



					, ,	,	, ,	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		/ .	, , ,	Weither 325	e nordisagi	88	agles .
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	5	Strongly age	Agiee 3:	Weither age	disagree 1.	Strongly die	L. Andricate
								Comments
1.18 The program supports a parent's personal education and career goals by:	1.18.1 Referring families to educational and career resources (e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting skills, job training, job preparation skills).							
	1.18.2 Forming partnerships with nearby educational resources, including higher education institutions, to support families' learning interests and educational goals.							
	1.18.3 Linking families with community resources for internships, volunteer and leadership activities and other experiences that expand parents' knowledge and skills and build on their career interests.							
	<b>1.18.4</b> Inviting past program parents and community volunteers to share their educational and career experiences with families.							
	1.18.5 Providing formal and/or informal parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent leadership development.							
1.19 The program provides opportunities and support for families to serve as leaders	<b>1.19.1</b> Providing opportunities for families to volunteer and contribute to the program.							
and decision-makers by:	<b>1.19.2</b> Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles.							
	1.19.3 Asking families for regular input on programmatic decisions.							
	<b>1.19.4</b> Asking families for input into staff hiring and training.							
	1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).							



					,	,	,	, , ,
PARENTAL RESILIENCE: SELF-	-ASSESSMENT ITEMS		- S	*	are are	disagles of	s <sup>®</sup>	and the state of t
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Strongly agi	Agree 3:	Meither 315	disagree 1:	Strongly die	A Replicate
		Ĺ						Comments
<b>1.20</b> The program promotes participation in activities by:	<b>1.20.1</b> Addressing topics, issues and skills that families identify as important to them.							
	<b>1.20.2</b> Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).							
	<b>1.20.3</b> Providing child care during trainings or workshops.							
	1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.							
1.21 The program helps to support the continued development of parent leaders by supporting:	<b>1.21.1</b> Personal growth—such as attending conferences or special events and collecting and sharing information of interest to other parents.							
	1.21.2 Leadership development trainings and mentoring activities.							
	<b>1.21.3</b> Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).							
1.22 The program helps to support parents' opportunities for leadership in community change by:	<b>1.22.1</b> Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.							
community change by.	1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.							
	1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.							
	<b>1.22.4</b> Connecting parents to groups that inform and shape policy at the local, state or national level.							



How do programs help parents understand how to buffer their child during stressful times?

ijis <sup>alite</sup>	/
age la	/
5: Stringly Ages 3: Heilter Ages Rut lisages like her his Ages Arthogy Har Applicable	
Comm	16

				Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.				
<ul> <li>1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including:</li> <li>How stress impacts the child's brain, behavior and development</li> <li>Recognizing the signs of stress in children</li> <li>How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly</li> <li>The important role that parents and caring adults play in buffering children during stressful times</li> </ul>				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.				



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **SOCIAL CONNECTIONS**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- · Help families value, build, sustain and use social connections
- · Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

#### 3. Neither agree furthisagles 1. Strongly disagree 5: Stringly agree SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS Not Applicable How do programs help families value, build, sustain and use A: Agree social connections? Comments 2.1 Families have access to a comfortable space where they can meet informally **2.2** The program provides 2.2.1 Formally, through parent support groups (including those with both broad and opportunities for families with similar interests, chilnarrow focuses). dren's ages and/or circumstances (such as those with 2.2.2 Through parent mentoring and twins, parents of infants, matching for one-on-one support. parents with special-needs children or parents who 2.2.3 Informally, by introducing parents to speak the same language) to one another. connect with one another:



				,	, ,	,	, ,
	SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS  How do programs help families value, build, sustain and use social connections?			3. Neither 285	e nat disable e	ng Angli	alle
			Huleh Shee				Comments
2.3 The program provides opportunities for families to socialize and foster a sense	2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.						
of community by organizing/ hosting:	2.3.2 Periodic events like coffee breaks and breakfasts.						
	2.3.3 Celebrations, graduations and holidays.						
	2.3.4 Field trips and community events.						
	<b>2.3.5</b> Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.						
	2.3.6 Affordable family activities.						
	<b>2.3.7</b> Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.						
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.						
	ositive relationships between families and nal social events where staff can interact with						
	ects families to resources to strengthen ., healthy marriage skills, communication skills,						



					/ /		
SOCIAL CONNECTIONS: SELF- How do programs help famili use social connections?		\s.	A: Agre	e 3: Weither 2	7. headee	s Strangy disagn	e k
							Comments
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:	<b>2.6.1</b> Calling, sending notes or making home visits inviting them to program activities.						
ipate in program activities by:	<b>2.6.2</b> Connecting with them on social media platforms through program pages or groups.						
	<b>2.6.3</b> Offering support with transportation, child care or other barriers to participation.						
	<b>2.6.4</b> Making special efforts to connect them with other families who share similar interests.						
	2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.						
	2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.						
	v isolation or reluctance to participate can due to differences in race, language, culture, ntation, ability, etc.						



SOCIAL CONNECTIONS: SELF-			Strongly allee		age age at the age of	gree his strught it	agles agles and a special agreement to the special agreement agreement to the special agreement agreement to the special agreement agreement agreement agreement agreement
How do programs create an i	inclusive environment:	45.	Strongly A: Ag	3: Ne.	2:0158	'Stre M	J.A.
2.8 The program and its staff	2.8.1 Welcoming all families.						Comments
model positive social skills and community building by:	2.8.2 Inviting all families to program parties or social events.						
	2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.						
	2.8.4 Helping to resolve conflicts among participants.						
	2.8.5 Promoting families' understandings of different cultures and backgrounds.						
	2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.						
2.9 The program helps staff learn how to reduce stereotyping and bias by:	<b>2.9.1</b> Modeling inclusive behavior among the staff.						
storedtyping and odd by.	2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).						
	<b>2.9.3</b> Providing training and support for helping families and children resolve conflicts effectively.						
	<b>2.9.4</b> Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).						
	2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.						
	<b>2.9.6</b> Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.						
	o reach out and engage other families, includ- d members, in the program community.						



SOCIAL CONNECTIONS: SELF- How do programs facilitate n		\dots	Strangty age	White 3.	Weither agre	disagles 1.	ee Strongly dis	agies Andrealis
								Comments
(e.g., phone trees, car pools, bab	oarents to set up mutual support mechanisms bysitting co-ops, play groups, social media an communicate with one another).							
<b>2.12</b> There is time built in to proshare with each other.	ogram activities for parents to network and							
2.13 Parent-organized social/educational events and activities are encouraged and supported by:	<b>2.13.1</b> Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).							
	2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.							
the immediate neighborhood or I	eek opportunities to build good relations within ocal community (e.g., inviting neighbors to d resources for special projects, building rela-							
2.15 The program encourages s	staff and families to participate together in ocacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	with issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, pport).							
1 0	rents to local opportunities that promote family at the library, parent-child book groups, cultural							

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase. Programs can help parents increase their knowledge of parenting and child development. Programs should:

- · Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

#### 3. Neither agree for libraries 1. Strongly lie agree KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: 5. Strongly agree Not Applicable **SELF-ASSESSMENT ITEMS** A. Agree How do programs model developmentally appropriate interactions with children? **Comments** 3.1 Staff demonstrate a 3.1.1 Staff model developmentally strong understanding of child appropriate responses to children's behavior, development: interests, temperaments and need for exploration and learning. 3.1.2 Staff understand and can explain the development arc for young children. 3.1.3 Staff can explain to parents how various activities and interactions support their child's development. **3.1.4** Staff participate in regular training that updates their knowledge on advances in understanding child development. 3.2 Staff work collaboratively **3.2.1** Staff develop an ongoing partnership with parents to coordinate with parents to ensure regular communication, common understanding of the support for children's development: child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage. **3.2.2** Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development. 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?	\$.	Strongly as	Jee Sinding	Meither agre	disages	ee Strongly dis	sage to the sage of the sage o		
								Comments	
<b>3.4</b> When staff talk with parents about discipline, they:	<b>3.4.1</b> Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.								
	<b>3.4.2</b> Provide information on ageappropriate positive discipline techniques and reasonable expectations.								
	<b>3.4.3</b> Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.								
	<b>3.4.4</b> Encourage parents to discuss behavior challenges they may have at home.								
	<b>3.4.5</b> Connect parents to other parents who can share or model positive parenting approaches.								
	<b>3.4.6</b> Recognize different parental and cultural approaches to discipline and discuss them with parents.								
	<b>3.4.7</b> Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.								



KNOWLEDGE OF PARENTING A			u ag	es /	Meither agre	e nor disagi	28 die	aggee in the
How do programs provide inf parenting and child develop		85	Strongly age	Agree 3:	Meither 2:	e lui diser li Strugy di		L. Andicate
								Comments
	s are offered as one among several strategies for f parenting and child development.							
<b>3.6</b> Parenting education classes are offered in a way that reflects best practices in the field, including:	<b>3.6.1</b> Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.							
	<b>3.6.2</b> Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.							
	<b>3.6.3</b> Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	<b>3.6.4</b> Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).							
	<b>3.6.5</b> Classes and programs are delivered by staff with appropriate training and credentials for the program.							
	<b>3.6.6</b> Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	<b>3.6.7</b> Child care is offered while parents are in classes.							
	<b>3.6.8</b> Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	<b>3.6.9</b> If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
<b>3.7</b> Information is provided to p to expect of their children at eac	arents on stages of child development and what h stage.							



KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	ormation and resources	(s, 5)	Jonely Sel	Prince 3:	Meither agre	a nut disagle	Strongly die		//
<b>3.8</b> Parenting information and materials used by the	3.8.1 Are available in the language spoken by program families.							Comm	ents
program are culturally and linguistically appropriate, and:	3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.								
	<b>3.8.3</b> Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.								
<b>3.9</b> Parenting and child development information is	<b>3.9.1</b> Books and videos in a resource library.								
provided through multiple avenues to meet diverse learning styles, including:	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	<b>3.9.4</b> Regular postings on bulletin boards in public spaces.								
	3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.								
	<b>3.9.6</b> Posting of information and links on a program website and/or social media pages accessed by participants.								
<b>3.10</b> Parents are connected to a variety of resources	<b>3.10.1</b> Parent education groups (including fatherhood groups).								
that can help them explore different ways of parenting, such as:	3.10.2 Counseling.								
	3.10.3 Support groups.								
	3.10.4 Mentors/coaches.								
	<b>3.10.5</b> Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.								



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

# KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

• Planning for the child's needs after birth (e.g, car seats, cribs).

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide into on parenting and child devel	\$ ·	Strongly as	Agge 3:	Meither 3ggs	e nor disagle	Strongly dis	a de la companya del companya del companya de la co		
								Comments	
to the needs of parents in differe  Different parenting styles of  Needs and concerns of first  Needs of parents who are parents  Noncustodial parents	mothers and fathers and the strengths of each								
Nontraditional caregivers (e.  3.12 Staff provide "just in time" parenting tips and discuss parenting issues with parents when:	<b>3.12.1</b> Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).								
	<b>3.12.2</b> A parent appears to be frustrated or stressed and in need of support.								
	<b>3.12.3</b> A parent appears to be having difficulty relating to or communicating with their child.								
the program provides opportunit  Prenatal and infant health at  The birth process and what  The needs of postnatal wom	nd development to expect								



					,	, ,	, ,	, ,
KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS How do programs encourage explore parenting issues and	65-	Strongly agr	Agree 3:	Aeither 25te	ijsagiee 1.	Strong Wilson		
								Comments
<b>3.14</b> Parents and staff work together to design and organize opportunities for parent	<b>3.14.1</b> Cultural/ethnic expectations and practices about parenting.							
led discussions (such as a Community Café or Parent	<b>3.14.2</b> Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	<b>3.14.4</b> How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	<b>3.14.5</b> Being especially supportive at the time that special needs are initially identified.							
	<b>3.14.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.							
	<b>3.14.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.							



How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

6	Strongly ar	ies vi	Weither age	e nor disagree	strongly dis	agies Applicab		/
						(	Commen	its

					Comments
<b>3.15</b> Staff recognize and support the parenting challenges experienced by	<b>3.15.1</b> Regularly checking in with parents about parenting issues.				
families with children who have special needs by:	<b>3.15.2</b> Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.				
	<b>3.15.3</b> Supporting parents in understanding appropriate developmental expectations for their children with special needs.				
	<b>3.15.4</b> Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.				
	<b>3.15.5</b> Being especially supportive at the time that special needs are initially identified.				
	<b>3.15.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.				
	<b>3.15.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.				



KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs address pa strength-based perspective?		f; Suf	A; Age	s 3: Weither 2	7: headle	strongly disco	Ege <sup>®</sup>	
		/ '3 /	<u> </u>	-5/			Comment	•
<b>3.16</b> Home visitors share their observations of children with parents to help the parents recognize:	<b>3.16.1</b> Their children's unique assets, temperament, personality, communication styles and behavioral cues.						Comment	.5
parents recognize.	<b>3.16.2</b> Their children's growth and development patterns.							
	<b>3.16.3</b> Their children's positive social skills and developmentally appropriate emotional behavior.							
	<b>3.16.4</b> Their children's independence and abilities.							
	<b>3.16.5</b> Activities families can use to enhance their children's skills and development.							
	<b>3.16.6</b> Signals that development may not be on track.							
<b>3.17</b> Staff reinforce positive parent-child interactions by:	<b>3.17.1</b> Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.							
	<b>3.17.2</b> Sharing something positive with parents about their children's behavior and development.							
<b>3.18</b> Staff proactively and respectfully address concerns about parenting techniques or behavior by	<b>3.18.1</b> Asking open-ended questions to understand the behavior from the parent's perspective.							
behavior by:	<b>3.18.2</b> Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.							
	<b>3.18.3</b> Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.							
	<b>3.18.4</b> Connecting parents to resources and supports that may help to address parenting issues.							



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CONCRETE SUPPORT IN TIMES OF NEED**

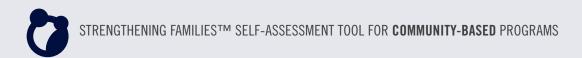
All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- · Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

#### 3. Neither agree furt lisagues 1. Strongly liesque Not Applicable **CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS** A: Agree How do programs respond immediately when families are in crisis? **Comments** 4.1 Parents are encouraged 4.1.1 The fact that staff listen, show conto turn to staff in the event of a cern and share their own personal challengcrisis through: es as appropriate in informal conversations and regular interactions. 4.1.2 Materials regularly provided to participating families. **4.1.3** Information on which staff members can help families with particular issues.



					,	,	,	, , ,		
						or disagr	* /			
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		24	88	agre	enu	die	agie		
How do programs respond im are in crisis?	mediately when families	5; Strugh Ages 3; Weither Ages 1; French Her Williams								
								Comments		
<b>4.2</b> Staff proactively respond to signs of parent or family distress by:	<b>4.2.1</b> Expressing concern and offering help in line with the program's philosophy and resources.									
	<b>4.2.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.									
	<b>4.2.3</b> Making space available for staff to meet with parents privately.									
	<b>4.2.4</b> Ensuring that parents can talk with staff members with whom they are the most comfortable.									
	<b>4.2.5</b> Being sensitive and responsive to the impact of family stress on children.									
	<b>4.2.6</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).									
<b>4.3</b> When a family is experiencing extreme difficulties or crisis:	<b>4.3.1</b> At least one staff member with a close relationship with the family reaches out to the family proactively.									
	<b>4.3.2</b> If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.									
	<b>4.3.3</b> The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.									
	<b>4.3.4</b> The program has flexible hours of operation to accommodate families outside of regular business hours.									
	<b>4.3.5</b> If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.									
	<b>4.3.6</b> Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.									



						,	,	, , ,
CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS  How do programs provide information and connections to services in the community?		ું. જ	A: A: A	agies 3.N	Reither age	jisagiee 1:	strongly die	age e
								Comments
<b>4.4</b> Staff proactively respond to signs of parent or family distress by:	<b>4.4.1</b> Expressing concern and offering help.							
distress by:	<b>4.4.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.4.3</b> Making themselves and/or other designated home visitors available to parents if parents need to talk.							
	<b>4.4.4</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.4.5</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).							
	<b>4.4.6</b> Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.							
	share information about community resources s, play lots, family activities), as well as more							
	e services dults and children)							



CONCRETE SUPPORTS: SELF- How do programs provide int services in the community?	-ASSESSMENT ITEMS formation and connections to	i, si	A. Ages	3. Weither alger not	ge a strong his age	se Comments
<b>4.6</b> The program actively builds collaborative links with other service providers by:	<ul> <li>4.6.1 Bringing services on site, when possible.</li> <li>4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.</li> <li>4.6.3 Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.</li> </ul>					
	4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.  4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.					



					,	,	,	, , , , ,
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		/		: Meither agr	nor disagi	* /	, , , , , , , , , , , , , , , , , , ,
	es to develop skills they need to	/	SHORELY 25	er les	aither agr	ee'	Strongly die	La Anticalie
identify their freeds and comi	ect to supports:	45.	51. K.	Agree ?	: NE / 2	DI3/1	St. M	ir.
								Comments
<b>4.7</b> Staff help parents to identify and mobilize their own resources to address their families' needs by:	<b>4.7.1</b> Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.							
	<b>4.7.2</b> Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.							
	<b>4.7.3</b> Encouraging parents to advocate for themselves and their child.							
	<b>4.7.4</b> Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.							
	<b>4.7.5</b> Connecting parents to peer-to-peer navigation support.							
<b>4.8</b> When staff make referrals to outside services, they support family leadership by.	<b>4.8.1</b> Brainstorming with families about what resources would be helpful.							
port family leadership by.	<b>4.8.2</b> Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.							
	<b>4.8.3</b> Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).							
	<b>4.8.4</b> Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).							
	<b>4.8.5</b> Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.							
	<b>4.8.6</b> Making a personal connection between families and service providers (if families have agreed to share information through written consent).							

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. Programs should:

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: **SELF-ASSESSMENT ITEMS**

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: SELF-ASSESSMENT ITEMS How do programs help parents foster their child's social emotional development?			Strongly agi	Person 3:	Meither age	e nut disagn	Strongly dis	Aggree Comments
<b>5.1</b> The program introduces family members to social and emotional development by:	<b>5.1.1</b> Providing parents with information on the importance of supporting children's healthy social and emotional development—and its connection to success in school and life.							
	<b>5.1.2</b> Helping parents understand ageappropriate social and emotional skills and behaviors.							
	<b>5.1.3</b> Providing opportunities to discuss social and emotional issues within a racial and cultural context.							
	<b>5.1.4</b> Offering parents ideas on how to foster a child's social and emotional learning at home.							
	<b>5.1.5</b> Asking about parents' observations of their child's social and emotional development.							
parents and their children (e.g.,	pportunities to strengthen bonds between parent-child playgroups, playing together in ve, cooking, making an art project together).							
	edge and expertise about their children's as they share information about social and							



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs model nurt		, s. s.	di. Refee	s. Meither affect florid	sagee Hut A	es comments
<b>5.4</b> Staff nurture children and model nurturing for parents by:	<ul> <li>5.4.1 Responding consistently to children in a warm, supportive manner.</li> <li>5.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.</li> <li>5.4.3 Showing warmth through appropriate physical contact.</li> <li>5.4.4 Demonstrating mutual respect between children and adults (e.g., listening</li> </ul>					
	attentively, making eye contact, treating children fairly).  5.4.5 Responding sympathetically to help children who are upset, hurt or angry.  5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.  5.4.7 Modeling empathy and appropriate emotional responsiveness.					



						,	, , ,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS						nd disagles	lieste alle
How do programs model nurt	uring care to children?	45.	Strongly agr	Agree 3:	Aeither 2: D	sagree 1: Strong!	Aut thicage
							Comments
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's social emotional development, including:	<b>5.5.1</b> Fostering children's social and emotional development in the context of their culture and language.						
	<b>5.5.2</b> Recognizing behavioral/emotional problems or developmental delays.						
	<b>5.5.3</b> Understanding the impact of loss or trauma on children and how to respond appropriately.						
	<b>5.5.4</b> Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.						
	<b>5.5.5</b> Understanding gender differences in child rearing and its impact on social and emotional development.						
	<b>5.5.6</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.7</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.8</b> Understanding how mental health and wellness affects family relationships and the developmental process of young children.						
	<b>5.5.9</b> Recognizing and responding to the impact of child or parental trauma on parent-child relationships.						
<b>5.6</b> Families are invited to obser and/or staff in the program.	ve their children interacting with other children						



					, ,	. ,	,	, , ,
SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs include chi development activities in prog	Idren's social and emotional	ধ্য	Standy all	Per 3.	Meither agree	ing disagre	strongly dis	ages and a second
								Comments
<b>5.7</b> The program supports children's social and emotional development with intentional practices that include:	<b>5.7.1</b> Encouraging children to express their feelings in ways that are the most comfortable for them.							
	<b>5.7.2</b> Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.							
	<b>5.7.3</b> Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).							
	<b>5.7.4</b> Setting clear expectations and limits for behavior.							
	<b>5.7.5</b> Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).							
<b>5.8</b> Mental health consultants assist staff in integrating social emotional development into everyday work by:	<b>5.8.1</b> Providing coaching on how to support social and emotional learning for all children.							
	<b>5.8.2</b> Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.							



				, ,	, ,	, ,	,
SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: SELF-ASSESSMENT ITEMS How do programs help children develop a positive cultural			A. Agee	aure	a puritables	Aicagles Andricale	
low do programs help children develop a positive cultural dentity and learn to interact in a diverse society?			dingly A: Aglee	Weither	disagle Strong	Applit /	
	•	5	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	<b>%`/ %</b>	/ % /	Comments	
<b>5.9</b> The program welcomes and affirms the cultures of families it serves by:	<b>5.9.1</b> Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					Comments	
	<b>5.9.2</b> Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.						
	<b>5.9.3</b> Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.						
<b>5.10</b> Staff receive training on how cultural differences affect social and emotional development, especially	<b>5.10.1</b> How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.						
differences in:	<b>5.10.2</b> The extent to which nonverbal communication is predominant across cultures.						
	<b>5.10.3</b> Diverse cultural views success and appropriate child development.						
<b>5.11</b> Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languag-	<b>5.11.1</b> Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.						
es and cultural expressions through:	<b>5.11.2</b> Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.						
	<b>5.11.3</b> Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.						
<b>5.12</b> Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.							
respectful of differences in paren	<b>5.13</b> The program's mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots.						
<b>5.14</b> Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.						



SOCIAL AND EMOTIONAL COI SELF-ASSESSMENT ITEMS How do programs respond premotional development need	roactively when social or	/ 4.	. Strongly ag	, kules	Heither age	isagee.	strongly di	Salte E. Comments	
<b>5.15</b> When staff are concerned about a child's social and emotional development, they respond by:	<b>5.15.1</b> Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.								
	<b>5.15.2</b> Arranging for appropriate screenings and assessments.								
	<b>5.15.3</b> Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).								
	<b>5.15.4</b> Helping parents develop strategies for addressing the issue at home.								
<b>5.16</b> Staff have access to a mental health consultant to help them:	<b>5.16.1</b> Identify and receive additional resources and/or training to work effectively with individual children and parents.								
	<b>5.16.2</b> Talk respectfully with parents about the child's development, needs or challenges.								

#### STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES

One responsibility of all child- and family-serving programs is to respond to possible child abuse and neglect when it is observed. Staff are mandatory reporters of child abuse and neglect in most states and should receive training every year on the state requirements on reporting. However, long before a report needs to be made, staff can also respond positively and supportively to early signs that have the potential to lead to maltreatment. The following items reflect best practices for programs in working effectively with child welfare officials.

HOW DO PROGRAMS RESPON OR NEGLECT?	D TO POSSIBLE CHILD ABUSE	/43	Strongly ag	Pares 3.	Weither all	e nordiesal	ee Strongly dis	Sagles Comments
<b>6.1</b> When children enter the program, staff discuss child abuse and neglect prevention	<b>6.1.1</b> The program's policies and practices that are designed to keep children safe from harm.							Comments
with all parents and caretak- ers. This discussion includes explanations of:	<b>6.1.2</b> Staff members' responsibility as mandatory child abuse and neglect reporters.							
	<b>6.1.3</b> How the state defines child abuse and neglect.							
	<b>6.1.4</b> The program's protocols regarding child abuse and neglect reports.							
<b>6.2</b> All staff members are trained abuse reporting laws.	d according to their state's mandatory child							
<b>6.3</b> Staff receive additional training on child abuse and neglect including:	<b>6.3.1</b> Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.							
	<b>6.3.2</b> Following the program's protocols for reporting child abuse and neglect.							
	<b>6.3.3</b> Understanding how cases are generally handled by the child protective services agency once a report is made.							
	<b>6.3.4</b> The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.							
	<b>6.3.5</b> Recognizing cultural practices that can trigger reporting of child abuse and neglect (e.g., the practice of coining to treat fevers, the use of corporal punishment for toilet training, leaving a young sibling in the care of an older sibling under the age of ten) and respectfully discussing ways that parents can prevent the likelihood of mandatory reporting.							

# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?

, sage et	
5. Strongt agge 3. Heiter agge in disagge 1. Strongt disagge and Applicable	
5. Strongt ages 3. Heiter ages rot to 1. Strongt lisages after 5. Disages Strongt lisages	
5. Strong, W. Wies 3. Weither 5. Disage, 1. Strong, W. William	

					Comments
<b>6.4</b> The program's protocols for reporting possible child abuse and neglect:	<b>6.4.1</b> Are consistent with state child welfare reporting guidelines.				
	<b>6.4.2</b> Are reviewed annually or anytime changes are made to state guidelines.				
<b>6.5</b> Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the	<b>6.5.1</b> Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.				
child welfare agency and to families that include:	<b>6.5.2</b> Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.				
	<b>6.5.3</b> Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.				
	<b>6.5.4</b> Striving to be calm, caring and supportive of the family during the reporting process.				
	<b>6.5.5</b> Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.				
	<b>6.5.6</b> Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.				
<b>6.6</b> If a child is placed into child welfare custody, staff are	<b>6.6.1</b> Maintaining contact with the child and family, if possible.				
trained to continue to support the child and the family by:	<b>6.6.2</b> Advocating for the family with the Child Protective Services system, when possible.				
	<b>6.6.3</b> Helping parents connect with resources to help reunite them with their child.				



# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

Comments  6.7 Program staff seek to collaborate with child welfare caseworkers and Child Protective Services staff to promote the child's ongoing  6.7.1 Helping to maintain stability for children involved in the system.  6.7.2 Engaging in co-case management practices, if possible.									
IOW DO PROGRAMS RESPON OR NEGLECT?	ND TO POSSIBLE CHILD ABUSE	/«	Stonely 2	gges x. Agges	3: Heither 2	giee lardie	A. Strongly di	sales la	
<b>6.7</b> Program staff seek to collaborate with child welfare									
Protective Services staff to promote the child's ongoing healthy development by:									
, ,	<b>6.7.3</b> Conducting joint home visits.								
	<b>6.7.4</b> Attending Child Protective Services meetings to share information.								

# Appendix B

# Electronic Version of Concrete Support in Times of Need Questions of SFSA Tool



#### Cone Park Library-Strengthening Families Self-Assessment-Concrete Supports

#### **Concrete Support in Times of Need-Self Assessment Items**

All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Concrete Support in Times of Need. You will be asked to identify (on a 5-point scale) your level of agreement with a series of statements associated with questions related to promoting concrete support in times of need. A Not Applicable (N/A) option is also provided. If desired, a comments text box is provided for each question should you wish to provide additional thoughts, reflections, and/or clarifications regarding your response.

This tool/survey was developed by the Center for the Study of Social Policy as part of their Strengthening Families Protective Factors Framework initiative.

Thank you for participating in this process. Your feedback and participation as a Team member is important.

Wha	t best describes your role/perspective as a Team Member?
	Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community
	Administrative Staff and/or Program Director
	Direct Service Staff and/or Volunteer
	Community Collaborator/Partner that Works with Resource Center



# Cone Park Library-Strengthening Families Self-Assessment-Concrete Supports

How do programs respond immediately when families are in crisis?

4.1	Parents are encouraged to turn to staff in the event of a crisis through:	
		Neither
		agree

		agree nor disagree	Disagree	Strongly disagree	N/A
4.1.1 The fact that staff listen, show concern and share their own personal challenges as appropriate in informal conversations and regular interactions.			$\circ$		$\bigcirc$
Comments					
4.1.2 Materials regularly provided to participating families.	agree Agree disagree Disagree disagree N/A show concern and share their own personal ormal conversations and regular interactions.				
Comments					
4.1.3 Information on which staff members can help families with particular issues.					$\bigcirc$
Comments					

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.2.1 Expressing concern and offering help in line with the program's philosophy and resources.		$\bigcirc$				
Comments						
4.2.2 Offering to connect families to resources, including help lines, community resources or public agencies.			0	0	0	
Comments						
4.2.3 Making space available for staff to meet with parents privately.  Comments	0	0	0	0	0	
4.2.4 Ensuring that parents can talk with staff members with whom they are the most comfortable.	0	0	0	0	0	C
Comments						
4.2.5 Being sensitive and responsive to the impact of family stress on children.  Comments		0	0	0	0	C
4.2.6 Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).	0	0	0	0	0	C
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.3.1 At least one staff member with a close relationship with the family reaches out to the family proactively.						C
Comments						
4.3.2 If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.  Comments	0		0	0	0	C
3.1 At least one staff member with a close relationship with the family reaches it to the family proactively.  Domments  3.2 If the family wants assistance, staff members, including supervisors or a aff team, work with the family to help them manage the crisis.  Domments  3.3 The programs has resources for family assistance, such as diapers, insportation, a safe sleeping environment or even emergency funds.  Domments  3.4 The program has flexible hours of operation to accommodate families atside of regular business hours.  Domments  3.5 If the family agrees, staff connect the family to resources outside the orgam that can help them, such as medical or mental health specialists, or rivices such as respite care or emergency crisis services.  Domments  3.6 Staff continue to offer support to the family and monitor the situation daily	0	0	0	0	0	C
4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.  Comments	0	0	0	0	0	C
4.3.5 If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.  Comments	0	0	0	0	0	C
4.3.6 Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.	0	0	0	0	0	



# Cone Park Library-Strengthening Families Self-Assessment-Concrete Supports

How do programs provide information and connections to services in the community?

4.4a	Staff proactively	respond to s	sians of p	arent or family	v distress by	v:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.4.1 Expressing concern and offering help.						
Comments						
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.		$\bigcirc$	$\circ$	$\circ$		C
Comments						
4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.	0	$\bigcirc$	0	0		C
Comments						
4.4.4 Being sensitive and responsive to the impact of family stress on children.	0		0	0		C
Comments						
4.4.5 Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).		0				C
Comments						
4.4.6 Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.		0	0	0		C
Comments						

<ul> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> </ul>		Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	
4.5 The program maintains up-to-date information about services in the community that include hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree  Agree  Neither agree nor disagree  Disagree  Strongly disagree	$\bigcirc$	Not applicable	
hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Com	ment	
hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree			
hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree			
hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	4.5	The program maintains up-to-date information about services in the community that includ	es
included are:  Food pantries  Health providers  Domestic violence services  Shelters  Respite care for children  Alcohol and substance abuse services  Mental health services (for adults and children)  Economic supports  Legal assistance  Quality early care and education  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable			
<ul> <li>Health providers</li> <li>Domestic violence services</li> <li>Shelters</li> <li>Respite care for children</li> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>			
<ul> <li>Domestic violence services</li> <li>Shelters</li> <li>Respite care for children</li> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>	• F	ood pantries	
<ul> <li>Shelters</li> <li>Respite care for children</li> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>	• +	ealth providers	
<ul> <li>Respite care for children</li> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>	• [	omestic violence services	
<ul> <li>Alcohol and substance abuse services</li> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>	• 5	helters	
<ul> <li>Mental health services (for adults and children)</li> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>			
<ul> <li>Economic supports</li> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>			
<ul> <li>Legal assistance</li> <li>Quality early care and education</li> <li>Strongly agree</li></ul>			
<ul> <li>Quality early care and education</li> <li>Strongly agree</li> <li>Agree</li> <li>Neither agree nor disagree</li> <li>Disagree</li> <li>Strongly disagree</li> </ul> Not applicable			
Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable			
Not applicable	• (	uality early care and education	
		Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	
Continent	Com		
		nent —	

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.6.1 Bringing services on site, when possible.						
Comments						
4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.  Comments	0		0	0	0	
4.6.3 Coordinating follow-up efforts across service providers, ensuring that the amily is involved in service coordination and informed about all communication.						
Comments						
4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.	0					
Comments						
1.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.		$\circ$	0	0		0
Comments						



How do programs help families to develop skills they need to identify their needs and connect to supports?

4.7 Staff help parents to identify and mobilize their own resources to address their families' needs by:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.7.1 Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.	$\bigcirc$					
Comments						
4.7.2 Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.  Comments	0		$\circ$	0	0	
Comments						
4.7.3 Encouraging parents to advocate for themselves and their child.						C
Comments						
4.7.4 Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.	0		0	0	0	C
Comments						
4.7.5 Connecting parents to peer-to-peer navigation support.	0	0	0	0	0	C
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.8.1 Brainstorming with families about what resources would be helpful.						C
Comments						
4.8.2 Respecting when a family is not comfortable with a specific provider by nelping them to either address and resolve the issue or identify other resources.	0	0				C
Comments						
4.8.3 Helping parents learn how to address barriers to utilizing services (e.g., ack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).	0	0	0	0	0	C
Comments						
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).	0		0	0	0	C
1.8.5 Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves f they were not satisfied.						C
Comments						
4.8.6 Making a personal connection between families and service providers (if amilies have agreed to share information through written consent).		0		0		C
Comments						

### **Appendix C**

Cone Park Library Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs—

Concrete Support in Times of Need Results

Updated/Revised (September 2021)

### Cone Park Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs—Concrete Support Results

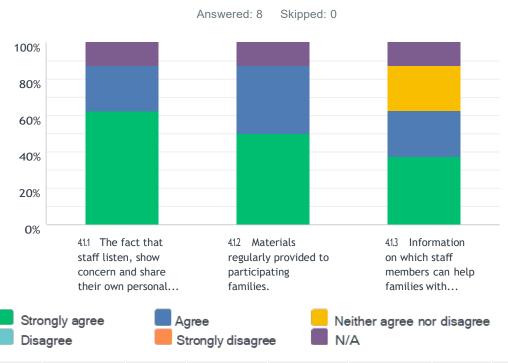
Updated/Revised (September 2021)

### Q1 What best describes your role/perspective as a Team Member?



ANSWER CHOICES	RESPONS	SES
Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community	50.00%	4
Administrative Staff and/or Program Director	0.00%	0
Direct Service Staff and/or Volunteer	25.00%	2
Community Collaborator/Partner that Works with Resource Center	25.00%	2
TOTAL		8

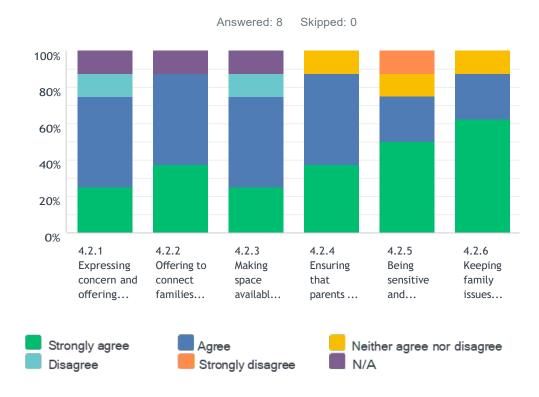
# Q 4.1 Parents are encouraged to turn to staff in the event of a crisis through:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.1.1 The fact that staff listen, show concern and share their own personal challenges as appropriate in informal conversations and regular interactions.	62.50% 5	25.00%	0.00% 0	0.00%	0.00% 0	12.50% 1	8	4.71
4.1.2 Materials regularly provided to participating families.	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	12.50% 1	8	4.57
4.1.3 Information on which staff members can help families with particular issues.	37.50% 3	25.00%	25.00% 2	0.00%	0.00%	12.50% 1	8	4.14

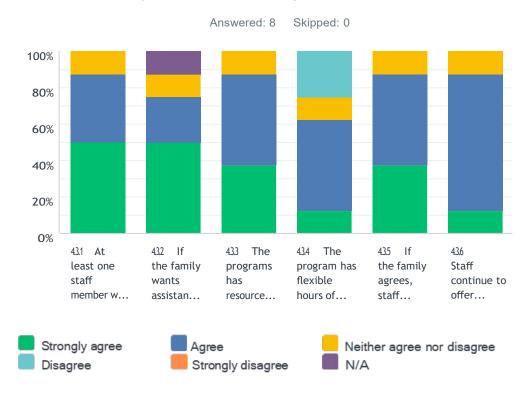
#	COMMENTS FOR "4.1.1 THE FACT THAT STAFF LISTEN, SHOW CONCERN AND SHARE THEIR OWN PERSONAL CHALLENGES AS APPROPRIATE IN INFORMAL CONVERSATIONS AND REGULAR INTERACTIONS."	DATE
1	this would be a good plan	8/2/2021 10:30 AM
#	COMMENTS FOR "4.1.2 MATERIALS REGULARLY PROVIDED TO PARTICIPATING	DATE
	FAMILIES."	
1	this would be a good plan	8/2/2021 10:30 AM
#	COMMENTS FOR "4.1.3 INFORMATION ON WHICH STAFF MEMBERS CAN HELP	DATE
**		
"	FAMILIES WITH PARTICULAR ISSUES."	271.2

### Q 4.2 Staff proactively respond to signs of parent or family distress by:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.2.1 Expres concern and in line with th philosophy a resources.	offering help e program's	25.00% 2	50.00%	0.00%	12.50% 1	0.00%	12.50% 1	8	4.00
4.2.2 Offering families to re including help community re public agence	esources, p lines, esources or	37.50% 3	50.00%	0.00% 0	0.00%	0.00%	12.50% 1	8	4.43
4.2.3 Making available for with parents	staff to meet	25.00% 2	50.00% 4	0.00% 0	12.50% 1	0.00% 0	12.50% 1	8	4.00
4.2.4 Ensuri parents can be staff member whom they a comfortable.	talk with rs with	37.50% 3	50.00% 4	12.50% 1	0.00%	0.00% 0	0.00%	8	4.25
4.2.5 Being s and responsi impact of fan on children.	ive to the	50.00% 4	25.00%	12.50% 1	0.00%	12.50% 1	0.00%	8	4.00
4.2.6 Keepir issues conficuralless given permission to information (opotential abuneglect is at report is made	dential explicit o share except when ise or issue and a	62.50% 5	25.00%	12.50% 1	0.00% 0	0.00%	0.00%	8	4.50
#		FOR "4.2.1 EXAM'S PHILOS				HELP IN LINE	WITH	DATE	
1	family falls th	ru the crack mo	st of the tim	nes				8/2/2021 1	0:30 AM
#	INCLUDING	FOR "4.2.2 OF HELP LINES, C						DATE	
#		FOR "4.2.3 MA	AKING SPA	CE AVAILABL	E FOR STAFF	TO MEET WITH	ł	DATE	
	PARENTS P There are no								
#	COMMENTS	FOR "4.2.4 EN				TH STAFF MEM	IBERS	DATE	
	There are no	THEY ARE TH	HE MOST C	OMFORTABL	E."				
#	COMMENTS			TIVE AND RES	SPONSIVE TO	THE IMPACT O	F	DATE	
	There are no		- /						
#	EXPLICIT PE		SHARE IN	FORMATION (I	EXCEPT WHEN	L UNLESS GIV		DATE	
	There are no	responses.							

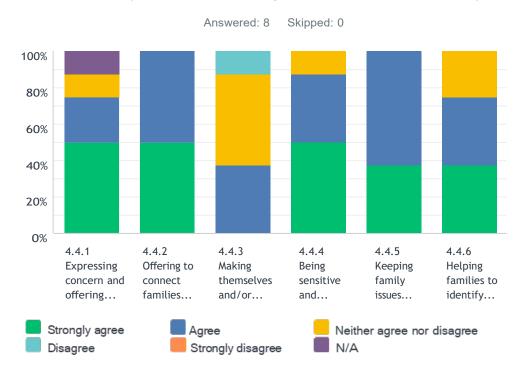
### Q 4.3 When a family is experiencing extreme difficulties or crisis:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.3.1 At leas member with relationship v family reache family proact	a close with the es out to the	50.00%	37.50% 3	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.38
4.3.2 If the fa assistance, s members, in supervisors of team, work v family to help manage the	staff cluding or a staff vith the o them	50.00% 4	25.00%	12.50% 1	0.00%	0.00%	12.50% 1	8	4.43
4.3.3 The properties of the pr	r family such as sportation, a g or even	37.50% 3	50.00%	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.25
4.3.4 The priflexible hours operation to accommodate outside of regulations hours are supported business hours.	s of te families gular	12.50% 1	50.00%	12.50% 1	25.00% 2	0.00%	0.00%	8	3.50
4.3.5 If the fa agrees, staff family to rescontiste the p can help their medical or m specialists, consuch as respectives.	connect the burces rogram that m, such as ental health or services ite care or	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
4.3.6 Staff co offer support family and m situation dail situation is m	to the onitor the y until the	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00%	0.00%	8	4.00
#		FOR "4.3.1 AT				CLOSE / PROACTIVEL	Y."	DATE	
	There are no	responses.							
#	INCLUDING		OR A STA			AFF MEMBERS FAMILY TO HE		DATE	
	There are no	responses.							
#		APERS, TRAN				FAMILY ASSIS RONMENT OR		DATE	
	There are no	responses.							

#	COMMENTS FOR "4.3.4 THE PROGRAM HAS FLEXIBLE HOURS OF OPERATION TO ACCOMMODATE FAMILIES OUTSIDE OF REGULAR BUSINESS HOURS."	DATE
1	depend on the need	8/2/2021 10:30 AM
#	COMMENTS FOR "4.3.5 IF THE FAMILY AGREES, STAFF CONNECT THE FAMILY TO RESOURCES OUTSIDE THE PROGRAM THAT CAN HELP THEM, SUCH AS MEDICAL OR MENTAL HEALTH SPECIALISTS, OR SERVICES SUCH AS RESPITE CARE OR EMERGENCY CRISIS SERVICES."	DATE
	There are no responses.	
#	COMMENTS FOR "4.3.6 STAFF CONTINUE TO OFFER SUPPORT TO THE FAMILY AND MONITOR THE SITUATION DAILY UNTIL THE SITUATION IS MANAGEABLE."	DATE
	There are no responses.	

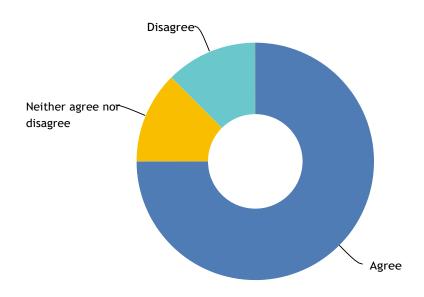
### Q 4.4a Staff proactively respond to signs of parent or family distress by:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.4.1 Express concern and help.	•	50.00% 4	25.00% 2	12.50% 1	0.00%	0.00%	12.50% 1	8	4.43
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.		50.00% 4	50.00%	0.00%	0.00%	0.00%	0.00%	8	4.50
and/or other home visitor	g themselves designated is available to arents need to	0.00%	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00%	8	3.25
4.4.4 Being and respons impact of fall on children.	sive to the	50.00% 4	37.50%	12.50% 1	0.00%	0.00%	0.00%	8	4.38
4.4.5 Keepi issues conficunless giver permission t information (potential abuneglect is at report is mar	dential n explicit o share (except when use or : issue and a	37.50% 3	62.50% 5	0.00%	0.00%	0.00%	0.00%	8	4.38
4.4.6 Helpir identify shor supports and long-term strategy are bett sustain them endure hards	d prepare rategies so ter able to nselves and	37.50% 3	37.50%	25.00% 2	0.00%	0.00%	0.00%	8	4.13
#	-	S FOR "4.4.1 E	EXPRESSII	NG CONCERN	I AND OFFERI	NG HELP."		DATE	
	There are no								
#	COMMENTS	S FOR "4.4.2 (				O RESOURCE:		DATE	
1	this would go	ood						8/2/2021 1	0:32 AM
#					ND/OR OTHE S NEED TO TA	R DESIGNATE ALK."	D HOME	DATE	
	There are no	responses.							
#		S FOR "4.4.4 E RESS ON CHI		SITIVE AND I	RESPONSIVE	TO THE IMPA	CT OF	DATE	
	There are no	responses.							
#	<b>GIVEN EXP</b>	LICIT PERMIS	SION TO S	HARE INFOR	MATION (EXC	TIAL UNLESS EPT WHEN T IS MANDATE		DATE	
	There are no	responses.							
#					DENTIFY SHO	ORT-TERM SUI DSHIPS."	PPORTS	DATE	
	There are no	responses.							

# Q 4.4b Parents are encouraged to share information about community resources (e.g., toy exchanges, resale shops, play lots, family activities), as well as more formal services.





ANSWER (	HOICES	RESPONSES	RESPONSES				
Strongly ag	ree	0.00%		0			
Agree		75.00%		6			
Neither agre	ee nor disagree	12.50%		1			
Disagree		12.50%		1			
Strongly dis	agree	0.00%		0			
Not applica	ple	0.00%		0			
TOTAL				8			
#	COMMENT		DATE				
	There are no responses.						

Q 4.5 The program maintains up-to-date information about services in the community that includes hours of operation, fees, locations, eligibility requirements, language capacities, etc. Services to be included are: •

Food pantries • Health providers • Domestic violence services • Shelters • Respite care for children • Alcohol and substance abuse Services • Mental health services (for adults and children) • Economic supports • Legal assistance • Quality early care and education

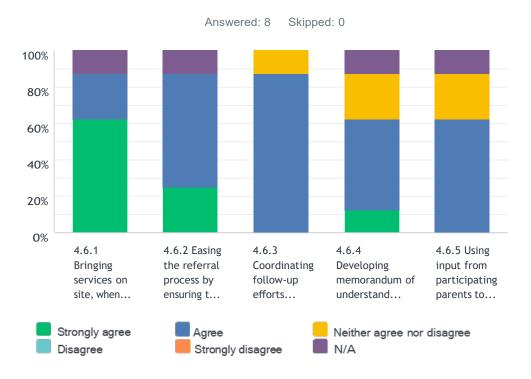
Skipped: 0

Answered: 8

**ANSWER CHOICES RESPONSES** 50.00% 4 Strongly agree 50.00% Agree 0.00% 0 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 0.00% 0 Not applicable **TOTAL** 8

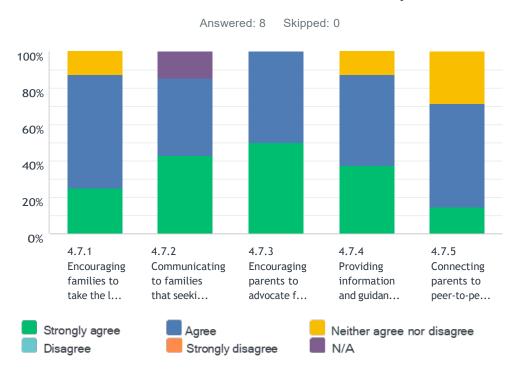
#	COMMENT	DATE
	There are no responses.	

# Q 4.6 The program actively builds collaborative links with other service providers by:



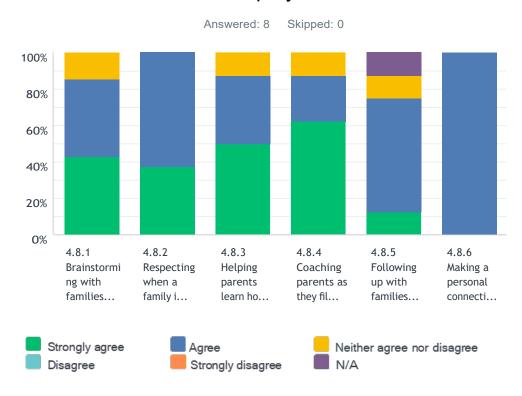
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.6.1 Bringing on site, wher		62.50% 5	25.00% 2	0.00%	0.00%	0.00%	12.50% 1	8	4.71
4.6.2 Easing process by e workers in dit programs knoother and workers and workers and workers.	nsuring the fferent ow each	25.00% 2	62.50% 5	0.00%	0.00%	0.00%	12.50% 1	8	4.29
4.6.3 Coordi follow-up effor service provide ensuring that is involved in coordination informed abordination communication.	orts across ders, the family service and ut all	0.00%	87.50% 7	12.50% 1	0.00%	0.00%	0.00%	8	3.88
memorandur understandin established p with partners coordinate se	4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.		50.00%	25.00% 2	0.00%	0.00%	12.50% 1	8	3.86
participating identify and a fill gaps in the	4.6.5 Using input from 0.00 participating parents to identify and advocate to fill gaps in the services available to families.		62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71
#	COMMENTS	FOR "4.6.1 BR	INGING SE	RVICES ON S	ITE, WHEN PO	SSIBLE."		DATE	
	There are no	responses.							
#		FOR "4.6.2 EAN DIFFERENT F				NSURING THE WORK TOGETH	IER."	DATE	
	There are no	responses.							
#	<b>PROVIDERS</b>		HAT THE FA	AMILY IS INVO		ACROSS SERVI		DATE	
	There are no	responses.							
#		D PROCESSE				STANDING OR SERVICES FOR		DATE	
1	this would be	great						8/2/2021 1	0:32 AM
#		FOR "4.6.5 US ATE TO FILL O				ENTS TO IDEN D FAMILIES."	TIFY	DATE	
	There are no	responses.							

# Q 4.7 Staff help parents to identify and mobilize their own resources to address their families' needs by:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.7.1 Encou families to ta when creatin address fam including add barriers and outcomes.	ke the lead g a plan to ily needs, Iressing	25.00% 2	62.50% 5	12.50% 1	0.00%	0.00%	0.00%	8	4.13
4.7.2 Comm families that is not an indi weakness or parent, but ra step toward to resilience.	seeking help cator of failure as a ather is a	42.86% 3	42.86%	0.00% 0	0.00% 0	0.00% 0	14.29% 1	7	4.50
4.7.3 Encou parents to ac themselves a child.	lvocate for	50.00% 4	50.00%	0.00% 0	0.00% 0	0.00%	0.00%	8	4.50
4.7.4 Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.		37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
4.7.5 Connecting parents to peer-to-peer navigation support.		14.29% 1	57.14% 4	28.57% 2	0.00%	0.00%	0.00%	7	3.86
#	COMMENTS FOR "4.7.1 ENCOURAGING FAMILIES TO TAKE THE LEAD WHEN CREATING A PLAN TO ADDRESS FAMILY NEEDS, INCLUDING ADDRESSING BARRIERS AND ANTICIPATED OUTCOMES."						RIERS	DATE	
1	this is needed							8/2/2021 10:33 AM	
#	COMMENTS FOR "4.7.2 COMMUNICATING TO FAMILIES THAT SEEKING HELP IS NOT AN INDICATOR OF WEAKNESS OR FAILURE AS A PARENT, BUT RATHER IS A STEP TOWARD BUILDING RESILIENCE."						DATE		
1	Don't know.							7/31/2021 12:33 PM	
#	COMMENTS AND THEIR		COURAGIN	IG PARENTS 1	TO ADVOCATE	FOR THEMSE	LVES	DATE	
	There are no	responses.							
#	COMMENTS FOR "4.7.4 PROVIDING INFORMATION AND GUIDANCE TO FAMILIES SO THAT THEY UNDERSTAND THEIR RIGHTS IN ACCESSING SERVICES, GAIN KNOWLEDGE OF RELEVANT SERVICES AND LEARN HOW TO NAVIGATE THROUGH SERVICE SYSTEMS."						DATE		
	There are no	responses.							
#	COMMENTS SUPPORT."	FOR "4.7.5 CO	NNECTING	PARENTS TO	PEER-TO-PE	ER NAVIGATIO	N	DATE	
1	unknown					8/6/2021 8	:24 AM		
2	Don't know.							7/31/2021	12:33 PM

# Q 4.8 When staff make referrals to outside services, they supportfamily leadership by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.8.1 Brainstorming with families about what resources would be helpful.	42.86% 3	42.86% 3	14.29% 1	0.00%	0.00%	0.00%	7	4.29
4.8.2 Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00%	0.00%	8	4.38
4.8.3 Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).	50.00% 4	37.50%	12.50% 1	0.00%	0.00%	0.00%	8	4.38
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).	62.50% 5	25.00% 2	12.50% 1	0.00%	0.00%	0.00%	8	4.50
4.8.5 Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00%	12.50% 1	8	4.00
4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).	0.00%	100.00%	0.00%	0.00%	0.00%	0.00%	8	4.00

#	COMMENTS FOR "4.8.1 BRAINSTORMING WITH FAMILIES ABOUT WHAT RESOURCES WOULD BE HELPFUL."	DATE
1	Don't know.	7/31/2021 12:33 PM
#	COMMENTS FOR "4.8.2 RESPECTING WHEN A FAMILY IS NOT COMFORTABLE WITH A SPECIFIC PROVIDER BY HELPING THEM TO EITHER ADDRESS AND RESOLVE THE ISSUE OR IDENTIFY OTHER RESOURCES."	DATE
	There are no responses.	

#	COMMENTS FOR "4.8.3 HELPING PARENTS LEARN HOW TO ADDRESS BARRIERS TO UTILIZING SERVICES (E.G., LACK OF TRANSPORTATION OR CHILDCARE, FEES, LANGUAGE BARRIERS, LACK OF TRANSLATION SERVICES, LACK OF CULTURAL SENSITIVITY AND INCLUSIVENESS)."	DATE
	There are no responses.	
#	COMMENTS FOR "4.8.4 COACHING PARENTS AS THEY FILL OUT INITIAL PAPERWORK REQUIRED TO ACCESS THESE SERVICES, (E.G., INSURANCE AND ELIGIBILITY FORMS)."	DATE
	There are no responses.	
#	COMMENTS FOR "4.8.5 FOLLOWING UP WITH FAMILIES ON REFERRALS TO ENSURE THAT THEY WERE SATISFIED WITH THE SERVICES THEY RECEIVED, AND PROVIDING HELP IN ADVOCATING FOR THEMSELVES IF THEY WERE NOT SATISFIED."	DATE
1	Don't know.	7/31/2021 12:33 PM
#	COMMENTS FOR " 4.8.6 MAKING A PERSONAL CONNECTION BETWEEN FAMILIES AND SERVICE PROVIDERS (IF FAMILIES HAVE AGREED TO SHARE INFORMATION THROUGH WRITTEN CONSENT)."	DATE
	There are no responses.	





The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting

Knowledge of Parenting and Child Development

Christen Lancaster (Cone Park Library Resource Center Community Research Coordinator), Robin Perry (Lead Evaluator), Celia George, Ruth Goodman, Lovell Haughton, Lashon Jenkins, Diane Johnson, Artie McMillan, Erica Reed, Stephanie Seawright, and Toni Spoliansky (CP SFSA Team)

**Institute for Child and Family Services Research** 



This report was funded by the Children's Bureau; Administration on Children, Youth, and Families; Administration for Children and Families, U.S. Department of Health and Human Services, under grant # 90CA1868. The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of the Children's Bureau.

#### **Table of Contents**

	Page
Introduction	1
The CP Library Resource Center—Brief History	1
The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs	2
The CP Strengthening Families Self-Assessment Team	5
Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/ Action Items Associated with Supporting Families by Promoting Knowledge of Parenting and Child Development	9
How Does Cone Park Library Resource Center Model Developmentally Appropriate Interactions with Children?	9
How Does Cone Park Library Resource Center Provide Information and Resources on Parenting and Child Development?	13
How Does Cone Park Library Resource Center Encourage Parents to Observe, Ask Questions, Explore Parenting Issues and Try Out New Strategies?	20
How Does Cone Park Library Resource Center Address Parenting Issues From a Strength-Based Perspective?	21
Fidelity of Promoting Knowledge of Parenting and Child Development to CSSP Protective Factor	24
Appendix A: The Strengthening Families Self-Assessment Tool	25
Appendix B: Electronic Version of Knowledge of Parenting and Child Development Questions of SFSA Tool	67
Appendix C: SFSA Tool for Community-Based Programs—Knowledge of Parenting and Child Development Results	84

#### Suggested Citation:

Lancaster, C., Perry, R., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Knowledge of Parenting and Child Development*. Tallahassee: Institute for Child and Family Services Research.

#### Introduction

This report summarizes findings from, and recommendations developed by the Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team utilizing a standardized process developed by the Center for the Study of Social Policy. This report focuses specifically upon findings generated from the utilization of the Strengthening Families Self-Assessment Tool for Community-Based Programs (and associated processes) by the CPLRC SFSA team with a specific focus on items/measures associated with supporting families by promoting **knowledge of parenting and child development**. Knowledge of Parenting and Child Development is one of five protective factors that serve as an organizing framework for the structure and delivery of supports and services to the neighborhood/community served by the Cone Park Library Resource Center (CPLRC). Specific strengths associated with promoting knowledge of parenting and child development have been identified along with discussion and recommended action item for enhancing/strengthening responsiveness to address this protective factor.

#### The Cone Park Library Resource Center—Brief History

Partnership for Strong Families (PSF), the lead community-based care agency under contract with the Florida Department of Children and Families (since 2003) to provide comprehensive child welfare services in 13 North Central Florida counties, has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in North Central Florida. PSF's efforts began in 2007 to develop a network of Family Resource Centers (FRC) that emphasize a strengthening family approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

The PSF Resource Center (RC) model is built upon a multi-system collaborative focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care. One of the major strengths of the Resource Center Model utilized at the four existing sites (which includes the CPLRC) is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There is a strong history of collaboration with each of the existing three Resource Centers in Gainesville. Over time, a network of over 75 community partners (across all sites) has been developed. These collaborative efforts have been well documented in select Resource Center reports (for each RC and PSF), website and social media posts, Resource Center pamphlets/infographics, news reports, and select publications. The services provided are free and are intended to be responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons and enhancement of the community's ability to leverage resources to benefit some of Gainesville's most at-risk populations.

The first Family Resource Center developed by Partnership for Strong Families was the Library Partnership Resource Center (developed in collaboration with the Alachua County Library District) which opened its doors to the community in July 2009. In 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, a historically under-served community. Due to the existing perceived success of the Library Partnership Resource Center, along with the identified needs of the community, PSF was asked to partner with ACLD to also open a resource center at the Cone Park Library. As southeast Gainesville was considered a "hotspot" of high rates of

reported child maltreatment, PSF eagerly agreed to move forward with this new venture. Prior to opening the new Resource Center, PSF met with the community, assessed household needs, and established collaborative partnerships. Through community meetings and assessments, several local needs were identified that the new Resource Center could help address. The following local needs were identified: GED services, concrete and educational supports for children and parents, meaningful engagement and empowerment of parents and access to healthcare in southeast Gainesville. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Resource Center began operating full-time in May 2014.

All Gainesville Resource Centers are frequently described as "one-stop-shops" for local resources. Patrons may walk into the RCs for immediate access to available services or meet with professional RC staff to help determine needs and connect with local resources. Services provided through the RCs are voluntary and are free of charge to all community members as the result of community partnerships, various funding opportunities, and both monetary and in-kind donations.

The basis of PSF's RC Model is the Strengthening Families Approach and Protective Factors Framework (Center for the Study of Social Policy [CSSP], 2014). The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each RC. Although there may be some common services and supports across RCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each RC. The five protective factors include:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the CPLRC at promoting knowledge of parenting and child development. This report represents one small element of a comprehensive process evaluation meant to advance knowledge regarding the functioning, responsiveness, and impact of PSF Family Resource Centers upon the communities they serve. Since supports and services at the CPLRC are structured in accordance with the CSSP Protective Factors Framework, the Strengthening Families Self-Assessment Tool for Community-Based Programs, and associated processes (see below) are being used to help determine the fidelity of specific implementation strategies (in accordance with the above noted framework) at promoting parental resilience and strengthening families. This process will help identify existing strengths of select supports and services and help identify areas for potential improvements.

### The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs

The Strengthening Families Self-Assessment Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) that will aid each in assessing the extent to which each of the RCs have implemented services/activities to engage and strengthen families with respect to

each of the protective factors<sup>1</sup>. The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Resource Center has implemented services/activities in alignment with core strategies for building each of the following protective factors (see above).

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). See Appendix A for a copy of the assessment tool and protocol. Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) two administrative and direct service staff, three community collaborators, and three parents who have been active participants in the program (or whose children participate in the program). The four parents/patrons initially selected to be members of each assessment team were chosen from a list of patrons that consented to be part of the broader study and who, following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons), received services or participated in activities linked to protective factors. These processes were followed in the establishment of the CPLRC SFSA Team, although only two community collaborators were able to actively participate in the process. Composition (see below) includes two administrators and direct service staff (Lashon Jenkins and Erica Reed), two community collaborators (Diane Johnson and Stephanie Seawright), and four Community Ambassadors (Celia George, Ruth Goodman, Lovell Haughton, and Artie McMillan). The term "Community Ambassador" was decided by the team to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) contributions to this process. Profiles of team members are denoted below.

As highlighted in **Appendix A**, there are a series of indicators and associated items linked with each Protective Factor. These indicators and items represent a series of actions/activities, program elements, protocols, and policies associated with implementation of services meant to enhance each Protective Factor according to best-practice/evidence-based standards. For services and supports focused on Knowledge of Parenting and Child Development there are 18 indicators with 70 associated items for which each team member is asked to individually rate their level of item statement agreement on a five-point Likert-type scale (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree) with an option for Not Applicable. This same scale is used for an assessment of all Protective Factor items/indicators. Collectively (for Knowledge of Parenting and Child Development), responses to these assessment items are meant to respond to the following questions:

<sup>&</sup>lt;sup>1</sup> For more information regarding CSSP's Strengthening Families and Protective Factors Framework, please see: <a href="https://cssp.org/our-work/project/strengthening-families/">https://cssp.org/our-work/project/strengthening-families/</a> Additional information regarding the self-assessment model and associated methodology, tools, and recommended processes, see: <a href="https://cssp.org/our-work/projects/self-assessments-for-programs/">https://cssp.org/our-work/projects/self-assessments-for-programs/</a> and Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

How Does Cone Park Library Resource Center Model Developmentally Appropriate Interactions with Children? (Items 3.11 through 3.47)

How Does Cone Park Library Resource Center Provide Information and Resources on Parenting and Child Development? 3.5 through 3.13)

How Does Cone Park Library Resource Center Encourage Parents to Observe, Ask Questions, Explore Parenting Issues and Try Out New Strategies? (Items 3.14.1 through 3.15.7)

How Does Cone Park Library Resource Center Address Parenting Issues from a Strength-Based Perspective? (Items 3.16.1 through 3.18.4)

Team members received an orientation to the CSSP Protective Factors framework, its relationship to the CP Library Resource Center service model, and the Strengthening Families Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. See Appendix B for a copy of the electronic version of the tool associated with Knowledge of Parenting and Child Development questions/items (the focus of this report). For the electronic versions, each Team member was provided a unique (and secure) web link and a QR code, providing them with two electronic link options for responding to the survey (a preference/option desired by team members) but informed to respond only once. Although the names of members/respondents were known to all team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a team member completed a paper version of the tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the Lead Evaluator was available via phone and email to field any questions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members complete their scores, these data were shared via a written summary report (see **Appendix C** for the *SFSA Tool for Community-Based Programs*— *Knowledge of Parenting and Child Development Results*) highlighting the distribution of responses by team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is not itemized in the tool protocols (it is left to the team), the Lead Evaluator suggested some processes and the team made initial decisions regarding how to proceed. Each question and associated items were reviewed as a collective and then as individual items. For many items established consensus and agreement was evident, especially for select items and questions identified as observed strengths of the CPLRC. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (including by role of the respondent as a stratum) and /or the weighted mean score for a select item was

below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences and a collective decision was made regarding whether an action item was needed or should be considered. The team engaged in facilitated brainstorming to identify potential recommendations for action items (if any). If any action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation will follow the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

The initial meeting of the CPLRC SFSA Team took place on July 21, 2021. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet monthly over an extended timeframe through the fall months instead other options, including multiple times over a more concentrated time frame. Communication with, between, and among individual team members could take place in-between meetings but all discussion and brainstorming activities would take place during in-person, web-based, or hybrid meetings. Due to variations in community spread of Covid-19 during this timeframe, the meeting format changed/varied in accordance with safety concerns and Partnership for Strong Families service and administrative pandemic protocols. Subsequent meetings that involved the discussion of Knowledge of Parenting and Child Development items took place on November 17, 2021. A follow up to the November 17<sup>th</sup> meeting with the Manager of the CPLRC and the CPL was held on December 15, 2021. The dates and times of meeting were in accordance with preferred times and schedules of all team members and attendees.

### The Cone Park Strengthening Families Self-Assessment Team

As denoted earlier, a team of dedicated community ambassadors, CPLRC staff, and collaborative partners worked together to engage in a comprehensive assessment of the supports and services provided by the CPLRC in accordance with the CSSP's protective factors framework. The biographies of these team members are detailed below.



Celia George has been a patron at CPLRC since 2015. She is a Florida native and has spent much of her life living in Gainesville, FL. She graduated from the Santa Fe College Police Academy and went on to work with the University of Florida Police Department. During her time as a police officer, she moved near Morningside Nature Center which is only a few miles from the present location of CPLRC. She has raised two daughters who have gone on to be college graduates, building upon her successes. When Celia retired, she turned her attention to her grandchildren and began using the Fred Cone Park Facilities with them. She has made sure they are included in CPLRC summer camps, family events and activities like Homework Help and Girl Scouts. One of her granddaughters currently participates in the Girl Scouts program at CPLRC. She frequently uses the track behind the Cone Park library and attends the food distribution programs. She has been an

encouragement to her twin grandchildren who have started using the track as well. She wanted to be a part of this SFSA Team because "I want to help make a difference". Celia loves Cone Park because "it serves so many different purposes and meets the needs for so many families in the community".



**Ruth Goodman** has been a patron at the CPLRC since 2019. During that time, she also utilized services at the SWAG Family Resource Center and the Library Partnership Library Resource Center. She was born and raised in the French West Indies but after visiting the United States as a young woman she decided to stay and make a life for herself in the US. She married at age 19 and has raised 4 children with her husband. After retiring as a lead teacher for 20 years, Ruth now focuses on assisting with her 10 grandchildren. One of the ways she does this is by reaching out to the Resource Centers. She is happy to be a part of the Cone Park Library Resource Center because "it's very helpful and informative for children and families and the community". Ruth wanted to be a member of our Strengthening Families Self-Assessment Team because she wants to be a part of any work that could potentially help keep families together.



**Lovell Haughton** has been a patron of the CPLRC since August 2020. She is a native of New York but has been in this community for 30 years. Lovell has experience working with community organizations, resources, and support services for those diagnosed with HIV. Her drive to care for others pushes her forward in everything that she does. She strives to maintain and build partnerships with families and be a support and liaison for them. She also acts as a support for her family and 7 grandchildren. Lovell has enjoyed working with the CPLRC because it's community and family oriented.



Lashon Antonia Jenkins first became involved with the CPLRC 10 years ago, as a patron to the CPL. Lashon is a Gainesville native, residing on the eastside of town, where the CPLRC is located. For the past 10 years, she has been an employee with Partnership for Strong Families in the adoptions department. She has worked directly with CPLRC as an intern this last year to satisfy requirements for her Master of Social Work degree. Currently, Lashon holds a Bachelor of Arts in Psychology and a Master of Human Services degree. Her parents also live in the community, and she makes time to visit them regularly between school, work, and an occasional rest. Lashon likes the way patrons are treated by the staff as they seek services that they do not have access to, like computer use or emergency food and clothing. She is glad to be a part of the SFSA Team because "when we know how to

grow, it will make it that much better."



**Diane Holt Johnson** was born in Newark, New Jersey and has worked in Gainesville, FL for six years. She graduated from the University of Pennsylvania with a BA in Sociology and the University of South Florida with a master's degree in Library & Information Science. Diane has a lifetime of experience volunteering in churches, non-profit and social service organizations (i.e., United Way, Take Stock in Children, Boys & Girls Club, Reading Pals, American Cancer Society, local Community Development Corporations, and grassroots neighborhood associations.) She and her husband of 42 years, Derryl, have raised six children, who are their proudest accomplishments. She loves the CPLRC because it values families and works to preserve them; emphasizes preventing and protecting families from disasters rather than correcting after the problem has festered; and provides programs to "help families help themselves" as much as possible. Diane has

been glad to be a part of the SFSA Team because it gives voice to the patrons, who historically have not been asked to have input into the programs and services designed for them.

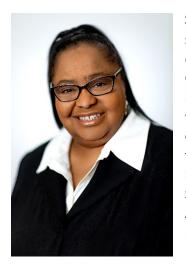


Artie McMillan has been a patron at CPLRC since 2014. She has been a part of the local community for 14 years and frequented the Cone Park Library before the Resource Center opened. Artie has dedicated her life to serving others and has compassion for people who have fallen on hard times and are experiencing homelessness. She knows what it's like to struggle and wants to help people in need. Artie also has an entrepreneurial spirit and has managed her own restaurant, daycare, and prayer ministry in the past. Her dream would be to work on a Tiny House community that could serve as a one-stop center for people experiencing homelessness, offering practical help to stabilize them. She lives with her son and her two grandchildren that she has legal custody of through Partnership for Strong Families. In 2014, she began seeking regular services at CPLRC when the children came to live with her. Artie loves the care and compassion that is displayed at CPLRC and says, "you

can feel the good energy". She joined the SFSA Team because she trusted Erica's advice that she would be a good fit and because she wants to make a difference and have her voice heard, "not as a victim but as the victor".



**Erica Reed** has been the Resource Center Manager of the CPLRC since 2016. She has been in this community her entire life and many of her family members live in the community. Erica graduated from the University of Florida with a B.S. degree in Family, Youth and Community Sciences with minors in nonprofit organization, leadership, and human services. In addition to her education, she has experience working as a Guardian Ad-Litem, a case manager for high-risk cases and in licensing foster homes. Erica has been married for 23 years and lives at home with her husband, two boys and two girls. She has a genuine compassion for people and loves the CPLRC because it gives her the opportunity to help individuals and families in need. Erica is pleased with the SFSA Team process because it brought together a team with a common goal of wanting to make things better and because she wasn't alone in the process.



**Stephanie Seawright** has been a member of the Gainesville community since 1987 and has been working with the CPLRC since 2017. She helped developed the local A. Quinn Jones Museum and Cultural Center in Gainesville and works with her church and sorority to be of service to mankind. With a lifetime of experience serving others, Stephanie chooses to collaborate with CPLRC because she loves that the staff are helpful and care about the community they serve. As the Chief Operations Officer of the Central Florida Community Action Agency, she works to bring services like the "Fight for your Money" class to patrons of the Resource Center. Stephanie chooses to be a part of the Strengthening Family's Self-Assessment team because she is impressed with the work that the Resource Center does and wants to be a part of its success in any way.

Although not formally members of the CPLRC SFSA Team, Robin Perry (Lead Evaluator) and Christen Lancaster (Community Research Coordinator for the CP Library Resource Center) attended each of the CP SFSA Team meetings. They, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended the majority of the meetings served as key supports for team processes. Robin Perry provided initial training and overview of the Center for the Study of Social Policy's SFSA Tool for Community-Based Programs and associated processes for review of findings and development of an action plan and recommendations by the team. Robin Perry was the lead facilitator of select group meetings; summarizing findings generated from the self-assessment tool/survey, asking questions, and clarifying team members' views as they discussed survey results with the goal of moving toward a consensus of perspective related to select survey questions and recommended action items for the CP Library Resource Center. Christen Lancaster is the Community Research Coordinator for the CPLRC and a principal on-site contact for team members. Ms. Lancaster maintained regular contact with team members and distributed meeting materials; aided with facilitation of group processes, and (along with Robin Perry) took detailed notes of comments and discussion items. Toni Spoliansky served as an information support and assisted in answering any questions individual team members had about the funded project and the role, function, and support of Partnership for Strong Families for the CPLRC. It is important to note that the role of the above three individuals was seen as supportive in nature. An empowerment perspective was adopted, as a team they would decide the meeting schedule and facilitation process with all members assuming equal status as knowledge experts with respect to community needs and the role, value, functioning, and responsiveness of the CPLRC to community need related to supporting families through the promotion of knowledge of parenting and child development. There was no effort by those in supportive roles to censure conversation and discussion points, as feedback was regularly sought regarding facilitation processes and preferences of group members for these processes. All notes were converted into minutes that were distributed to team members for their review, edits, and approval. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (the team decided on monthly two-hour meetings) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings (which would then be discussed with all team members at the next in-person or virtual meeting).

# Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Knowledge of Parenting and Child Development

The following represents a summary of key findings and recommendations by the team for questions and items associated with promoting knowledge of parenting and child development. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the SFSA Tool for Community-Based Programs—Knowledge of Parenting and Child Development Results; distributed to all team members as a starting point for discussion and brainstorming activities. For the purposes of the summary, findings are presented in accordance with the broader questions select items/sets of questions the tool was structured to answer. Each summary is followed by an itemization of select discussion points and any identified action items for which there was consensus among team members.

The following scores were associated with each rating of each item response, where Strongly Agree=5, Agree=4, Neither Agree nor Disagree=3, Disagree=2, Strongly Disagree=1. The weighted average score for each item reflects the average score across all team members, excluding any Not Applicable responses. There were no SFSA tool items for which the majority of team members thought were not applicable. The Team Scores (weighted average) cells are color coded by where green represents team consensus of Strongly Agree and Agree, yellow represents scores in the Neither Agree nor Disagree range, and red represents a level of Disagreement (either Disagree or Strongly Disagree). The team had an opportunity to discuss all item responses and brainstorm potential action items generating from open discussion of CPLRC's strengths and potential areas of improvement. Details regarding key discussion points can be found in meeting minutes for each team meeting. These minutes would be utilized in future team meetings and by CPLRC staff members when implementation tasks are itemized for each action item.

It is important to note, that although discussion and findings summarized in this report are informative and provide insights with respect to how CPLRC is responsive to the parenting and child development knowledge needs of patrons/parents, no specific action items were generated specific to any specific self-assessment item or collection of items associated with this specific factor. There was only one action item that was established following the discussion of SFSA findings associated with three protective factors (Concrete Supports, Knowledge of Parenting and Child Development, and Social and Emotional Competence of Children):

**Action Item #1:** Explore the possibilities of enhancing/expanding staff and space resources so that CPLRC can ensure a maximization of potential service and support benefits linked to protective factors.

# How Does Cone Park Library Resource Center Model Developmentally Appropriate Interactions with Children? (Items 3.1.1 through 3.4.7)

Table 1 (see below) provides a detailed summary of the individual items/questions associated with a measure of how the CP Library Resource Center models developmentally appropriate interactions with children. There is a consensus of agreement (reaching an average threshold score of 4.0 or higher) with

8 of the 14 items/indicators that CP Library Resource Center models developmentally appropriate interactions with children, with 6 within the Neither Agree nor Disagree range.

The team agreed that age and developmentally appropriate responses are modelled in interactions with children at the CPLRC and CPL. Ms. George (a Community Ambassador)—who has been working with Ms. Reed (CPLRC Manager) since 2016—reports she has always been impressed with Ms. Reed's interactions with the children. Ms. Diane Johnson, the Cone Park Branch Library Manager, was also praised as being "very good" in her efforts to engage and work with children that come into the Cone Park Library and may display a variety of behavioral traits, issues, and needs. Ms. Johnson credits her collaboration with Partnership for Strong Families staff over the years with learning developmentally appropriate responses to children's behavior. She continues build upon that training and learn from the modeling of Ms. Reed in planning services and resolving instances of negative behavior in children. Here, professional background, practice experience, collaboration/peer learning, and continuing education/training of key staff and administrators have been sources of support in enhancing the likelihood of developmentally appropriate interactions with children.

The SFSA team agreed that age and developmentally appropriate responses are modelled in interactions with children at the CPLRC and CPL...professional background, practice experience, collaboration/peer learning, and continuing education/training of key staff and administrators have been sources of support in enhancing the likelihood of developmentally appropriate interactions with children

There was consensus agreement (with an average weighted score among respondents above 4) among CPLRC SFSA Team members that staff model developmentally appropriate interactions with children by:

- 3.1.1 Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.
- 3.1.2 Staff understand and can explain the development arc for young children.
- 3.1.3 Staff can explain to parents how various activities and interactions support their child's development.

There was one item where there was no consensus agreement, but rather, a score suggesting a consensus Neither Agree nor Disagree ratings:

3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.

When the team was asked about item 3.1.4 many were unaware of what trainings were provided to staff. Though staff are trained in Mental Health First<sup>2</sup> Aid USA and other evidence-based trainings it is not standard practice to post this information in the RC where space and time are focused on providing resources to community members. Ms. Reed shares that she also continues to learn from her providers on how to best assist children at different stages of development and functioning.

Consensus Neither Agree nor Disagree ratings are identified both items affiliated with 3.2 (see Table 1) that explore the level and type of staff collaboration with parents to coordinate support for children's development:

- 3.2.1 Staff develop an ongoing partnership with parents to ensure regular communication, common understanding of the child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage.
- 3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development.

CPLRC staff are trained regarding (and are aware of) needs among children with developmental delays/disabilities and reportedly work in a supportive and collaborative manner with parents to best address these needs

These ratings may have been impacted by varied levels of knowledge that select members had regarding select interactions between staff and parents. With respect to Item 3.2.2, the majority of team members (n=5 of 7, see Appendix C) rated this item as Neither Agree nor Disagree. CPLRC does not directly engage in developmental screening of children but may collaborate with partners to provide these supports and services. However, staff are training regarding (and are aware of) these needs among children and reportedly work in a supportive and collaborative manner with parents to best address these needs, especially within the context of existing services and supports offered at CPLRC and CPL. For example, an ongoing partnership with parents resulted in accommodations for a child who is on the Autism Spectrum to attend and have a favorable experience at a CPLRC Summer Camp for children. Autism Spectrum Disorder is a developmental disability that can cause significant social, communication and behavioral challenges. For the summer camp to be developmentally appropriate for the child and his peers, a plan was put into place between CPLRC, CPL and CDS Family & Behavioral Health Services<sup>3</sup> staff

<sup>3</sup> CDS Family & Behavioral Health Services, Inc. (as noted in their website) is "a private 501(c)(3) non-profit social services agency that has provided services in North Central Florida for over 51 years. CDS's has different programs and serves a wide variety of community needs, all of our programs fall under the umbrella of the organization's mission statement, "Strengthening Communities by Building Strong Families." [They] target familial strength

<sup>&</sup>lt;sup>2</sup> For more information regarding Mental Health First Aid trainings please see: https://www.mentalhealthfirstaid.org/ These trainings are an initiative of the National Council for Mental Wellbeing (see: https://www.thenationalcouncil.org/ for more information). Staff at CPLRC have access to all professional development trainings offered or contracted by the Partnership for Strong Families. For a list of existing training provided by the Partnership, please see: https://www.pfsf.org/training/professional-development/

(who organized and directed the summer camp). All children were invited to engage in all activities though this child could move around and disengage when things became overwhelming for him. These accommodations resulted from the development of a trusting relationship between staff and parents, and a willingness of caring staff to listen to parents and be responsive to an individual child's needs while promoting inclusive group activities. In this way the programming for the developmentally average children was not deprived by this child's accommodations.

There was a strong consensus score of agreement rating that (3.3) physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.

The Community Ambassadors praised Ms. Reed for her commitment and manner by which she engages and deals with children at the RC; it was noted "she's always been good with kids" and engages with children generally in a "...gentle, calm, peaceful, reinforcing" manner.

There was consensus agreement (with an average weighted score among respondents above 4) among CPLRC SFSA Team members that when staff talk with parents about discipline, they:

- 3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.
- 3.4.3 Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.
- 3.4.4 Encourage parents to discuss behavior challenges they may have at home.
- 3.4.5 Connect parents to other parents who can share or model positive parenting approaches.

There were three items where there was no consensus agreement but rather, a score suggesting a consensus rating of Neither Agree nor Disagree ratings:

- 3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.
- 3.4.6 Recognize different parental and cultural approaches to discipline and discuss them with parents.
- 3.4.7 Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.

The team did not engage in an expanded discussion nor recommend any action item related to above three items.

through prevention, counseling, and youth shelters." For more information regarding this collaborative partner, see: https://www.cdsfl.org/. Partnership for Strong Families Network of Resource Centers has been partnering with CDS Family & Behavioral Health Services since the opening of their first Resource Center, the Library Partnership, in 2010.

Table 1: How Does Cone Park Library Resource Center Model Developmentally	Team Score
Appropriate Interactions with Children?	(Weighted Average)
3.1 Staff demonstrate a strong understanding of child development:	
3.1.1 Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.	4.00
3.1.2 Staff understand and can explain the development arc for young children.	4.00
3.1.3 Staff can explain to parents how various activities and interactions support their child's development.	4.00
3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	3.86
3.2 Staff work collaboratively with parents to coordinate support for children's	
development:	
3.2.1 Staff develop an ongoing partnership with parents to ensure regular communication, common understanding of the child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage.	3.57
3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development.	3.43
3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.	4.57
3.4 When staff talk with parents about discipline, they:	
3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.	4.00
3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.	3.86
3.4.3 Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.	4.29
3.4.4 Encourage parents to discuss behavior challenges they may have at home.	4.00
3.4.5 Connect parents to other parents who can share or model positive parenting approaches.	4.00
3.4.6 Recognize different parental and cultural approaches to discipline and discuss them with parents.	3.86
3.4.7 Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.	3.57

# How Does Cone Park Library Resource Center Provide Information and Resources on Parenting and Child Development? (Items 3.5 through 3.13)

Findings in Table 2 highlight a team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 11 of the 30 items/indicators that CP Library Resource Center provides information and resources on parenting and child development, with 19 within the Neither Agree nor Disagree range.

The team agreed that parenting education classes are offered in a way that reflects best practices in the field, including:

3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent child activities and/or as "homework" assignments between classes.

- 3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.
- 3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.

There was not consensus agreement among team members in relation to parenting classes for the following items:

- 3.5 Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.
- 3.6 Parenting education classes are offered in a way that reflects best practices in the field, including:
  - 3.6.1 Parents go through a series of classes as a group with other forms of contact between classes to maintain their engagement.
  - 3.6.2 Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.
  - 3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).
  - 3.6.5 Classes and programs are delivered by staff with appropriate training and credentials for the program.
  - 3.6.7 Childcare is offered while parents are in classes.
  - 3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.

Though the CPLRC has had mothering and parenting classes in the past, Ms. Reed reports they have been difficult to maintain over time due to erratic/inconsistent funding, low patron engagement, and presenter/provider interest who have their own minimum participation requirements.

Subsequently, direct support is provided to parents on an individual or case-by-case basis. Much of the information and resources provided to parents regarding parenting and child development occurs in private forums. In general, if parents require additional supports for parenting and child development issues (for example, if there are situations regarding developmental and/or social and emotional needs), Ms. Reed works with parent or caregivers individually to determine the needs and makes a referral or connects the patron to a collaborative partner. She notes (and Community Ambassadors strongly agree) that she maintains contact with the family following a referral or connection, following up with them, and provides additional resources/supports (e.g., concrete supports, etc.) to the family "...while the other agency handles the crisis" (that CPLRC is not equipped to assist with). Ms. Reed has been seen stopping in the middle of an event to pull someone aside and check on their wellbeing or the outcome of a referral.

Sometimes the needs of parents (related to parenting and child development knowledge) are identified within the context of informal interactions or the provision of other supports and services. For example, observations may be made while a child is in the library, or a parent is in the middle of a different task

such as faxing some papers. Both managers shared that they try to observe the patrons and make referrals based on needs they see. They keep an eye out for patrons who seem distraught, disheveled, or are crying. A patron/parent may have come into the CPLRC for Clothing Closet or another service, but they are often asked open ended informal questions like "how are you doing?" and "how are you managing with the kids?". These questions can lead to a deeper understanding of the client's unique situation and allow for more targeted referrals. Ms. Reed highlighted that she wants to make sure that every patron of the CPLRC is in the hands of professionals who can support them.

They [staff] keep an eye out for patrons who seem distraught, disheveled, or are crying. A patron/parent may have come into the CPLRC for Clothing Closet or another service, but they are often asked open ended informal questions like "how are you doing?" and "how are you managing with the kids?". These questions can lead to a deeper understanding of the client's unique situation and allow for more targeted referrals.

There was a score suggesting a consensus Neither Agree nor Disagree ratings for:

- 3.7 Information is provided to parents on stages of child development and what to expect of their children at each stage.
- 3.8 Parenting information and materials used by the program are culturally and linguistically appropriate, and:
  - 3.8.1 Are available in the language spoken by program families.
  - 3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.
  - 3.8.3 Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.

When a parent is in need, experiencing some type of barrier or is in a crisis, Ms. Johnson says that Ms. Reed "turns into Mary Poppins" with a variety of specific resources relevant to that patron. Again, these resources are provided privately, sometimes over days of individual assistance. "Sometimes it's a walk with them, holding their hand through the process" Ms. Reed denotes. When patrons begin to trust her and the CPLRC, she asks that they come in for help before situations arise to the level of a crisis. As time has passed, more people trust her and come in sooner, but she reportedly still has approximately five new patrons "in crisis" each month who each get this individual, targeted assistance.

Table 2: How Does Cone Park Library Resource Center Provide Information and Resources on Parenting and Child Development?						
3.5 Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.	3.20					
3.6 Parenting education classes are offered in a way that reflects best practices in the field, including	ng:					
3.6.1 Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.	3.67					
3.6.2 Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.	3.67					
3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.	4.00					
3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).	3.67					
3.6.5 Classes and programs are delivered by staff with appropriate training and credentials for the program.	3.57					
3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.	4.38					
3.6.7 Child care is offered while parents are in classes.	3.57					
3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.	4.14					
3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.	3.43					
3.7 Information is provided to parents on stages of child development and what to expect of their children at each stage.	3.43					
3.8 Parenting information and materials used by the program are culturally and linguistically						
appropriate, and:						
3.8.1 Are available in the language spoken by program families.	3.13					
3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.	3.86					
3.8.3 Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.	3.71					

There was consensus agreement among the SFSA Team that parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:

- 3.9.1 Books and videos in a resource library.
- 3.9.4 Regular postings on bulletin boards in public spaces.
- 3.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.

There was no consensus that parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:

- 3.9.2 Parenting classes.
- 3.9.3 Support groups.

3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.

Though the CPLRC maintains a large assortment of easily assessable flyers and contacts with family resources, most supports, and referrals are provided on an individual level in direct response to a specific need. For example, during the SFSA Team process, a pregnant woman came into the center seeking help, as she did not have access to medical care. She sat down with Ms. Reed and discussed her situation. Ms. Reed connected her with the Health Department for medical care at Healthy Families for home visits and case management. Healthy Families specializes in assisting new mothers and can provide better care for this patron than she could get at the CPLRC alone. Ms. Reed follows up with patrons/parents connected to other resources and supports and reported (for the above case) that the patron benefited from the supports received and "... was looking strong, vibrant, and confident."

There was also no consensus agreement among the SFSA Team that:

- 3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:
  - 3.10.1 Parent education groups (including fatherhood groups).
  - 3.10.2 Counseling.
  - 3.10.3 Support groups.
  - 3.10.4 Mentors/coaches.
  - 3.10.5 Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.

Ms. Reed indicated that she works hard to build relationships with resource providers to reduce the "cobwebs" of red tape that people need to work through, saving them hours of frustration. The team agreed that services are provided in a respectful, strength-based manner. Ms. Reed is on a "first name basis" with providers who support for a variety of issues including (but not limited to): shelter needs, domestic/interpersonal violence (Peaceful Paths)<sup>4</sup>, behavioral/mental health services (e.g., Meridian Behavioral Healthcare<sup>5</sup>), academics, etc.

<sup>&</sup>lt;sup>4</sup> Peaceful Paths (as denoted on their website) is the "...certified domestic violence center that serves survivors of domestic violence in Alachua, Bradford, and Union counties. Peaceful Paths provides a wide range of services

domestic violence in Alachua, Bradford, and Union counties. Peaceful Paths provides a wide range of services including emergency shelter, 24-hour helpline, victim advocacy, children's programming, economic empowerment education and support, crisis counseling and support groups, community awareness and intervention, and violence prevention programs." For more information regarding this collaborative partner, see: <a href="https://www.peacefulpaths.org/">https://www.peacefulpaths.org/</a>. Partnership for Strong Families Network of Resource Centers has been partnering with Peaceful Paths since the opening of their first Resource Center, the Library Partnership, in 2010. 

Meridian Behavioral Healthcare is a private, non-profit organization with roots in the community mental health movement, which began in the 1960s, to "...bring education about mental illnesses and substance use disorders and treatment of those affected to the local level." For more information regarding this collaborative partner, please see: <a href="https://www.mbhci.org/about/">https://www.mbhci.org/about/</a>. Partnership for Strong Families Network of Resource Centers has been partnering with Meridian Behavioral Healthcare since the opening of their first Resource Center, the Library Partnership, in 2010.

Ms. Reed...works hard to build relationships with resource providers to reduce the "cobwebs" of red tape that people need to work through, saving them hours of frustration... services are provided in a respectful, strength-based manner

Ms. Seawright, the Chief Operations Officer at the Central Florida Community Action Agency highlighted that CPLRC does a better job of connecting people to resources and following up than any of the other agencies she works with. Ms. Reed's attention to finding patrons that would benefit from the supports and services of the Central Florida Community Action Agency has contributed to a meaningful collaborative relationship. Ms. Seawright writes proposals for grants that highlight a specific commitment to work with the CPLRC, citing Ms. Reed's "...follow-up and dedication" to patrons and families as a primary reason.

There was consensus agreement for the remaining items of Table 2. These include:

- 3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:
  - Different parenting styles of mothers and fathers and the strengths of each
  - Needs and concerns of first time parents
  - Needs of parents who are parenting a child with a disability
  - Noncustodial parents
  - Nontraditional caregivers (e.g., grandparents, foster parents)
- 3.12 Staff provide "just in time" parenting tips and discuss parenting issues with parents when:
  - 3.12.1 Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).
  - 3.12.2 A parent appears to be frustrated or stressed and in need of support.
  - 3.12.3 A parent appears to be having difficulty relating to or communicating with their child.
- 3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:
  - Prenatal and infant health and development
  - The birth process and what to expect
  - The needs of postnatal women and their families
  - The developing role of first-time parents (including adolescent parents, if appropriate)
  - Planning for the child's needs after birth (e.g., car seats, cribs).

The Community Ambassadors highlighted an appreciation for CPLRC's email notifications where they receive the calendar of events and learn about the parental resources available to them through a variety of services.

Table 2 (Continued): How Does Cone Park Library Resource Center Provide Information and Resources on Parenting and Child Development?	Team Score (Weighted Average)			
3.9 Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:				
3.9.1 Books and videos in a resource library.	4.13			
3.9.2 Parenting classes.	3.86			
3.9.3 Support groups.	3.76			
3.9.4 Regular postings on bulletin boards in public spaces.	4.50			
3.9.5 Opportunities for parents with similar concerns to come together and share spe cific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.	3.83			
3.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.	4.00			
3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:				
3.10.1 Parent education groups (including fatherhood groups).	3.75			
3.10.2 Counseling.	3.75			
3.10.3 Support groups.	3.75			
3.10.4 Mentors/coaches.	3.38			
3.10.5 Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the	3.86			
community.  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  •Different parenting styles of mothers and fathers and the strengths of each •Needs and concerns of first time parents •Needs of parents who are parenting a child with a disability •Noncustodial parents •Nontraditional caregivers (e.g., grandparents, foster parents)				
3.12 Staff provide "just in time" parenting tips and discuss parenting issues with parents when:				
3.12.1 Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).	4.17			
3.12.2 A parent appears to be frustrated or stressed and in need of support.	4.29			
3.12.3 A parent appears to be having difficulty relating to or communicating with their child.	4.00			
3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:  • Perenatal and infant health and development  • The birth process and what to expect  • The needs of postnatal women and their families  • The developing role of first time parents (including adolescent parents, if appropriate)  • Planning for the child's needs after birth (e.g., car seats, cribs).	4.00			

## How Does Cone Park Library Resource Center Encourage Parents to Observe, Ask Questions, Explore Parenting Issues and Try Out New Strategies? (Items 3.14.1 through 3.15.7)

Findings in Table 3 highlight a Team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 10 of the 14 items/indicators the CP Library Resource Center encourages parents to observe, ask questions, explore parenting issues and try out new strategies, with 4 within the Neither Agree nor Disagree range.

The Team agreed that Parents and staff work together to design and organize opportunities for parent led discussions (such as a Community Café or Parent Café series) to explore:

- 3.14.3 Parent/child relationships.
- 3.14.5 Being especially supportive at the time that special needs are initially identified.
- 3.14.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.
- 3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.

There was not consensus for the same question on:

- 3.14.1 Cultural/ethnic expectations and practices about parenting.
- 3.14.2 Different parenting practices.
- 3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).

When parents are assisted individually, they may be in a crisis or struggling with interpersonal stress within their family. Advice, referrals, and encouragement are given, in a non-judgmental way, regardless of the situation. Ms. Johnson, it was reported by another team member, "breathes a sigh of relief that she does not have to refer them outside of this building and hope they make it there". For many patrons, trust needs to be built up with CPLRC first before feeling comfortable enough to ask questions and explore new strategies to solve their problems and open about their struggles. As patrons begin to trust the CPLRC, Ms. Reed asks that they come in before things get critical.

Advice, referrals, and encouragement are given, in a non-judgmental way, regardless of the situation.

The team came to an agreement consensus that staff recognize and support the parenting challenges experienced by families with children who have special needs by:

- 3.15.1 Regularly checking in with parents about parenting issues.
- 3.15.2 Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.

- 3.15.3 Supporting parents in understanding appropriate developmental expectations for their children with special needs.
- 3.15.5 Being especially supportive at the time that special needs are initially identified.
- 3.15.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.
- 3.15.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.

For the same question there was only one point within the consensus of neither agree nor disagree:

3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.

Table 3: How Does Cone Park Library Resource Center Encourage Parents to Observe, Ask Questions, Explore Parenting Issues and Try Out New Strategies?	Team Score (Weighted Average)
3.14 Parents and staff work together to design and organize opportunities for parent led	
discussions (such as a Community Café or Parent Café series) to explore:	
3.14.1 Cultural/ethnic expectations and practices about parenting.	3.58
3.14.2 Different parenting practices.	3.57
3.14.3 Parent/child relationships.	4.00
3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).	3.86
3.14.5 Being especially supportive at the time that special needs are initially identified.	4.00
3.14.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	4.00
3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	4.14
3.15 Staff recognize and support the parenting challenges experienced by families with children	
who have special needs by:	
3.15.1 Regularly checking in with parents about parenting issues.	4.13
3.15.2 Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.	4.38
3.15.3 Supporting parents in understanding appropriate developmental expectations for their children with special needs.	4.38
3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.	3.75
3.15.5 Being especially supportive at the time that special needs are initially identified.	4.13
3.15.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	4.38
3.15.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	4.13

How Does Cone Park Library Resource Center Address Parenting Issues from a Strength-Based Perspective? (Items 3.16.1 through 3.18.4)

Findings in Table 4 highlight a Team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 6 of the 12 items/indicators the CP Library Resource Center

address parenting issues from a strength-based prospective, with 6 within the Neither Agree nor Disagree range.

Much of the strengths-based perspective in working with patrons comes in the form of listening to the needs of the patron and providing encouragement to them. As an example, it was noted that one parent came to Ms. Reed with her concerns about some trouble her son was getting into. Ms. Reed was able to sit down and privately discuss the situation with the mother and help her write a letter that had to be faxed and notarized while at the CPLRC. Ms. Reed was able to support and encourage her through the process.

Much of the strengths-based perspective in working with patrons comes in the form of listening to the needs of the patron and providing encouragement to them.

Fathers reportedly have come in asking for help with food stamps or getting a phone and are guided through the process of gaining these supports. Many times, working with parents involves a process of encouragement and reinforcement to not give up. Some patrons reportedly come with a perspective that "I'll just deal with it" [hardship and stress] and need to be encouraged that they deserve food and assistance as well and are assured (through staff action and statements) that such is done without stigma.

The team agreed that home visitors share their observations of children with parents to help the parents recognize:

3.16.6 Signals that development may not be on track.

The team neither agreed nor disagreed that home visitors share their observations of children with parents to help the parents recognize:

- 3.16.1 Their children's unique assets, temperament, personality, communication styles and behavioral cues.
- 3.16.2 Their children's growth and development patterns.
- 3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.
- 3.16.4 Their children's independence and abilities.
- 3.16.5 Activities families can use to enhance their children's skills and development.

The team agreed that staff reinforce positive parent-child interactions by:

3.17.2 Sharing something positive with parents about their children's behavior and development.

However, they neither agreed nor disagreed that staff reinforce positive parent-child interactions by:

3.17.1 Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.

Ms. Reed frequently makes a point to check in with the lives of the CPLRC patrons. Ms. Reed has been seen stopping in the middle of an event to pull someone aside and check on their wellbeing or the outcome of a referral. The Community Ambassadors strongly agreed and have seen and experienced these follow-ups being made.

There was consensus agreement for all items that staff proactively and respectfully address concerns about parenting techniques or behavior by:

- 3.18.1 Asking open-ended questions to understand the behavior from the parent's perspective.
- 3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.
- 3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.
- 3.18.4 Connecting parents to resources and supports that may help to address parenting issues.

Table 4: How Does Cone Park Library Resource Center Address Parenting Issues From a Strength-Based Perspective?						
3.16 Home visitors share their observations of children with parents to help the parents recognize	:					
3.16.1 Their children's unique assets, temperament, personality, communication styles and behavioral cues.	3.71					
3.16.2 Their children's growth and development patterns.	3.71					
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.	3.80					
3.16.4 Their children's independence and abilities.	3.71					
3.16.5 Activities families can use to enhance their children's skills and development.	3.71					
3.16.6 Signals that development may not be on track.	4.00					
3.17 Staff reinforce positive parent-child interactions by:						
3.17.1 Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.	3.75					
3.17.2 Sharing something positive with parents about their children's behavior and development.	4.00					
3.18 Staff proactively and respectfully address concerns about parenting techniques or behavior by:						
3.18.1 Asking open-ended questions to understand the behavior from the parent's perspective.	4.25					
3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.	4.00					
3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.	4.00					
3.18.4 Connecting parents to resources and supports that may help to address parenting issues.	4.38					

## Fidelity of Knowledge of Parenting and Child Development Services and Supports to CSSP Protective Factor

As denoted earlier, the SFSA Team identified the weighted average team score as the consensus measure for each item associated with the Knowledge of Parenting and Child Development assessment questions. Following the development of a consensus rating, individual item scores were converted —in keeping with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014)<sup>6</sup> method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree or Disagree, and Not Applicable. Within the tables denoted in this report, any green shaded cells (Agree and Strongly Agree) reflect a score of 1 and any yellow (Neither Agree or Disagree), red (Disagree and Strongly Disagree), or no shade (Not Applicable) reflects a score of 0 (zero). As observed, there were no red or no shade cells in each table. These scores were summed for the Knowledge of Parenting and Child Development Protective Factor where scores <50% of the total score possible represent low fidelity, 50-74% represent moderate fidelity, and >75% possible scores represent high fidelity. The aggregate fidelity score from all tabled findings is 35 (of a possible score of 70) or 50%, suggesting that the services and supports associated with the Knowledge of Parenting and Child Development were implemented with moderate fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework. As suggested earlier in the report, there are several select itemized services and supports highlighted in the SFSA Tool (see items associated with 3.6, 3.9, and 3.10) that the CPLRC does not directly provide. However, CPLRC may use or refer parents/patrons to collaborative partners for more individualized support for parenting and child development needs. Although staff are attentive and responsive to these protective factor needs for individual parents and families, select demands by patrons/parents and resources needs of the CPLRC limit the feasibility and applicability of integrating several of the listed services and supports (especially those that are group-based). These contextual factors adversely impact the fidelity score using the a priori scoring criteria.

<sup>&</sup>lt;sup>6</sup> Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

Tarr, J., Harnar, M. A., & Ahsan, N. (2014). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Unpublished whitepaper presented at the National Association for the Education of Young Children's annual conference in Dallas, TX.

## Appendix A

### STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR COMMUNITY-BASED PROGRAMS



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### ABOUT THE SELF-ASSESSMENT

The Program Self-Assessment helps programs determine how well they are implementing strategies to strengthen families. The Self-Assessment is based on findings from a national study that identified exemplary programs across the country. It allows all programs to compare their practices with those of the exemplary programs and identify areas for improvement. The Self-Assessment outlines how the protective factors can be supported through small but significant changes in program practice. It is written for programs committed to working with and supporting the families they serve. Versions of the Self-Assessment are available for:

- · Center-based early care and education programs
- · Family child care settings
- Home visiting programs
- Community-based programs such as family resource centers

While there is significant overlap across these different versions, each also contains unique strategies specific to each setting.

The Program Self-Assessment materials in this document are applicable to community-based programs serving children and families. The concrete actions described in the self-assessment can be carried out in a variety of settings such as family support and parenting education programs, health care settings, community centers and others. The strategies described can be implemented without creating new staff positions, making significant changes to existing facilities or raising additional financial resources.

#### **ORGANIZATION**

The Self-Assessment outlines practices used by exemplary programs to support families, organized around five protective factors:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- · Concrete Support in Times of Need
- Social and Emotional Competence of Children

Each section starts with a brief description of the protective factor and core strategies for building that protective factor. Self-Assessment items are organized under each of these core strategies. In this version of the Self-Assessment there

is also a special section about <u>Responding to Possible Child</u> <u>Abuse or Neglect</u>.

#### **COMPLETING THE SELF-ASSESSMENT**

While the Self-Assessment forms may appear long at first glance, most sections have fewer than ten items. To make the process easier, the forms address specific practices; thus, multiple practice examples often appear under a single strategy. While the time it takes to complete the Self-Assessment will vary from program to program and from form to form, on average, each form can be completed in approximately 90 minutes.

CSSP strongly recommends that programs create a Self-Assessment team that represents a number of different perspectives at your program, including:

- Administrative staff and/or program director
- · Direct service staff
- Parents who participate in the program (or whose children participate in the program)

Including a diverse group of participants in the Self-Assessment evaluation process allows programs to benefit from a large variety of viewpoints and perspectives. Once a team has been identified, the process begins by following the steps outlined below.

First, each member of the team should fill out the Self-Assessment forms individually.

Next, the team should convene to share and compare assessments. Teams should use this time to discuss rating results that differ among various team members, giving each person an opportunity to describe why they rated the practice the way they did and—if appropriate—to provide an example. Once everyone has had a chance to speak, all team members should be given an opportunity to re-rate the practice. It is not necessary for the entire team to come to consensus on every practice, but it is important that all team members come to understand each other's perspectives and that a final decision is made on how to rate the item based on broad input.

The consensus version of the Self-Assessment can be entered online at <a href="www.mosaic-network.com/gemslive/cssp/">www.mosaic-network.com/gemslive/cssp/</a>. Completing the Self-Assessment online allows the program to print reports showing strengths and areas to focus on improvement, as well as to link to parent and staff surveys.



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CREATING AN ACTION PLAN**

Once all team members have re-rated the practices, the team should identify areas where the program scored highly. Next, the team should create a sustainability plan to keep these areas strong. In developing a sustainability plan for each successful area, teams should be sure to specify:

- · Key reasons for success in the area
- What needs to be done to ensure continued strength in the area
- Who will be responsible for maintaining successful outcomes in the area

Next, the team should highlight practice areas that a majority of the team rated poorly. While we encourage programs to work on each of these areas eventually, the team can begin by deciding whether each poorly rated practice should be addressed (1) immediately, (2) over time, or (3) not at all. Again, teams should allow time for discussion and

reevaluation if/when team members disagree on practice ratings. When a majority of team members identify items that should be addressed immediately, teams should brainstorm plans to improve associated area outcomes. Teams should be sure to specify:

- The expected results
- All required resources (including staff hour costs)
- · A timeline for achieving the desired results
- · Who is responsible for each action step
- Check-in points for monitoring implementation progress
- How and when longer term action steps will be addressed/implemented

#### PARENTAL RESILIENCE

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

visits are unexpected.

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		45.	Strongly agi	Wifes 3.	Meither age	ge not disaftee	jee Stangh di	sages Comments
	d affirm the central role of parents in their teraction with families including policies, ication.							
1.2 The program has multiple avenues for regular communication with families.	1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.							
	1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.							
	1.2.3 Staff regularly ask parents about their observations of their child.							
1.3 All family members are made to feel welcome:	1.3.1 Someone is available to greet families when they come in.							
	1.3.2 Staff are respectful even when family							



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?  5: Strongly ages 3: Weither ages until stages 4: Strongly ages 3: Weither ages until stages 4: Strongly ages 3: Weither ages until stages 4: Strongly ages 4: Strongly ages 5: Strongly ages 5: Strongly ages 7: Weither ages until stages 8: Strongly ages 9: Weither ages until stages 1: Strongly ages 9: Weither ages until stages 1: Strongly ages 1: Stro											
		49.	, K	'5	'''		, A	Comments			
1.4 Staff develop mutually respectful relationships with all family members by:	1.4.1 Taking time to get to know family members individually, by name.										
an failing members by:	1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.										
	1.4.3 Regularly inquiring about what is happening in their lives.										
	1.4.4 Providing emotional support and encouragement.										
	1.4.5 Sharing appropriate information about themselves.										
	1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.										
	1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.										
	1.4.8 Using intake forms, applications and surveys that are gender-neutral.										



PARENTAL RESILIENCE: SELF How do programs demonstra		45	Strongly agget	es 3: Heiner	gee Indiscote	es strongly disagn	ce Comments
1.5 Staff show that they value fathers and are sensitive to their unique needs by:	1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.						
neeus by:	1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.						
	1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.						
	1.5.4 Providing peer activities or services that are man-to-man, father-to-father.						
	<b>1.5.5</b> Engaging male participants to greet other men at program activities.						
	<b>1.5.6</b> Establishing ongoing partnerships with community resources that provide services to fathers.						
	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.						
	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.						
	<b>1.5.9</b> Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.						



PARENTAL RESILIENCE: SELF-How do programs honor each culture, history and approach	ı family's race, language,	5; Stan	A. Here 3. N	teither agree Inchieses	gee Net Application of the Control o	
1.6 Program staff ensure that all families, regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.  1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.  1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.  1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.  1.6.5 The program displays diverse families and family structures in books, posters and program materials.					Comments
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.  1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.  1.7.3 Designed or selected to reflect the culture(s) of the community served.					



					Meither agri	or disagr	*/ */	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		Strongly ag	See /	, agr	e ne	Strongly die	a thicaite
How do programs demonstrat	e that parents are valued?	6	Strong!	Agree 3	Heither O.	Disagit.	Strong!	A Applie
		,,						Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	<b>1.8.1</b> Inviting partner organizations to provide workshops for staff on working with diverse families.							
ties to develop skills and knowledge to work effectively with diverse families. Staff development may include:	<b>1.8.2</b> Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.							
	1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.							
1.9 The program seeks to reflect the community and families it serves by:	<b>1.9.1</b> Building a staff that reflects the community and families served.							
rammes it serves by.	<b>1.9.2</b> Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.							
	1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.							
	1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program's community is mono-lingual, mono-ethnic or mono-cultural.							
1.10 The program supports participating immigrant and refugee families by:	1.10.1 Ensuring that staff are knowledge- able about immigrant and refugee families' unique challenges and can help address them in a respectful manner.							
	1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.							



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS  parents to manage stress effectively?	8.	Hilligh agige	Bee 3: Hei	2.Di	har disagree	Hot Hot	gree haricalite	
								Comment	s
proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, militar other family crises Changes or fluctuations in a challenging behavior, fearfu	ences ed appointments y deployment, family dissolution, job loss or a child's emotional state, acting out, distress, il behavior, inappropriate language/behavior signs of abuse or neglect (such as bruises) or								
1.12 The program provides regular opportunities for parents to relieve stress	1.12.1 Linking parents to organized support groups.								
through:	1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.								
	1.12.3 Organizing spa days, exercise classes or other parent-only social activities.								
	1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.								
	1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.								



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	5; Strut	N. Hee	Meither 2gr	dieaglee	stangy dist	Lage Comments
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:	1.13.1 Understanding the impact of family crises and/or loss on all family members— especially children—and how to respond appropriately.						
	1.13.2 Supporting families' immediate and long-term plans.						
	1.13.3 Talking to families about difficult issues and helping them access additional help.						
	1.13.4 Maintaining confidentiality.						
	1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.						
	1.13.6 Understanding trauma and its impact on children and how staff can help.						
	1.13.7 Other community agencies providing specialized services to families and children.						



PARENTAL RESILIENCE: SELF- How do programs support par build decision-making and le	rents as decision-makers and help	્રિક ક	Strongly at	ikules 3:	Meither 25's	disagles	strongly dis	adde the comments
1.14 Staff receive program support when working with families under stress through:	<b>1.14.1</b> Acknowledgement and support for their efforts from supervisors and administrators.							
	<b>1.14.2</b> Opportunities to process their own emotional reactions with appropriate support.							
	1.14.3 Access to a mental health consultant.							
	1.14.4 Time off if needed.							

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs support pa build decision-making and le	rents as decision-makers and help	45	Strongly as	White 3.	Meither agre	disagles 1:	z trongly dis	a street catte  Comments
1.15 Staff reinforce parental authority by:	1.15.1 Respecting parents' directions and/ or decisions about their children.							
	1.15.2 Learning about parents' expectations and limits for their children.							
	1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.							
	1.15.4 Understanding the parenting and child behavior norms of the parent's culture.							
	1.15.5 Being careful not to contradict a parent in front of his or her child or other children.							



					,		,	, , ,
	rents as decision-makers and help	/	itingh agi	88	Meither agr	ee nordisali	Strongly dis	gage e
build decision-making and le	adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Still A:	Values 3.	Mer 2	Dist 1.	Still	AR
								Comments
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							
	<b>1.16.2</b> Parents are informed about the confidentiality policy and what it means to them.							
	<b>1.16.3</b> Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.							
	1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.							
	1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.							
	<b>1.16.6</b> All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.							
	1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
1.17 Parents and staff develop family plans together that:	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.							
	<b>1.17.2</b> Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.							
	1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.							
	1.17.4 Are updated regularly.							



					, ,	,	, ,	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS			, , ,	Weither 325	e nordisagi	88	agles .
		5	Strongly age	Agiee 3:	Weither age	disagree 1.	Strongly die	L. Andricate
and career goals by:  and career goals goa							Comments	
1.18 The program supports a parent's personal education and career goals by:	and career resources (e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting							
	educational resources, including higher education institutions, to support families'							
	resources for internships, volunteer and leadership activities and other experiences that expand parents' knowledge and skills							
	community volunteers to share their educa-							
	parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent							
1.19 The program provides opportunities and support for families to serve as leaders								
and decision-makers by:	parents in becoming active members of the program's governing/advisory groups and in							
	<b>1.19.4</b> Asking families for input into staff hiring and training.							
	1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).							



					,	,	,	, , ,
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		di	*	, are	disagles 1.	8º /	and the state of t
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Strongly agi	Majee 3:	Meither as	disaglee	Strongly dis	A Philicipe
								Comments
<b>1.20</b> The program promotes participation in activities by:	<b>1.20.1</b> Addressing topics, issues and skills that families identify as important to them.							
	<b>1.20.2</b> Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).							
	<b>1.20.3</b> Providing child care during trainings or workshops.							
	1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.							
1.21 The program helps to support the continued development of parent leaders by supporting:	<b>1.21.1</b> Personal growth—such as attending conferences or special events and collecting and sharing information of interest to other parents.							
	1.21.2 Leadership development trainings and mentoring activities.							
	<b>1.21.3</b> Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).							
1.22 The program helps to support parents' opportunities for leadership in community change by:	<b>1.22.1</b> Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.							
comments change by	1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.							
	1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.							
	<b>1.22.4</b> Connecting parents to groups that inform and shape policy at the local, state or national level.							



How do programs help parents understand how to buffer their child during stressful times?

lisatie	/
attee attend a lisagee one	/
5: Stringth agges 3: Meither agges not lie agges 1: Stringth his agges 3: Meither agges 1: Stringth his agges 1	
Comm	16

				Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.				
<ul> <li>1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including:</li> <li>How stress impacts the child's brain, behavior and development</li> <li>Recognizing the signs of stress in children</li> <li>How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly</li> <li>The important role that parents and caring adults play in buffering children during stressful times</li> </ul>				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.				



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **SOCIAL CONNECTIONS**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- · Help families value, build, sustain and use social connections
- · Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

#### 3. Neither agree fur his agree 1. Strongly disagree 5: Stringly agree SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS Not Applicable How do programs help families value, build, sustain and use A: Agree social connections? Comments 2.1 Families have access to a comfortable space where they can meet informally **2.2** The program provides 2.2.1 Formally, through parent support groups (including those with both broad and opportunities for families with similar interests, chilnarrow focuses). dren's ages and/or circumstances (such as those with 2.2.2 Through parent mentoring and twins, parents of infants, matching for one-on-one support. parents with special-needs children or parents who 2.2.3 Informally, by introducing parents to speak the same language) to one another. connect with one another:



				,	, ,	,	, ,
SOCIAL CONNECTIONS: SELF- How do programs help famili- use social connections?		\s.	Hillight affect	3. Neither 285	e nat disable e	ng Angli	alle
							Comments
2.3 The program provides opportunities for families to socialize and foster a sense	2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.						
of community by organizing/ hosting:	2.3.2 Periodic events like coffee breaks and breakfasts.						
	2.3.3 Celebrations, graduations and holidays.						
	2.3.4 Field trips and community events.						
	<b>2.3.5</b> Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.						
	2.3.6 Affordable family activities.						
	<b>2.3.7</b> Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.						
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.						
	ositive relationships between families and nal social events where staff can interact with						
	ects families to resources to strengthen ., healthy marriage skills, communication skills,						



					/ /		
SOCIAL CONNECTIONS: SELF- How do programs help famili use social connections?		\s.	A: Agre	e 3: Weither 2	7. headee	s Strangy disagn	e k
							Comments
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:	<b>2.6.1</b> Calling, sending notes or making home visits inviting them to program activities.						
ipate iii program activities by.	<b>2.6.2</b> Connecting with them on social media platforms through program pages or groups.						
	<b>2.6.3</b> Offering support with transportation, child care or other barriers to participation.						
	<b>2.6.4</b> Making special efforts to connect them with other families who share similar interests.						
	2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.						
	2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.						
	v isolation or reluctance to participate can due to differences in race, language, culture, ntation, ability, etc.						



						nor disagi	, & /	, , , , , , , , , , , , , , , , , , ,
SOCIAL CONNECTIONS: SELF- How do programs create an i		ر ن	Strongly at	gee 3:	Meither 25:	disaglee	Strongly dis	r kulicule
					1			Comments
<b>2.8</b> The program and its staff model positive social skills and	2.8.1 Welcoming all families.							
community building by:	<b>2.8.2</b> Inviting all families to program parties or social events.							
2.8 The program and its staff model positive social skills and community building by:  2.9 The program helps staff learn how to reduce	<b>2.8.3</b> Encouraging newcomers and reluctant families to participate through special outreach efforts.							
	2.8.4 Helping to resolve conflicts among participants.							
	2.8.5 Promoting families' understandings of different cultures and backgrounds.							
	<b>2.8.6</b> Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.							
<b>2.9</b> The program helps staff learn how to reduce stareotyping and hiss by:	<b>2.9.1</b> Modeling inclusive behavior among the staff.							
stereotyping and bias by:	2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).							
	2.9.3 Providing training and support for helping families and children resolve conflicts effectively.							
	<b>2.9.4</b> Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).							
	2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.							
	<b>2.9.6</b> Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.							
	o reach out and engage other families, includ- d members, in the program community.							



	Parent-organized educational events and es are encouraged and ted by:  2.13.1 Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun far or libraries).  2.13.2 Providing supports such as gathering space, childcare and food so the parents can organize and participate in activities together.  Administrators and staff seek opportunities to build good relations within mediate neighborhood or local community (e.g., inviting neighbors to ouses, using neighborhood resources for special projects, building relaps with local schools).  The program encourages staff and families to participate together in unity improvement or advocacy projects.  Staff are visibly engaged with issues of concern to the community and a vinvolved with other community organizations.  The program provides and receives support from the local community nancial support, donated services, volunteer service, tangible gifts,					,	,	
		\rightarrow \( \frac{\rightarrow}{\rightarrow} \)	Strongly agree	Se Si	Heither agre	isaglee	es Strongly dis	agies Anticalis
								Comments
(e.g., phone trees, car pools, bab	ysitting co-ops, play groups, social media							
2.11 The program encourages processes (e.g., phone trees, car pools, bat groups or pages where parents of the control of the c	gram activities for parents to network and							
	activities for parents to attend together (for example, gathering at playgrounds, fun fairs							
	gathering space, childcare and food so that parents can organize and participate in							
the immediate neighborhood or lo open houses, using neighborhood	ocal community (e.g., inviting neighbors to							
social/educational events and activities are encouraged and supported by:  activities are encouraged and supported by:  activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).  2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.  2.14 Administrators and staff seek opportunities to build good relations within the immediate neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood resources for special projects, building rela-								

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase. Programs can help parents increase their knowledge of parenting and child development. Programs should:

- · Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

#### 3. Neither agree for libraries 1. Strongly lie agree KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: 5. Strongly agree Not Applicable **SELF-ASSESSMENT ITEMS** A. Agree How do programs model developmentally appropriate interactions with children? **Comments** 3.1 Staff demonstrate a 3.1.1 Staff model developmentally strong understanding of child appropriate responses to children's behavior, development: interests, temperaments and need for exploration and learning. 3.1.2 Staff understand and can explain the development arc for young children. 3.1.3 Staff can explain to parents how various activities and interactions support their child's development. **3.1.4** Staff participate in regular training that updates their knowledge on advances in understanding child development. 3.2 Staff work collaboratively **3.2.1** Staff develop an ongoing partnership with parents to coordinate with parents to ensure regular communication, common understanding of the support for children's development: child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage. 3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development. 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		\$.	Strongly as	Jee Sinding	Meither agre	disagles 1.	ee Strongly dis	sage to the sage of the sage o	
								Comments	
<b>3.4</b> When staff talk with parents about discipline, they:	<b>3.4.1</b> Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.								
	<b>3.4.2</b> Provide information on ageappropriate positive discipline techniques and reasonable expectations.								
	<b>3.4.3</b> Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.								
	<b>3.4.4</b> Encourage parents to discuss behavior challenges they may have at home.								
	<b>3.4.5</b> Connect parents to other parents who can share or model positive parenting approaches.								
	<b>3.4.6</b> Recognize different parental and cultural approaches to discipline and discuss them with parents.								
	<b>3.4.7</b> Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.								



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A	5: Strucky ages 3: Neither ages that it strucky dischere hat Annicalie									
How do programs provide information and resources on parenting and child development?		89.	Strongly A:	Agree 3:	Meither 2:	disagles 1: Strongly		at Applicable		
								Comments		
<b>3.5</b> Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.										
<b>3.6</b> Parenting education classes are offered in a way that reflects best practices in the field, including:	<b>3.6.1</b> Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.									
	<b>3.6.2</b> Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.									
	<b>3.6.3</b> Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.									
	<b>3.6.4</b> Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).									
	<b>3.6.5</b> Classes and programs are delivered by staff with appropriate training and credentials for the program.									
	<b>3.6.6</b> Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.									
	<b>3.6.7</b> Child care is offered while parents are in classes.									
	<b>3.6.8</b> Transportation, food or other supports are provided as appropriate to enable parents to participate.									
	<b>3.6.9</b> If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.									
<b>3.7</b> Information is provided to parents on stages of child development and what to expect of their children at each stage.										



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs provide information and resources on parenting and child development?			5; Strong A; before 3; beither agree the list of the hort price of the strong of the s							
								Comme	nts	
<b>3.8</b> Parenting information and materials used by the program are culturally and linguistically appropriate, and:	<b>3.8.1</b> Are available in the language spoken by program families.									
	<b>3.8.2</b> Reflect a diversity of racial and ethnic backgrounds and family structures.									
	<b>3.8.3</b> Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.									
3.9 Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:	<b>3.9.1</b> Books and videos in a resource library.									
	3.9.2 Parenting classes.									
	3.9.3 Support groups.									
	<b>3.9.4</b> Regular postings on bulletin boards in public spaces.									
	3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.									
	<b>3.9.6</b> Posting of information and links on a program website and/or social media pages accessed by participants.									
3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:	<b>3.10.1</b> Parent education groups (including fatherhood groups).									
	3.10.2 Counseling.									
	3.10.3 Support groups.									
	3.10.4 Mentors/coaches.									
	<b>3.10.5</b> Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.									



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

• Planning for the child's needs after birth (e.g, car seats, cribs).

SELF-ASSESSMENT ITEMS How do programs provide inf	programs provide information and resources nting and child development?  Contains and child development?  Distribution and child development issues with  Distribution and child development issues with		A Applicable				
						Comments	
to the needs of parents in differe  Different parenting styles of  Needs and concerns of first  Needs of parents who are parents  Noncustodial parents	ent circumstances. For example: mothers and fathers and the strengths of each time parents arenting a child with a disability						
<b>3.12</b> Staff provide "just in time" parenting tips and discuss parenting issues with parents when:	issues arise (e.g., potty training, changes in eating or sleeping patterns, separation						
	difficulty relating to or communicating with						
the program provides opportunit  Prenatal and infant health at  The birth process and what  The needs of postnatal wom	ies for parents to learn about: nd development to expect						



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

					,	, ,	, ,	, ,
KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS How do programs encourage explore parenting issues and	65-	Strongly agr	Agree 3:	Heither 25te	jisagiee 1.	Strong Wilson		
								Comments
<b>3.14</b> Parents and staff work together to design and organize opportunities for parent	<b>3.14.1</b> Cultural/ethnic expectations and practices about parenting.							
led discussions (such as a Community Café or Parent	<b>3.14.2</b> Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	<b>3.14.4</b> How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	<b>3.14.5</b> Being especially supportive at the time that special needs are initially identified.							
	<b>3.14.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.							
	<b>3.14.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.							



# KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

6	Strongly as	ies vi	Weither age	e nor disagree	strongly dis	agies Applicab		/
						(	Commen	its

					Comments
<b>3.15</b> Staff recognize and support the parenting challenges experienced by	<b>3.15.1</b> Regularly checking in with parents about parenting issues.				
families with children who have special needs by:	<b>3.15.2</b> Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.				
	<b>3.15.3</b> Supporting parents in understanding appropriate developmental expectations for their children with special needs.				
	<b>3.15.4</b> Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.				
	<b>3.15.5</b> Being especially supportive at the time that special needs are initially identified.				
	<b>3.15.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.				
	<b>3.15.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.				



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

NOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: ELF-ASSESSMENT ITEMS low do programs address parenting issues from a trength-based perspective?			A; Age	s 3: Weither 2	7: headles 1: e	strongly disco	Ege <sup>®</sup>	
		/ '3 /	<u> </u>	-5/			Comment	•
<b>3.16</b> Home visitors share their observations of children with parents to help the parents recognize:	<b>3.16.1</b> Their children's unique assets, temperament, personality, communication styles and behavioral cues.						Comment	.5
parents recognize.	<b>3.16.2</b> Their children's growth and development patterns.							
	<b>3.16.3</b> Their children's positive social skills and developmentally appropriate emotional behavior.							
	<b>3.16.4</b> Their children's independence and abilities.							
	<b>3.16.5</b> Activities families can use to enhance their children's skills and development.							
	<b>3.16.6</b> Signals that development may not be on track.							
<b>3.17</b> Staff reinforce positive parent-child interactions by:	<b>3.17.1</b> Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.							
	<b>3.17.2</b> Sharing something positive with parents about their children's behavior and development.							
<b>3.18</b> Staff proactively and respectfully address concerns about parenting techniques or behavior by	<b>3.18.1</b> Asking open-ended questions to understand the behavior from the parent's perspective.							
behavior by:	<b>3.18.2</b> Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.							
	<b>3.18.3</b> Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.							
	<b>3.18.4</b> Connecting parents to resources and supports that may help to address parenting issues.							



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CONCRETE SUPPORT IN TIMES OF NEED**

All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- · Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

#### 3. Neither agree furt lisagues 1. Strongly liesque Not Applicable **CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS** A: Agree How do programs respond immediately when families are in crisis? **Comments** 4.1 Parents are encouraged 4.1.1 The fact that staff listen, show conto turn to staff in the event of a cern and share their own personal challengcrisis through: es as appropriate in informal conversations and regular interactions. 4.1.2 Materials regularly provided to participating families. **4.1.3** Information on which staff members can help families with particular issues.



					,	,	,	, , ,
					Meither 22:	or disagr	* /	
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		24	88	agre	enu	die	agie
How do programs respond im are in crisis?	mediately when families	6.	Strongly age	Agree 3:	Weither as	disagree 1:	Strongly die	L. Andicate
								Comments
<b>4.2</b> Staff proactively respond to signs of parent or family distress by:	<b>4.2.1</b> Expressing concern and offering help in line with the program's philosophy and resources.							
	<b>4.2.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.2.3</b> Making space available for staff to meet with parents privately.							
	<b>4.2.4</b> Ensuring that parents can talk with staff members with whom they are the most comfortable.							
	<b>4.2.5</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.2.6</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).							
<b>4.3</b> When a family is experiencing extreme difficulties or crisis:	<b>4.3.1</b> At least one staff member with a close relationship with the family reaches out to the family proactively.							
	<b>4.3.2</b> If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.							
	<b>4.3.3</b> The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.							
	<b>4.3.4</b> The program has flexible hours of operation to accommodate families outside of regular business hours.							
	<b>4.3.5</b> If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.							
	<b>4.3.6</b> Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.							



						,	,	, , ,
CONCRETE SUPPORTS: SELF- How do programs provide inf services in the community?		ું. જ	A: A: A	agies 3.N	Reither age	jisagiee 1:	strongly die	age e
								Comments
<b>4.4</b> Staff proactively respond to signs of parent or family distress by:	<b>4.4.1</b> Expressing concern and offering help.							
distress by.	<b>4.4.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.4.3</b> Making themselves and/or other designated home visitors available to parents if parents need to talk.							
	<b>4.4.4</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.4.5</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).							
	<b>4.4.6</b> Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.							
	share information about community resources s, play lots, family activities), as well as more							
	e services dults and children)							



CONCRETE SUPPORTS: SELF-How do programs provide interesting services in the community?	-ASSESSMENT ITEMS formation and connections to	is; st	Milly affect	5. Weither affect of the state	es 1: Strong High High	a Comments
<b>4.6</b> The program actively builds collaborative links with other service providers by:	<ul><li>4.6.1 Bringing services on site, when possible.</li><li>4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.</li></ul>					
	<b>4.6.3</b> Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.					
	<b>4.6.4</b> Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.					
	<b>4.6.5</b> Using input from participating parents to identify and advocate to fill gaps in the services available to families.					



							,	, , ,
CONCRETE SUPPORTS: SELF-			34	88	Meither 22's	e not disagi	ee die	effe, We
identify their needs and conn	es to develop skills they need to ect to supports?	8	Strongly age	Agree 3	Meither 2:	disagles 1:	Strongly die	L. Applicable
								Comments
<b>4.7</b> Staff help parents to identify and mobilize their own resources to address their families' needs by:	<b>4.7.1</b> Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.							
	<b>4.7.2</b> Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.							
	<b>4.7.3</b> Encouraging parents to advocate for themselves and their child.							
	<b>4.7.4</b> Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.							
	<b>4.7.5</b> Connecting parents to peer-to-peer navigation support.							
<b>4.8</b> When staff make referrals to outside services, they support family leadership by.	<b>4.8.1</b> Brainstorming with families about what resources would be helpful.							
portioning loadest inp est	<b>4.8.2</b> Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.							
	<b>4.8.3</b> Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).							
	<b>4.8.4</b> Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).							
	<b>4.8.5</b> Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.							
	<b>4.8.6</b> Making a personal connection between families and service providers (if families have agreed to share information through written consent).							

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. Programs should:

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: **SELF-ASSESSMENT ITEMS**

SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs help parent emotional development?		45	Strongly agi	Person 3:	Meither age	e nut disagn	Strongly dis	Aggree Comments
<b>5.1</b> The program introduces family members to social and emotional development by:	<b>5.1.1</b> Providing parents with information on the importance of supporting children's healthy social and emotional development—and its connection to success in school and life.							
	<b>5.1.2</b> Helping parents understand ageappropriate social and emotional skills and behaviors.							
	<b>5.1.3</b> Providing opportunities to discuss social and emotional issues within a racial and cultural context.							
	<b>5.1.4</b> Offering parents ideas on how to foster a child's social and emotional learning at home.							
	<b>5.1.5</b> Asking about parents' observations of their child's social and emotional development.							
parents and their children (e.g.,	pportunities to strengthen bonds between parent-child playgroups, playing together in ve, cooking, making an art project together).							
	edge and expertise about their children's as they share information about social and							



SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs model nurt	6	SHORE A SHORE	itee ?	. Heither age	disagles	es stoney disas	Let	
<b>5.4</b> Staff nurture children and model nurturing for parents	<b>5.4.1</b> Responding consistently to children in a warm, supportive manner.							
by:	<b>5.4.2</b> Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.							
	<b>5.4.3</b> Showing warmth through appropriate physical contact.							
	<b>5.4.4</b> Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).							
	<b>5.4.5</b> Responding sympathetically to help children who are upset, hurt or angry.							
	<b>5.4.6</b> Encouraging children to express their feelings through words, artwork and expressive play.							
	<b>5.4.7</b> Modeling empathy and appropriate emotional responsiveness.							



						,	, , ,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		285	,	agree	nd disagles	lieste alle
How do programs model nurt	uring care to children?	45.	Strongly agr	Agree 3:	Aeither 2: D	sagree 1: Strong!	Aut thicage
							Comments
<b>5.5</b> Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	<b>5.5.1</b> Fostering children's social and emotional development in the context of their culture and language.						
social emotional development, including:	<b>5.5.2</b> Recognizing behavioral/emotional problems or developmental delays.						
	<b>5.5.3</b> Understanding the impact of loss or trauma on children and how to respond appropriately.						
	<b>5.5.4</b> Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.						
	<b>5.5.5</b> Understanding gender differences in child rearing and its impact on social and emotional development.						
	<b>5.5.6</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.7</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.8</b> Understanding how mental health and wellness affects family relationships and the developmental process of young children.						
	<b>5.5.9</b> Recognizing and responding to the impact of child or parental trauma on parent-child relationships.						
<b>5.6</b> Families are invited to obser and/or staff in the program.	ve their children interacting with other children						



					, ,	. ,	,	, , ,
SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs include chi development activities in prog	Idren's social and emotional	45	Standy all	Per 3.	Meither agree	ing disagre	strongly dis	ages and a second
								Comments
<b>5.7</b> The program supports children's social and emotional development with intentional practices that include:	<b>5.7.1</b> Encouraging children to express their feelings in ways that are the most comfortable for them.							
practices that illicitude.	<b>5.7.2</b> Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.							
	<b>5.7.3</b> Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).							
	<b>5.7.4</b> Setting clear expectations and limits for behavior.							
	<b>5.7.5</b> Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).							
<b>5.8</b> Mental health consultants assist staff in integrating social emotional development into everyday work by:	<b>5.8.1</b> Providing coaching on how to support social and emotional learning for all children.							
overyddy work by.	<b>5.8.2</b> Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.							



				, ,	, ,	, ,	,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS			A. Agee	aure	a puritables	Aicagles Andricale	
identity and learn to interact	en develop a positive cultural in a diverse society?	cy.	dingly A: Aglee	Weither	disagle strong	Applit /	
	•	5	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	<b>%`/ %</b>	/ % /	Comments	
<b>5.9</b> The program welcomes and affirms the cultures of families it serves by:	<b>5.9.1</b> Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					Comments	
	<b>5.9.2</b> Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.						
	<b>5.9.3</b> Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.						
<b>5.10</b> Staff receive training on how cultural differences affect social and emotional development, especially	<b>5.10.1</b> How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.						
differences in:	<b>5.10.2</b> The extent to which nonverbal communication is predominant across cultures.						
	<b>5.10.3</b> Diverse cultural views success and appropriate child development.						
<b>5.11</b> Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languag-	<b>5.11.1</b> Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.						
es and cultural expressions through:	<b>5.11.2</b> Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.						
	<b>5.11.3</b> Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.						
	tices support the preservation of home lan- ne languages and dialects of the children and						
	th consultant offers consultation that is ting behaviors and child behaviors that stem						
<b>5.14</b> Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.						



SOCIAL AND EMOTIONAL COI SELF-ASSESSMENT ITEMS How do programs respond premotional development need	roactively when social or	/ 4.	. Strongly ag	, kules	Heither age	isagee.	strongly dif	Salte E. Comments	
<b>5.15</b> When staff are concerned about a child's social and emotional development, they respond by:	<b>5.15.1</b> Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.								
	<b>5.15.2</b> Arranging for appropriate screenings and assessments.								
	<b>5.15.3</b> Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).								
	<b>5.15.4</b> Helping parents develop strategies for addressing the issue at home.								
<b>5.16</b> Staff have access to a mental health consultant to help them:	<b>5.16.1</b> Identify and receive additional resources and/or training to work effectively with individual children and parents.								
	<b>5.16.2</b> Talk respectfully with parents about the child's development, needs or challenges.								

#### STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES

One responsibility of all child- and family-serving programs is to respond to possible child abuse and neglect when it is observed. Staff are mandatory reporters of child abuse and neglect in most states and should receive training every year on the state requirements on reporting. However, long before a report needs to be made, staff can also respond positively and supportively to early signs that have the potential to lead to maltreatment. The following items reflect best practices for programs in working effectively with child welfare officials.

HOW DO PROGRAMS RESPON OR NEGLECT?	D TO POSSIBLE CHILD ABUSE	/43	Strongly ag	Pares 3.	Weither all	e nordiesal	ee Strongly dis	saties Comments
<b>6.1</b> When children enter the program, staff discuss child abuse and neglect prevention	<b>6.1.1</b> The program's policies and practices that are designed to keep children safe from harm.							Comments
with all parents and caretak- ers. This discussion includes explanations of:	<b>6.1.2</b> Staff members' responsibility as mandatory child abuse and neglect reporters.							
	<b>6.1.3</b> How the state defines child abuse and neglect.							
	<b>6.1.4</b> The program's protocols regarding child abuse and neglect reports.							
<b>6.2</b> All staff members are trained abuse reporting laws.	d according to their state's mandatory child							
<b>6.3</b> Staff receive additional training on child abuse and neglect including:	<b>6.3.1</b> Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.							
	<b>6.3.2</b> Following the program's protocols for reporting child abuse and neglect.							
	<b>6.3.3</b> Understanding how cases are generally handled by the child protective services agency once a report is made.							
	<b>6.3.4</b> The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.							
	<b>6.3.5</b> Recognizing cultural practices that can trigger reporting of child abuse and neglect (e.g., the practice of coining to treat fevers, the use of corporal punishment for toilet training, leaving a young sibling in the care of an older sibling under the age of ten) and respectfully discussing ways that parents can prevent the likelihood of mandatory reporting.							

# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?

, sage et	
5. Strongt agge 3. Heiter agge in disagge 1. Strongt disagge and Applicable	
5. Strongt ages 3. Heiter ages rot to 1. Strongt lisages after 5. Disages Strongt lisages	
5. Strong, W. Wies 3. Weither 5. Disage, 1. Strong, W. William	

					Comments
<b>6.4</b> The program's protocols for reporting possible child abuse and neglect:	<b>6.4.1</b> Are consistent with state child welfare reporting guidelines.				
	<b>6.4.2</b> Are reviewed annually or anytime changes are made to state guidelines.				
<b>6.5</b> Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the	<b>6.5.1</b> Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.				
child welfare agency and to families that include:	<b>6.5.2</b> Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.				
	<b>6.5.3</b> Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.				
	<b>6.5.4</b> Striving to be calm, caring and supportive of the family during the reporting process.				
	<b>6.5.5</b> Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.				
	<b>6.5.6</b> Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.				
<b>6.6</b> If a child is placed into child welfare custody, staff are trained to continue to support	<b>6.6.1</b> Maintaining contact with the child and family, if possible.				
the child and the family by:	<b>6.6.2</b> Advocating for the family with the Child Protective Services system, when possible.				
	<b>6.6.3</b> Helping parents connect with resources to help reunite them with their child.				



## HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

						/		, , ,	,
IOW DO PROGRAMS RESPON OR NEGLECT?	ND TO POSSIBLE CHILD ABUSE	/«	5. Strongly 2	gges x. Agges	3. Weither of	glee landie	A. Strongly di	sale e sa	
								Comments	
<b>6.7</b> Program staff seek to collaborate with child welfare caseworkers and Child	<b>6.7.1</b> Helping to maintain stability for children involved in the system.								
Protective Services staff to promote the child's ongoing healthy development by:	<b>6.7.2</b> Engaging in co-case management practices, if possible.								
	<b>6.7.3</b> Conducting joint home visits.								
	<b>6.7.4</b> Attending Child Protective Services meetings to share information.								

# Appendix B



#### **Knowledge of Parenting and Child Development-Self Assessment Items**

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase.

Programs can help parents increase their knowledge of parenting and child development. Programs should:

- Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Knowledge of Parenting and Child Development. You will be asked to identify (on a 5-point scale) your level of agreement with a series of statements associated with questions related to promoting knowledge of parenting and child development. A Not Applicable (N/A) option is also provided. If desired, a comments text box is provided for each question should you wish to provide additional thoughts, reflections, and/or clarifications regarding your response.

This tool/survey was developed by the Center for the Study of Social Policy as part of their Strengthening Families Protective Factors Framework initiative.

Thank you for participating in this process. Your feedback and participation as a Team member is important.

Wha	t best describes your role/perspective as a Team Member?
	Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community
	Administrative Staff and/or Program Director
	Direct Service Staff and/or Volunteer
	Community Collaborator/Partner that Works with Resource Center



How do programs model developmentally appropriate interactions with children?

3.1	Staff demonstrate a	strong	understanding	of	child	develo	pment:

3.1.1 Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.  Comments  3.1.2 Staff understand and can explain the development arc for young children.  Comments  3.1.3 Staff can explain to parents how various activities and interactions support their child's development.  Comments  3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.  Comments		Strongly agree	agree nor disagree	Disagree	Strongly disagree	
3.1.2 Staff understand and can explain the development arc for young children.  Comments  3.1.3 Staff can explain to parents how various activities and interactions support their child's development.  Comments  3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.		$\circ$				
Comments  3.1.3 Staff can explain to parents how various activities and interactions support their child's development.  Comments  3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	Comments					
3.1.3 Staff can explain to parents how various activities and interactions support their child's development.  Comments  3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	3.1.2 Staff understand and can explain the development arc for young children.	0	0	0		
their child's development.  Comments  3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	Comments					
3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.						
advances in understanding child development.	Comments					
Comments		0	0		0	0
	Comments					

	Strongly		Neither agree nor		Strongly	
3.2.1 Staff develop an ongoing partnership with parents to ensure regular	agree	Agree	disagree	Disagree	disagree	N/A
communication, common understanding of the child's development and coordinated action to provide each child with the appropriate experiences for heir developmental stage.						
Comments						
3.2.2 Staff and parents together use appropriate assessment tools to screen for levelopmental concerns and monitor development.	$\bigcirc$					
Comments						
Not applicable  Comment						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.1 Explain why physical discipline is not allowed in the program, even though is may be different from the family's approach to discipline.						
omments						
4.2 Provide information on age-appropriate positive discipline techniques and assonable expectations.		$\circ$		0	0	C
omments						
4.3 Offer ideas for alternate ways to manage children's behavior and to cognize and reinforce desired/appropriate behavior.		0	0	0	0	С
omments						
4.4 Encourage parents to discuss behavior challenges they may have at ome.  omments			0	0	0	С
4.5 Connect parents to other parents who can share or model positive arenting approaches.  omments						C
JIIIII EIIIS						
4.6 Recognize different parental and cultural approaches to discipline and scuss them with parents.	$\bigcirc$	$\bigcirc$	$\circ$	$\circ$	$\bigcirc$	С
omments						
4.7 Make arrangements to have appropriate language and cultural interpreters support difficult conversations with families.		0	0	0	0	C



How do programs provide information and resources on parenting and child development?

Strongly agree Agree Neither agree nor disagree	Disag	ree	Stron	ngly disagr	ee	
Not applicable						
Comment						
6 Parenting education classes are offered in a way that refle	cts hes	t pra	ctices in	the fiel	d inclu	din
The conting of the continuous and continuous and continuous		r prac			,	<b></b>
			Neither agree			
	Strongly agree		nor disagree	Disagree	Strongly disagree	N/
6.1 Parents go through a series of classes as a group - with other forms of ontact between classes to maintain their engagement.						C
omments						
6.2 Course content is focused on parenting information and developmental formation for a particular age group or targeted population, such as children	$\bigcirc$	$\bigcirc$		$\bigcirc$		
omments						
ith special needs.						
omments  6.3 Parents have opportunities to try out new parenting techniques in the ontext of parent-child activities and/or as "homework" assignments between	0	0		0	0	
omments  6.3 Parents have opportunities to try out new parenting techniques in the	0	0	0	0	0	

comments	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
6.5 Classes and programs are delivered by staff with appropriate training and redentials for the program.	0	0	0	0	0	С
6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good ommunication skills with families.	0	0	0	0	0	C
6.7 Child care is offered while parents are in classes.	0	0	0	0	0	C
6.8 Transportation, food or other supports are provided as appropriate to nable parents to participate.		0	0	0		C
6.9 If implementing an evidence-based or proven program, the program is elivered with fidelity to the original course design and content.		0			0	C
3.7 Information is provided to parents on stages of child d	evelopn			t to expe		eir
<ul><li>children at each stage.</li><li>Strongly agree</li><li>Agree</li><li>Neither agree nor disagree</li><li>Not applicable</li></ul>	Disag	ree	Siroi	igiy dibagit		

Reflect a diversity of racial and ethnic backgrounds and family ctures.  Inments  B. Encourage parents to reflect on their own parenting history and re, rather than encouraging stereotypes.	.1 Are available in the language spoken by program families.  mments  .2 Reflect a diversity of racial and ethnic backgrounds and family uctures.  mments  .3 Encourage parents to reflect on their own parenting history and ture, rather than encouraging stereotypes.  mments
Reflect a diversity of racial and ethnic backgrounds and family ctures.  Imments  B. Encourage parents to reflect on their own parenting history and re, rather than encouraging stereotypes.	2.2 Reflect a diversity of racial and ethnic backgrounds and family actures.  mments  2.3 Encourage parents to reflect on their own parenting history and ture, rather than encouraging stereotypes.
B Encourage parents to reflect on their own parenting history and re, rather than encouraging stereotypes.	mments  3 Encourage parents to reflect on their own parenting history and ture, rather than encouraging stereotypes.
B Encourage parents to reflect on their own parenting history and re, rather than encouraging stereotypes.	3. Encourage parents to reflect on their own parenting history and ture, rather than encouraging stereotypes.
re, rather than encouraging stereotypes.	ture, rather than encouraging stereotypes.
aments  The control of the control o	mments

e N/.	Strongly disagree	Disagree	agree nor disagree		Strongly agree	
				$\bigcirc$		9.1 Books and videos in a resource library.
						Comments
$\subset$	$\bigcirc$		$\bigcirc$	$\bigcirc$	$\bigcirc$	9.9.2 Parenting classes.
						Comments
						9.9.3 Support groups.
						Comments
C	0	0		0	0	9.9.4 Regular postings on bulletin boards in public spaces.
C	0	0	0		0	2.9.5 Opportunities for parents with similar concerns to come together and hare specific information on such issues as accident prevention, toilet training, outine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.
		0	0	0		9.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.
						Comments

3.10.2 Counseling.  Comments  3.10.3 Support groups.  Comments  3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups epresented in the community.		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.10.3 Support groups.  Comments  3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups represented in the community.  Comments  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  • Different parenting styles of mothers and fathers and the strengths of each  • Needs and concerns of first time parents  • Needs of parents who are parenting a child with a disability  • Noncustodial parents  • Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	3.10.1 Parent education groups (including fatherhood groups).						C
3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups perpresented in the community.  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  • Different parenting styles of mothers and fathers and the strengths of each  • Needs and concerns of first time parents  • Needs of parents who are parenting a child with a disability  • Noncustodial parents  • Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Comments						
3.10.3 Support groups.  Comments  3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups represented in the community.  Comments  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  Different parenting styles of mothers and fathers and the strengths of each  Needs and concerns of first time parents  Needs of parents who are parenting a child with a disability  Noncustodial parents  Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree							
3.10.3 Support groups.  Comments  3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups prepresented in the community.  Comments  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  Different parenting styles of mothers and fathers and the strengths of each  Needs and concerns of first time parents  Needs of parents who are parenting a child with a disability  Noncustodial parents  Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	1.10.2 Counseling.		$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\subset$
3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups epresented in the community.  Comments  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  • Different parenting styles of mothers and fathers and the strengths of each  • Needs and concerns of first time parents  • Needs of parents who are parenting a child with a disability  • Noncustodial parents  • Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Comments						
3.10.4 Mentors/coaches.  Comments  3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups perpesented in the community.  Comments  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  Different parenting styles of mothers and fathers and the strengths of each  Needs and concerns of first time parents  Needs of parents who are parenting a child with a disability  Noncustodial parents  Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	3.10.3 Support groups.						$\subset$
<ul> <li>parents in different circumstances. For example:</li> <li>Different parenting styles of mothers and fathers and the strengths of each</li> <li>Needs and concerns of first time parents</li> <li>Needs of parents who are parenting a child with a disability</li> <li>Noncustodial parents</li> <li>Nontraditional caregivers (e.g., grandparents, foster parents)</li> <li>Strongly agree</li> <li>Agree</li> <li>Neither agree nor disagree</li> <li>Disagree</li> <li>Strongly disagree</li> </ul>	Comments						
3.10.5 Parenting groups and organizations that promote social inclusion and nost groups that correspond to different ethnic, cultural and linguistic groups epresented in the community.  3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  Different parenting styles of mothers and fathers and the strengths of each  Needs and concerns of first time parents  Needs of parents who are parenting a child with a disability  Noncustodial parents  Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	s.10.4 Mentors/coaches.	0	0	0	0	0	
3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  • Different parenting styles of mothers and fathers and the strengths of each  • Needs and concerns of first time parents  • Needs of parents who are parenting a child with a disability  • Noncustodial parents  • Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	Comments						
3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example:  • Different parenting styles of mothers and fathers and the strengths of each  • Needs and concerns of first time parents  • Needs of parents who are parenting a child with a disability  • Noncustodial parents  • Nontraditional caregivers (e.g., grandparents, foster parents)  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree	ost groups that correspond to different ethnic, cultural and linguistic groups epresented in the community.			0	0	0	
<ul> <li>parents in different circumstances. For example:</li> <li>Different parenting styles of mothers and fathers and the strengths of each</li> <li>Needs and concerns of first time parents</li> <li>Needs of parents who are parenting a child with a disability</li> <li>Noncustodial parents</li> <li>Nontraditional caregivers (e.g., grandparents, foster parents)</li> <li>Strongly agree</li> <li>Agree</li> <li>Neither agree nor disagree</li> <li>Disagree</li> <li>Strongly disagree</li> </ul>	Comments						
	<ul> <li>parents in different circumstances. For example:</li> <li>Different parenting styles of mothers and fathers and the stree</li> <li>Needs and concerns of first time parents</li> <li>Needs of parents who are parenting a child with a disability</li> <li>Noncustodial parents</li> </ul>	engths of		oonsive	to the n	eeds of	:
1 Not applicable		Disag	ree	Stror	igly disagr	ee	
Comment							

n eating or sleeping patterns, separation issues, aggressive behavior).  2.12.2 A parent appears to be frustrated or stressed and in need of support.  2.12.3 A parent appears to be having difficulty relating to or communicating with neir child.		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:  Prenatal and infant health and development  The birth process and what to expect  The needs of postnatal women and their families  The developing role of first time parents (including adolescent parents, if appropriate)  Planning for the child's needs after birth (e.g, car seats, cribs).  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	2.12.1 Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).					$\bigcirc$	C
<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent parents, if appropriate)</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree  Disagree  Strongly disagree</li> <li>Not applicable</li> </ul>	Comments						
3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:  Prenatal and infant health and development  The birth process and what to expect  The needs of postnatal women and their families  The developing role of first time parents (including adolescent parents, if appropriate)  Planning for the child's needs after birth (e.g, car seats, cribs).  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	.12.2 A parent appears to be frustrated or stressed and in need of support.				0		
3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:  • Prenatal and infant health and development  • The birth process and what to expect  • The needs of postnatal women and their families  • The developing role of first time parents (including adolescent parents, if appropriate)  • Planning for the child's needs after birth (e.g, car seats, cribs).  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	Comments						
<ul> <li>3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent parents, if appropriate)</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree  Disagree  Strongly disagree</li> <li>Not applicable</li> </ul>			0	0	0		C
<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent parents, if appropriate)</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree  Disagree  Strongly disagree</li> <li>Not applicable</li> </ul>	Comments						
<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent parents, if appropriate)</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree  Disagree  Strongly disagree</li> <li>Not applicable</li> </ul>							
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> </ul>					m provi	des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree</li> <li>Agree</li> <li>Neither agree nor disagree</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des
	<ul> <li>opportunities for parents to learn about:</li> <li>Prenatal and infant health and development</li> <li>The birth process and what to expect</li> <li>The needs of postnatal women and their families</li> <li>The developing role of first time parents (including adolescent</li> <li>Planning for the child's needs after birth (e.g, car seats, cribs).</li> <li>Strongly agree  Agree  Neither agree nor disagree</li> <li>Not applicable</li> </ul>	parents	, if apլ	oropriate	<u>)</u>		des



Cone Park Library-SFSA-Parenting and Child Development Knowledge
How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.14.1 Cultural/ethnic expectations and practices about parenting.						$\bigcirc$
Comments						
3.14.2 Different parenting practices.					0	
Comments						
3.14.3 Parent/child relationships.						C
Comments						
3.14.4 How to interact effectively with their children (e.g., listening; appreciating deas, efforts and feelings; creating a non-threatening environment).	0	0		0	0	C
Comments						
3.14.5 Being especially supportive at the time that special needs are initially dentified.  Comments			0		0	C
3.14.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	$\bigcirc$		$\bigcirc$			С
Comments						
3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.		$\bigcirc$		$\circ$		С
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
.15.1 Regularly checking in with parents about parenting issues.				$\bigcirc$		$\mathbb{C}$
comments						
.15.2 Being sensitive to parents' frustration, protectiveness, guilt, loss and ther related feelings, and acknowledging the challenges families may be experiencing.	0	0	0	0	0	C
comments						
.15.3 Supporting parents in understanding appropriate developmental expectations for their children with special needs.		0				C
comments						
.15.4 Checking in with parents about the impact their children's special needs have on family dynamics and parental stress.	0	0	0	0	0	C
.15.5 Being especially supportive at the time that special needs are initially lentified.	0		0	0	0	
Comments						
.15.6 Connecting parents with materials and websites, support groups, play roups and community resources specific to their children's special needs.						
comments						
.15.7 Ensuring that program parent-child activities are appropriate for families ith children with special needs.			0		0	
comments						



How do programs address parenting issues from a strength-based perspective?

# 3.16 Home visitors share their observations of children with parents to help the parents recognize:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.16.1 Their children's unique assets, temperament, personality, communication styles and behavioral cues.				$\bigcirc$		
Comments						
3.16.2 Their children's growth and development patterns.	$\bigcirc$	$\bigcirc$		$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.						
Comments						
3.16.4 Their children's independence and abilities.		$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
3.16.5 Activities families can use to enhance their children's skills and development.						
Comments						
3.16.6 Signals that development may not be on track.		$\bigcirc$			$\bigcirc$	
Comments						

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.17.1 Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.						C
Comments						
3.17.2 Sharing something positive with parents about their children's behavior and development.		0	0	0	0	C
18 Staff proactively and respectfully address concerns about 18.18.1 Asking open-ended questions to understand the behavior from the parent's perspective.	Strongly		Neither agree nor	Disagree	Strongly	
Comments						
					0	C
parents' efforts to deal with it effectively.	0	0				
Comments  3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.	0	0	0	0	0	
Comments  3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.	0	0	0	0	0	C
3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.  Comments  3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.  Comments  3.18.4 Connecting parents to resources and supports that may help to address parenting issues.  Comments		0			0	

# **Appendix C**

Cone Park Library Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs—

Knowledge of Parenting and Child Development Results

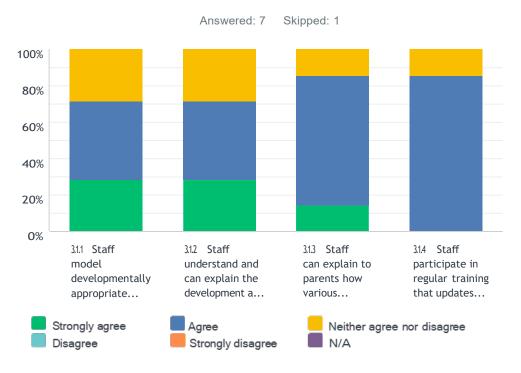
Updated/Revised (September 2021)

### Q1 What best describes your role/perspective as a Team Member?



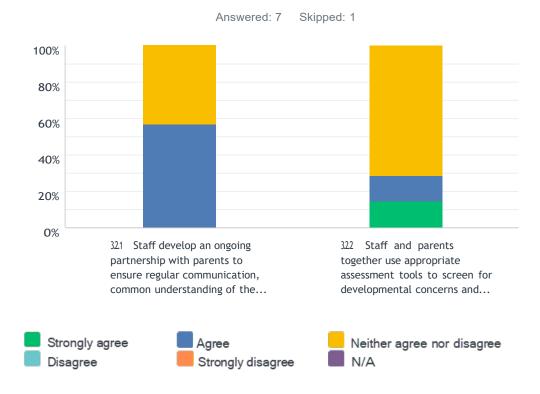
ANSWER CHOICES	RESPONS	SES
Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community	50.00%	4
Administrative Staff and/or Program Director	0.00%	0
Direct Service Staff and/or Volunteer	25.00%	2
Community Collaborator/Partner that Works with Resource Center	25.00%	2
TOTAL		8

### Q 3.1 Staff demonstrate a strong understanding of child development:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.1.1 Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.	28.57% 2	42.86%	28.57% 2	0.00%	0.00% 0	0.00%	7	4.00
3.1.2 Staff understand and can explain the development arc for young children.	28.57%	42.86%	28.57% 2	0.00%	0.00%	0.00%	7	4.00
3.1.3 Staff can explain to parents how various activities and interactions support their child's development.	14.29% 1	71.43% 5	14.29% 1	0.00%	0.00% 0	0.00%	7	4.00
3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	0.00%	85.71% 6	14.29% 1	0.00% 0	0.00% 0	0.00%	7	3.86

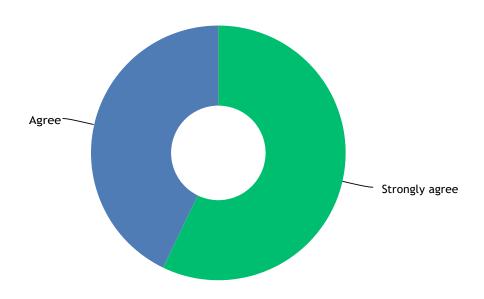
### Q 3.2 Staff work collaboratively with parents to coordinate support for children's development:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.2.1 Staff develop an ongoing partnership with parents to ensure regular communication, common understanding of the child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage.	0.00%	57.14% 4	42.86% 3	0.00%	0.00% 0	0.00%	7	3.57
3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development.	14.29% 1	14.29% 1	71.43% 5	0.00%	0.00% 0	0.00%	7	3.43

# Q 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.

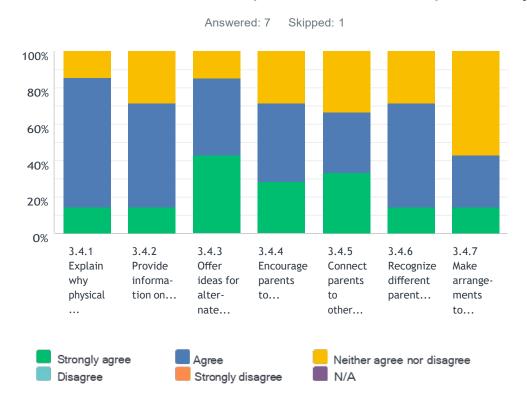
Answered: 7 Skipped: 1



ANSWER CHOICES	RESPONSES	
Strongly agree	57.14%	4
Agree	42.86%	3
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		7

#	COMMENT	DATE
	There are no responses.	

### Q 3.4 When staff talk with parents about discipline, they:



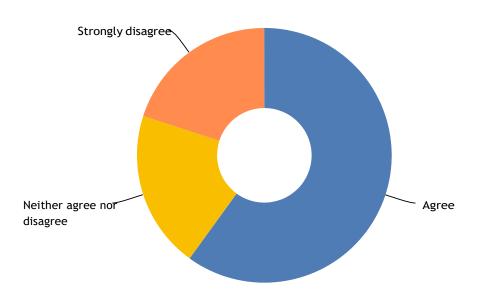
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.4.1 Explair physical disc allowed in the even though different fron approach to	sipline is not e program, this may be n the family's	14.29% 1	71.43% 5	14.29% 1	0.00%	0.00%	0.00%	7	4.00
3.4.2 Provide on age-appro positive disci techniques a expectations	opriate ipline nd reasonable	14.29% 1	57.14% 4	28.57% 2	0.00%	0.00% 0	0.00%	7	3.86
	ys to manage havior and to d reinforce	42.86% 3	42.86%	14.29% 1	0.00% 0	0.00% 0	0.00%	7	4.29
3.4.4 Encou to discuss be challenges th at home.		28.57% 2	42.86%	28.57% 2	0.00% 0	0.00%	0.00%	7	4.00
3.4.5 Conne other parents share or mod parenting app	s who can del positive	33.33% 2	33.33%	33.33%	0.00%	0.00%	0.00%	6	4.00
3.4.6 Recogn parental and approaches and discuss parents.	cultural to discipline	14.29% 1	57.14% 4	28.57% 2	0.00%	0.00%	0.00%	7	3.86
to have appro language and interpreters t	d cultural	14.29% 1	28.57%	57.14% 4	0.00%	0.00%	0.00%	7	3.57
#	THE PROGRA	FOR "3.4.1 EX AM, EVEN THO TO DISCIPLINE	UGH THIS			NOT ALLOWED THE FAMILY'S	IN	DATE	
	There are no re	esponses.							
#	COMMENTS FOR "3.4.2 PROVIDE INFORMATION ON AGE-APPROPRIATE POSITIVE DISCIPLINE TECHNIQUES AND REASONABLE EXPECTATIONS."								
	There are no re	esponses.							
#	CHILDREN'S	COMMENTS FOR "3.4.3 OFFER IDEAS FOR ALTERNATE WAYS TO MANAGE CHILDREN'S BEHAVIOR AND TO RECOGNIZE AND REINFORCE DESIRED/APPROPRIATE BEHAVIOR."							
	There are no re	esponses.							
#		FOR "3.4.4 ENC AVE AT HOME		PARENTS TO I	DISCUSS BEH	AVIOR CHALLE	NGES	DATE	

There are no responses.

#	COMMENTS FOR "3.4.5 CONNECT PARENTS TO OTHER PARENTS WHO CAN SHARE OR MODEL POSITIVE PARENTING APPROACHES."	DATE
1	unknown	8/6/2021 8:17 AM
#	COMMENTS FOR "3.4.6 RECOGNIZE DIFFERENT PARENTAL AND CULTURAL APPROACHES TO DISCIPLINE AND DISCUSS THEM WITH PARENTS."	DATE
	There are no responses.	
#	COMMENTS FOR "3.4.7 MAKE ARRANGEMENTS TO HAVE APPROPRIATE LANGUAGE AND CULTURAL INTERPRETERS TO SUPPORT DIFFICULT CONVERSATIONS WITH FAMILIES."	DATE
	There are no responses.	

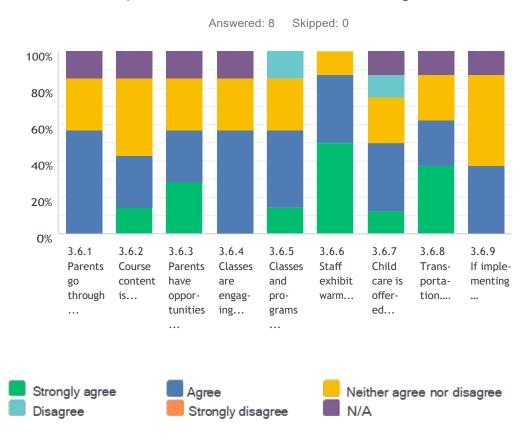
# Q 3.5 Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.





ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	60.00%	3
Neither agree nor disagree	20.00%	1
Disagree	0.00%	0
Strongly disagree	20.00%	1
Not applicable	0.00%	0
TOTAL		5
# COMMENT	DATE	
There are no responses.		

### Q 3.6 Parenting education classes are offered in a way that reflects best practices in the field, including:



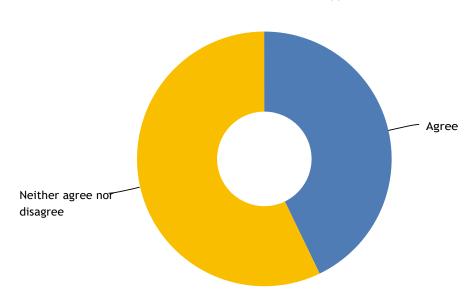
	STRONGLY AGREE	AGREE	NEITHER AGREE	DISAGREE	STRONGLY	N/A	TOTAL	WEIGHTED AVERAGE
	7.0		NOR DISAGREE		DIOMORE			717210102
3.6.1 Parents go through a series of classes as a group - with other forms of contact between classes to maintain their engagement.	0.00%	57.14% 4	28.57% 2	0.00%	0.00%	14.29% 1	7	3.67
3.6.2 Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.	14.29% 1	28.57%	42.86% 3	0.00% 0	0.00%	14.29% 1	7	3.67
3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.	28.57% 2	28.57%	28.57% 2	0.00% 0	0.00%	14.29% 1	7	4.00
3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).	0.00%	57.14% 4	28.57%	0.00%	0.00%	14.29% 1	7	3.67
3.6.5 Classes and programs are delivered by staff with appropriate training and credentials for the program.	14.29% 1	42.86% 3	28.57% 2	14.29% 1	0.00%	0.00%	7	3.57
3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.	50.00% 4	37.50% 3	12.50% 1	0.00%	0.00% 0	0.00%	8	4.38
3.6.7 Child care is offered while parents are in classes.	12.50% 1	37.50% 3	25.00% 2	12.50% 1	0.00%	12.50% 1	8	3.57
3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.	37.50% 3	25.00% 2	25.00% 2	0.00%	0.00%	12.50% 1	8	4.14
3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original	0.00%	37.50% 3	50.00% 4	0.00%	0.00%	12.50% 1	8	3.43

course design and content.

#	COMMENTS FOR "3.6.1 PARENTS GO THROUGH A SERIES OF CLASSES AS A GROUP - WITH OTHER FORMS OF CONTACT BETWEEN CLASSES TO MAINTAIN THEIR ENGAGEMENT."	DATE
1	unknown	8/6/2021 8:20 AM
2	not sure never used	8/2/2021 10:15 AM
#	COMMENTS FOR "3.6.2 COURSE CONTENT IS FOCUSED ON PARENTING INFORMATION AND DEVELOPMENTAL INFORMATION FOR A PARTICULAR AGE GROUP OR TARGETED POPULATION, SUCH AS CHILDREN WITH SPECIAL NEEDS."	DATE
1	unknown	8/6/2021 8:20 AM
2	never used dont know	8/2/2021 10:15 AM
#	COMMENTS FOR "3.6.3 PARENTS HAVE OPPORTUNITIES TO TRY OUT NEW PARENTING TECHNIQUES IN THE CONTEXT OF PARENT-CHILD ACTIVITIES AND/OR AS "HOMEWORK" ASSIGNMENTS BETWEEN CLASSES."	DATE
1	unknown	8/6/2021 8:20 AM
2	dont know	8/2/2021 10:15 AM
#	COMMENTS FOR "3.6.4 CLASSES ARE ENGAGING AND INTERACTIVE WITH OPPORTUNITIES FOR DISCUSSION AND REFLECTION (RATHER THAN BEING OVERLY RELIANT ON LECTURE AND WRITTEN INFORMATION)."	DATE
1	unknown	8/6/2021 8:20 AM
2	dont know of class	8/2/2021 10:15 AM
#	COMMENTS FOR "3.6.5 CLASSES AND PROGRAMS ARE DELIVERED BY STAFF WITH APPROPRIATE TRAINING AND CREDENTIALS FOR THE PROGRAM."	DATE
1	unknown	8/6/2021 8:20 AM
2	homework help	8/2/2021 10:15 AM
#	COMMENTS FOR "3.6.6 STAFF EXHIBIT WARMTH, GENUINENESS, FLEXIBILITY, EMPATHY AND GOOD COMMUNICATION SKILLS WITH FAMILIES."	DATE
	There are no responses.	
#	COMMENTS FOR "3.6.7 CHILD CARE IS OFFERED WHILE PARENTS ARE IN CLASSES."	DATE
1	but this would help	8/2/2021 10:15 AM
2	because they need it	7/28/2021 9:11 AM
#	COMMENTS FOR "3.6.8 TRANSPORTATION, FOOD OR OTHER SUPPORTS ARE PROVIDED AS APPROPRIATE TO ENABLE PARENTS TO PARTICIPATE."	DATE
	There are no responses.	
#	COMMENTS FOR "3.6.9 IF IMPLEMENTING AN EVIDENCE-BASED OR PROVEN PROGRAM, THE PROGRAM IS DELIVERED WITH FIDELITY TO THE ORIGINAL COURSE DESIGN AND CONTENT."	DATE
	There are no responses.	

# Q 3.7 Information is provided to parents on stages of child development and what to expect of their children at each stage.

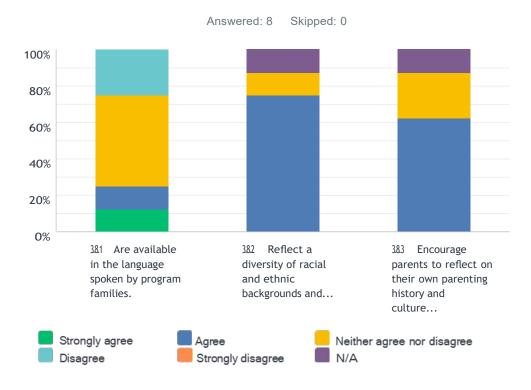




ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	42.86%	3
Neither agree nor disagree	57.14%	4
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		7

#	COMMENT	DATE
1	I have never seen this	8/2/2021 10:15 AM

# Q 3.8 Parenting information and materials used by the program are culturally and linguistically appropriate, and:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.8.1 Are available in the language spoken by program families.	12.50% 1	12.50% 1	50.00% 4	25.00% 2	0.00% 0	0.00%	8	3.13
3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.	0.00% 0	75.00% 6	12.50% 1	0.00%	0.00% 0	12.50% 1	8	3.86
3.8.3 Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.	0.00%	62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71

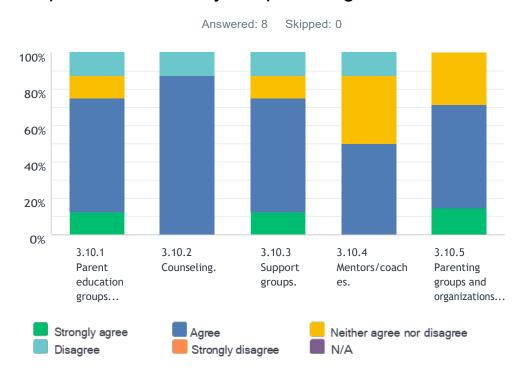
#	COMMENTS FOR "3.8.1 ARE AVAILABLE IN THE LANGUAGE SPOKEN BY PROGRAM FAMILIES."	DATE
1	it would help	8/2/2021 10:15 AM
#	COMMENTS FOR "3.8.2 REFLECT A DIVERSITY OF RACIAL AND ETHNIC BACKGROUNDS AND FAMILY STRUCTURES."	DATE
1	this could help	8/2/2021 10:15 AM
#	COMMENTS FOR "3.8.3 ENCOURAGE PARENTS TO REFLECT ON THEIR OWN PARENTING HISTORY AND CULTURE, RATHER THAN ENCOURAGING STEREOTYPES."	DATE
	There are no responses.	

### Q 3.9 Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.9.1 Books in a resource	s and videos ce library.	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00%	0.00%	8	4.13
3.9.2 Parer	nting classes.	14.29% 1	57.14% 4	28.57%	0.00%	0.00%	0.00%	7	3.86
3.9.3 Supp	oort groups.	14.29% 1	57.14% 4	28.57%	0.00%	0.00%	0.00%	7	3.86
3.9.4 Regu on bulletin public space		50.00%	50.00%	0.00%	0.00%	0.00%	0.00%	8	4.50
parents wit concerns to together an specific info such issues prevention, routine pre- health care	o come and share cormation on s as accident toilet training, ventative n nutrition, rns, Shaken	14.29% 1	42.86%	28.57% 2	0.00%	0.00%	14.29% 1	7	3.83
	and links on website and/or ia pages	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00%	0.00%	8	4.00
#	COMMENTS	FOR "3.9.1 BC	OKS AND	VIDEOS IN A R	ESOURCE LIB	RARY."		DATE	
	There are no	responses.							
#	COMMENTS	FOR "3.9.2 PA	RENTING (	CLASSES."				DATE	
1	unknown							8/6/2021 8	:20 AM
#	COMMENTS	FOR "3.9.3 SI	JPPORT GI	ROUPS."				DATE	
1	unknown							8/6/2021 8	:20 AM
2	definitely wou	uld help						8/2/2021 1	0:15 AM
#	COMMENTS SPACES."	FOR "3.9.4 RE	EGULAR PO	OSTINGS ON B	BULLETIN BOA	RDS IN PUBLIC		DATE	
	There are no	responses.							
#	COMMENTS FOR "3.9.5 OPPORTUNITIES FOR PARENTS WITH SIMILAR CONCERNS TO COME TOGETHER AND SHARE SPECIFIC INFORMATION ON SUCH ISSUES AS ACCIDENT PREVENTION, TOILET TRAINING, ROUTINE PREVENTATIVE HEALTH CARE, NUTRITION, SLEEP PATTERNS, SHAKEN BABY SYNDROME, SAFE SLEEP, ETC."								
1	unknown 8/6/2021 8:20 AM							:20 AM	
2	could help 8/2/2021 10							0:15 AM	
#					N AND LINKS ( ED BY PARTIC	ON A PROGRAM	M	DATE	
1	when used	when used 8/2/2021 10:15 AM							0:15 AM

### Q 3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:

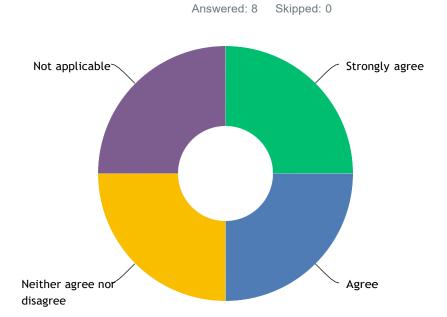


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.10.1 Parent education groups (including fatherhood groups).	12.50% 1	62.50% 5	12.50% 1	12.50% 1	0.00% 0	0.00%	8	3.75
3.10.2 Counseling.	0.00%	87.50% 7	0.00%	12.50% 1	0.00% 0	0.00%	8	3.75
3.10.3 Support groups.	12.50% 1	62.50% 5	12.50% 1	12.50% 1	0.00% 0	0.00%	8	3.75
3.10.4 Mentors/coaches.	0.00%	50.00% 4	37.50% 3	12.50% 1	0.00%	0.00%	8	3.38
3.10.5 Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented in the community.	14.29% 1	57.14% 4	28.57% 2	0.00%	0.00%	0.00%	7	3.86

#	COMMENTS FOR "3.10.1 PARENT EDUCATION GROUPS (INCLUDING FATHERHOOD GROUPS)."	DATE
1	I would like to see this happen	8/2/2021 10:15 AM

#	COMMENTS FOR "3.10.2 COUNSELING."	DATE
1	I would like to see this happen	8/2/2021 10:15 AM
#	COMMENTS FOR "3.10.3 SUPPORT GROUPS."	DATE
1	I would like to see this happen	8/2/2021 10:15 AM
#	COMMENTS FOR "3.10.4 MENTORS/COACHES."	DATE
1	I would like to see this happen	8/2/2021 10:15 AM
#	COMMENTS FOR "3.10.5 PARENTING GROUPS AND ORGANIZATIONS THAT PROMOTE SOCIAL INCLUSION AND HOST GROUPS THAT CORRESPOND TO DIFFERENT ETHNIC, CULTURAL AND LINGUISTIC GROUPS REPRESENTED IN THE COMMUNITY."	DATE
1	it could help	8/2/2021 10:15 AM

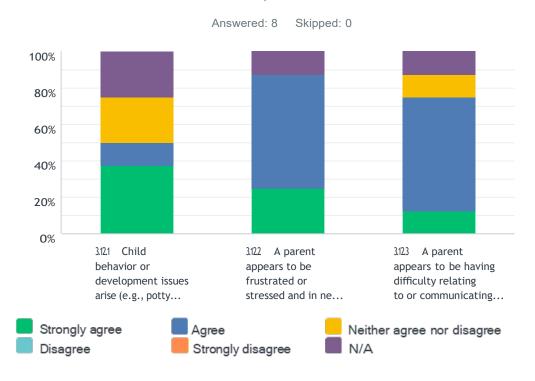
Q12 3.11 Parent education offerings and staff coaching on parenting are responsive to the needs of parents in different circumstances. For example: • Different parenting styles of mothers and fathers and the strengths of each • Needs and concerns of first time parents • Needs of parents who are parenting a child with a disability • Noncustodial parents • Nontraditional caregivers (e.g., grandparents, foster parents)



ANSWER CHOICES	RESPONSES	
Strongly agree	25.00%	2
Agree	25.00%	2
Neither agree nor disagree	25.00%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	25.00%	2
TOTAL		8

#	COMMENT	DATE
1	unknown	8/6/2021 8:20 AM
2	never used	8/2/2021 10:15 AM

### Q 3.12 Staff provide "just in time" parenting tips and discuss parenting issues with parents when:

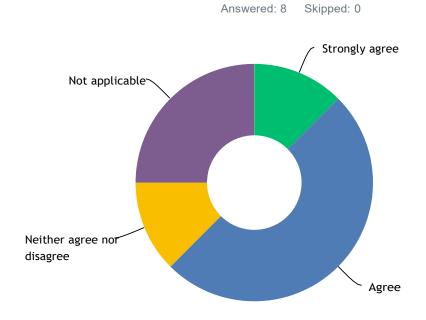


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.12.1 Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).	37.50% 3	12.50% 1	25.00% 2	0.00% 0	0.00% 0	25.00% 2	8	4.17
3.12.2 A parent appears to be frustrated or stressed and in need of support.	25.00% 2	62.50% 5	0.00% 0	0.00%	0.00%	12.50% 1	8	4.29
3.12.3 A parent appears to be having difficulty relating to or communicating with their child.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00%	12.50% 1	8	4.00

#	COMMENTS FOR "3.12.1 CHILD BEHAVIOR OR DEVELOPMENT ISSUES ARISE (E.G., POTTY TRAINING, CHANGES IN EATING OR SLEEPING PATTERNS, SEPARATION ISSUES, AGGRESSIVE BEHAVIOR)."	DATE
1	unknown	8/6/2021 8:20 AM
#	COMMENTS FOR "3.12.2 A PARENT APPEARS TO BE FRUSTRATED OR STRESSED AND IN NEED OF SUPPORT."	DATE

1	unknown	8/6/2021 8:20 AM
2	this could help	8/2/2021 10:15 AM
#	COMMENTS FOR "3.12.3 A PARENT APPEARS TO BE HAVING DIFFICULTY RELATING TO OR COMMUNICATING WITH THEIR CHILD."	DATE
1	unknown	8/6/2021 8:20 AM
2	a program would be good with less stress	8/2/2021 10:15 AM

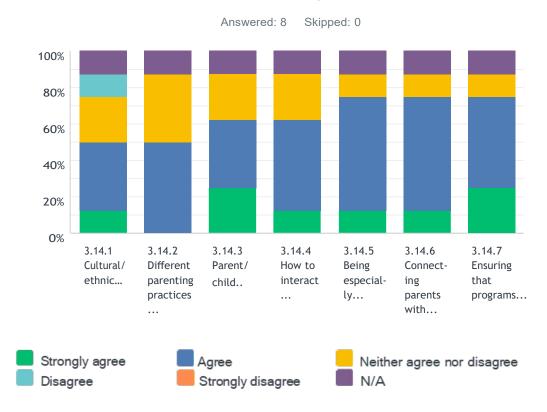
Q 3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about: • Prenatal and infant health and development • The birth process and what to expect • The needs of postnatal women and their families • The developing role of first time parents (including adolescent parents, if appropriate) • Planning for the child's needs after birth (e.g, car seats, cribs).



ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	50.00%	4
Neither agree nor disagree	12.50%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	25.00%	2
TOTAL		8

#	COMMENT	DATE
1	this would help parents	8/2/2021 10:15 AM

Q 3.14 Parents and staff work together to design and organize opportunities for parent led discussions (such as a Community Café or Parent Café series) to explore:



NEITHER DISAGREE

STRONGLY

N/A TOTAL

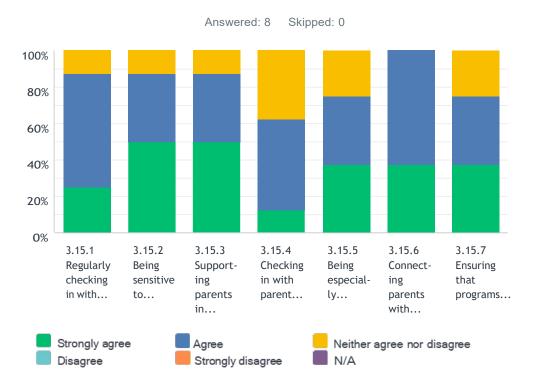
WEIGHTED

STRONGLY AGREE

		AGREE	AOREE	AGREE NOR DISAGREE	DIOAGREE	DISAGREE	N/A	TOTAL	AVERAGE
3.14.1 Cultural/e expectations and practices about parenting.		12.50% 1	37.50% 3	25.00% 2	12.50% 1	0.00%	12.50% 1	8	3.57
3.14.2 Different parenting practic	es.	0.00%	50.00% 4	37.50% 3	0.00%	0.00%	12.50% 1	8	3.57
3.14.3 Parent/chrelationships.	nild	25.00% 2	37.50% 3	25.00% 2	0.00%	0.00%	12.50% 1	8	4.00
3.14.4 How to in effectively with the children (e.g., list appreciating idea efforts and feeling creating a nonthreatening envir	heir tening; as, ngs;	12.50% 1	50.00%	25.00% 2	0.00%	0.00%	12.50% 1	8	3.86
3.14.5 Being es supportive at the that special need initially identified	time ds are	12.50% 1	62.50% 5	12.50% 1	0.00% 0	0.00% 0	12.50% 1	8	4.00
3.14.6 Connecting parents with material and websites, sugroups, play groups, play groups pecific to their conspecial needs.	erials opport ops and orces	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.00
3.14.7 Ensuring program parent-cactivities are app for families with with special need	child propriate children	25.00% 2	50.00%	12.50% 1	0.00%	0.00%	12.50% 1	8	4.14
# C0	OMMENTS	FOR "3.14.1 C	ULTURAL/E	ETHNIC EXPEC	CTATIONS AND	PRACTICES A	BOUT	DATE	
	ARENTING								
1 un	nknown							8/6/2021 8	:21 AM
			DIFFERENT	PARENTING P	PRACTICES."			DATE	
Th	nere are no	responses.							
# C0	OMMENTS	FOR "3.14.3 F	PARENT/CH	ILD RELATION	ISHIPS."			DATE	
1 All	I of these							8/2/2021 1	0:17 AM
(E	.G., LISTEI		CIATING IDE	EAS, EFFORTS		THEIR CHILDR GS; CREATING		DATE	
1 Pla	ans would h	nelp						8/2/2021 1	0:17 AM
		FOR "3.14.5 E EDS ARE INIT			PORTIVE AT TI	HE TIME THAT		DATE	
Th	nere are no	responses.							
SI	JPPORT G		GROUPS A	AND COMMUN		LS AND WEBSITES SPECIFIC T	,	DATE	

	There are no responses.	
#	COMMENTS FOR "3.14.7 ENSURING THAT PROGRAM PARENT-CHILD ACTIVITIES ARE APPROPRIATE FOR FAMILIES WITH CHILDREN WITH SPECIAL NEEDS."	DATE
	There are no responses.	

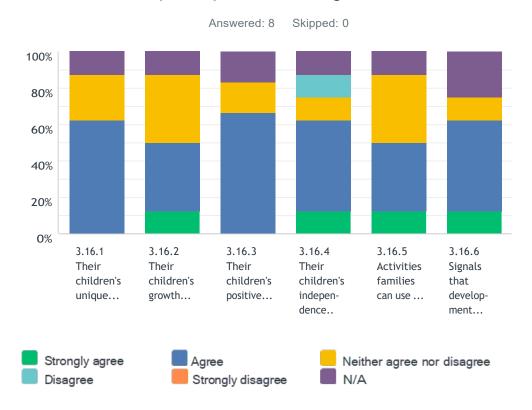
### Q 3.15 Staff recognize and support the parenting challenges experienced by families with children who have special needs by:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.15.1 Regu in with paren parenting iss		25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.13
	ration, ss, guilt, loss ated feelings, edging the amilies may	50.00% 4	37.50%	12.50% 1	0.00%	0.00%	0.00%	8	4.38
in understand	evelopmental for their	50.00% 4	37.50% 3	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.38
3.15.4 Check parents about their children needs may high dynamics an stress.	it the impact 's special ave on family	12.50% 1	50.00%	37.50% 3	0.00% 0	0.00% 0	0.00%	8	3.75
3.15.5 Being supportive at special need identified.	the time that	37.50% 3	37.50%	25.00% 2	0.00%	0.00%	0.00%	8	4.13
3.15.6 Conn parents with websites, suplay groups a community re specific to the special need	materials and oport groups, and esources eir children's	37.50% 3	62.50%	0.00%	0.00%	0.00%	0.00%	8	4.38
3.15.7 Ensu program pare activities are for families w with special i	ent-child appropriate vith children	37.50% 3	37.50% 3	25.00% 2	0.00% 0	0.00%	0.00%	8	4.13
#	COMMENTS F	FOR "3.15.1 RE	GULARLY	CHECKING IN	WITH PAREN	TS ABOUT		DATE	
	There are no re	esponses.							
#	PROTECTIVE	FOR "3.15.2 BE NESS, GUILT, OGING THE CHA	LOSS AND	OTHER RELA	TED FEELING	S, AND		DATE	
1	need this							8/2/2021 10	D:17 AM
#						ING APPROPRI PECIAL NEEDS		DATE	
1	The need will h	nelp						8/2/2021 10	D:17 AM
#						E IMPACT THEIR	2	DATE	

	STRESS."	
1	It's hard for a parent with a special needs	8/2/2021 10:17 AM
#	COMMENTS FOR "3.15.5 BEING ESPECIALLY SUPPORTIVE AT THE TIME THAT SPECIAL NEEDS ARE INITIALLY IDENTIFIED."	DATE
1	Child in most areas	8/2/2021 10:17 AM
#	COMMENTS FOR "3.15.6 CONNECTING PARENTS WITH MATERIALS AND WEBSITES, SUPPORT GROUPS, PLAY GROUPS AND COMMUNITY RESOURCES SPECIFIC TO THEIR CHILDREN'S SPECIAL NEEDS."	DATE
	There are no responses.	
#	COMMENTS FOR "3.15.7 ENSURING THAT PROGRAM PARENT-CHILD ACTIVITIES ARE APPROPRIATE FOR FAMILIES WITH CHILDREN WITH SPECIAL NEEDS."	DATE
	There are no responses.	

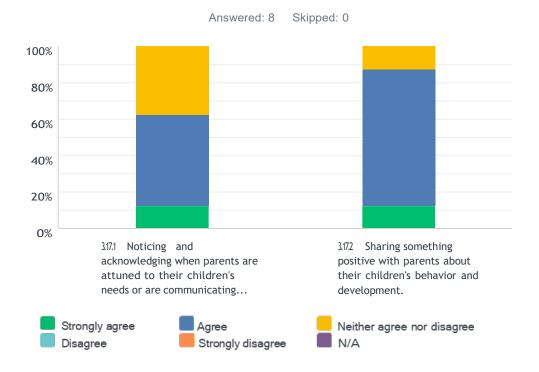
# Q 3.16 Home visitors share their observations of children with parents to help the parents recognize:



	STRONGL YAGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGL Y DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.16.1 Their children's unique assets, temperament, personality, communication styles and behavioral cues.	0.00%	62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71
3.16.2 Their children's growth and development patterns.	12.50% 1	37.50% 3	37.50% 3	0.00% 0	0.00% 0	12.50% 1	8	3.71
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.	0.00%	66.67% 4	16.67% 1	0.00% 0	0.00% 0	16.67% 1	6	3.80
3.16.4 Their children's independence and abilities.	12.50% 1	50.00% 4	12.50% 1	12.50% 1	0.00%	12.50% 1	8	3.71
3.16.5 Activities families can use to enhance their children's skills and development.	12.50% 1	37.50% 3	37.50% 3	0.00%	0.00%	12.50% 1	8	3.71
3.16.6 Signals that development may not be on track.	12.50% 1	50.00% 4	12.50% 1	0.00% 0	0.00%	25.00% 2	8	4.00

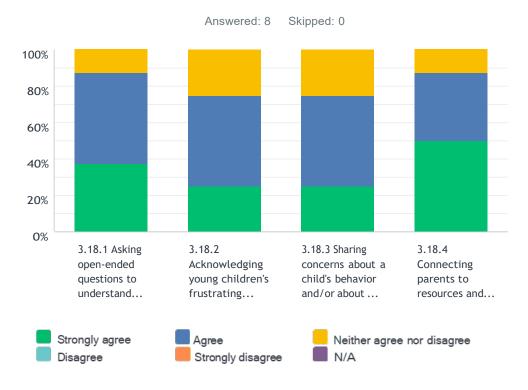
#	COMMENTS FOR "3.16.1 THEIR CHILDREN'S UNIQUE ASSETS, TEMPERAMENT, PERSONALITY, COMMUNICATION STYLES AND BEHAVIORAL CUES."	DATE
	There are no responses.	
#	COMMENTS FOR "3.16.2 THEIR CHILDREN'S GROWTH AND DEVELOPMENT PATTERNS."	DATE
1	it depends on if the parent is not stress out	8/2/2021 10:26 AM
#	COMMENTS FOR "3.16.3 THEIR CHILDREN'S POSITIVE SOCIAL SKILLS AND DEVELOPMENTALLY APPROPRIATE EMOTIONAL BEHAVIOR."	DATE
1	could be good	8/2/2021 10:26 AM
#	COMMENTS FOR "3.16.4 THEIR CHILDREN'S INDEPENDENCE AND ABILITIES."	DATE
	There are no responses.	
#	COMMENTS FOR "3.16.5 ACTIVITIES FAMILIES CAN USE TO ENHANCE THEIR CHILDREN'S SKILLS AND DEVELOPMENT."	DATE
	There are no responses.	
#	COMMENTS FOR "3.16.6 SIGNALS THAT DEVELOPMENT MAY NOT BE ON TRACK."	DATE
1	i depends on how or what each speak	8/2/2021 10:26 AM

### Q 3.17 Staff reinforce positive parent-child interactions by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.17.1 Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.	12.50% 1	50.00%	37.50% 3	0.00% 0	0.00% 0	0.00%	8	3.75
3.17.2 Sharing something positive with parents about their children's behavior and development.	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00%	0.00%	8	4.00

### Q 3.18 Staff proactively and respectfully address concerns about parenting techniques or behavior by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.18.1 Asking open-ended questions to understand the behavior from the parent's perspective.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.	25.00% 2	50.00%	25.00% 2	0.00%	0.00% 0	0.00%	8	4.00
3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.	25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.00
3.18.4 Connecting parents to resources and supports that may help to address parenting issues.	50.00% 4	37.50% 3	12.50% 1	0.00% 0	0.00%	0.00%	8	4.38

#	COMMENTS FOR "3.18.1 ASKING OPEN-ENDED QUESTIONS TO UNDERSTAND THE BEHAVIOR FROM THE PARENT'S PERSPECTIVE."	DATE
	There are no responses.	

#	COMMENTS FOR "3.18.2 ACKNOWLEDGING YOUNG CHILDREN'S FRUSTRATING BEHAVIOR AND RECOGNIZING PARENTS' EFFORTS TO DEAL WITH IT EFFECTIVELY."	DATE
1	sometimes	8/2/2021 10:26 AM
#	COMMENTS FOR "3.18.3 SHARING CONCERNS ABOUT A CHILD'S BEHAVIOR AND/OR ABOUT THE PARENTS' PARENTING PRACTICES AND RESPECTFULLY OFFERING ALTERNATIVES."	DATE
	There are no responses.	
#	COMMENTS FOR "3.18.4 CONNECTING PARENTS TO RESOURCES AND SUPPORTS THAT MAY HELP TO ADDRESS PARENTING ISSUES."	DATE
	There are no responses.	





The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience

Robin Perry (Lead Evaluator), Christen Lancaster (Cone Park Library Resource Center Community Research Coordinator), Celia George, Ruth Goodman, Lovell Haughton, Lashon Jenkins, Diane Johnson, Artie McMillan, Erica Reed, Stephanie Seawright, and Toni Spoliansky (CP SFSA Team)

**Institute for Child and Family Services Research** 

#### **Table of Contents**

	Page
Introduction	1
The CP Library Resource Center—Brief History	1
The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs	2
The CP Strengthening Families Self-Assessment Team	5
Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/ Action Items Associated with Supporting Families by Promoting Parental Resilience	9
How Does CP Library Resource Center Demonstrate that Parents are Valued?	9
How Does CP Library Resource Center honor each family's race, language, culture, history, and approach to parenting?	16
How Does CP Library Resource Center encourage parents to manage stress effectively?	17
How Does CP Library Resource Center support parents as decision-makers and help build decision-making and leadership skills?	20
How Does CP Library Resource Center help parents understand how to buffer their child during stressful times?	26
Fidelity of Parental Resilience Services and Supports to CSSP Protective Factor	26
Appendix A: The Strengthening Families Self-Assessment Tool	28
Appendix B: Electronic Version of Parental Resilience Questions of SFSA Tool	70
Appendix C: SFSA Tool for Community-Based Programs—Parental Resilience Results	93

#### Suggested Citation:

Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience*. Tallahassee: Institute for Child and Family Services Research.

#### Introduction

This report summarizes findings from, and recommendations developed by the Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) team utilizing a standardized process developed by the Center for the Study of Social Policy. This report focuses specifically upon findings generated from the utilization of the Strengthening Families Self-Assessment Tool for Community-Based Programs (and associated processes) by the CPLRC SFSA team with a specific focus on items/measures associated with supporting families by promoting parental resilience. Parental resilience is one of five protective factors that serve as an organizing framework for the structure and delivery of supports and services to the neighborhood/community served by the Cone Park Library Resource Center. Specific strengths associated with promoting parental resilience have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

#### The Cone Park Library Resource Center—Brief History

Partnership for Strong Families (PSF), the lead community-based care agency under contract with the Florida Department of Children and Families (since 2003) to provide comprehensive child welfare services in 13 North Central Florida counties, has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in North Central Florida). PSF's efforts began in 2007 to develop a network of Family Resource Centers (FRC) that emphasize a strengthening family approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

The PSF Resource Center model is built upon a multi-system collaborative focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care. One of the major strengths of the Resource Center Model utilized at the four existing sites (which includes the CP Library Resource Center) is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There is a strong history of collaboration with each of the existing three Resource Centers in Gainesville. Over time, a network of over 75 community partners (across all sites) has been developed. These collaborative efforts have been well documented in select Resource Center reports (for each RC and PSF), website and social media posts, Resource Center pamphlets/infographics, news reports, and select publications. The services provided are free and are intended to be responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons and enhancement of the community's ability to leverage resources to benefit some of Gainesville's most at-risk populations.

The first Family Resource Center developed by Partnership for Strong Families was the Library Partnership Family Resource Center (developed in collaboration with the Alachua County Library District) which opened its doors to the community in July 2009. In 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, a historically under-served community. Due to the existing perceived success of the Library Partnership Resource Center, along with the identified needs of the community, Partnership for Strong Families (PSF) was asked to partner with ACLD to also open a resource center at the Cone Park Library. As southeast Gainesville was considered a "hotspot" of high rates of reported child maltreatment, PSF eagerly agreed

to move forward with this new venture. Prior to opening the new Resource Center, PSF met with the community, assessed household needs, and established collaborative partnerships. Through community meetings and assessments, several local needs were identified that the new Resource Center could help address. The following local needs were identified: GED services, concrete and educational supports for children and parents, meaningful engagement and empowerment of parents and access to healthcare in southeast Gainesville. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Resource Center began operating full-time in May 2014.

All Gainesville Resource Centers are frequently described as "one-stop-shops" for local resources. Patrons may walk into the RCs for immediate access to available services or meet with professional RC staff to help determine needs and connect with local resources. Services provided through the RCs are voluntary and are free of charge to all community members as the result of community partnerships, various funding opportunities, and both monetary and in-kind donations.

The basis of PSF's RC Model is the Strengthening Families Approach and Protective Factors Framework (Center for the Study of Social Policy [CSSP], 2014). The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each RC. Although there may be some common services and supports across RCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each RC. The five protective factors include:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the CP Library Resource Center at promoting parental resilience. This report represents one small element of a comprehensive process evaluation meant to advance knowledge regarding the functioning, responsiveness, and impact of PSF Family Resource Centers upon the communities they serve. Since supports and services at the CP Library Resource Center are structured in accordance with the CSSP Protective Factors Framework, the Strengthening Families Self-Assessment Tool for Community-Based Programs, and associated processes (see below) are being used to help determine the fidelity of specific implementation strategies (in accordance with the above noted framework) at promoting parental resilience and strengthening families. This process will help identify existing strengths of select supports and services and help identify areas for potential improvements.

#### The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs

The Strengthening Families Self-Assessment Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) that will aid each in assessing the extent to which each of the RCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.). The assessment criteria and protocol for self-

assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Resource Center has implemented services/activities in alignment with core strategies for building each of the following protective factors (see above).

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). See Appendix A for a copy of the assessment tool and protocol. Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) two administrative and direct service staff, three community collaborators, and three parents who have been active participants in the program (or whose children participate in the program). The four parents/patrons initially selected to be members of each assessment team were chosen from a list of patrons that consented to be part of the broader study and who, following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons), received services or participated in activities linked to protective factors. These processes were followed in the establishment of the CPLRC SFSA Team, although only two community collaborators were able to actively participate in the process. Composition (see below) includes two administrators and direct service staff (Lashon Jenkins and Erica Reed), two community collaborators (Diane Johnson and Stephanie Seawright), and four Community Ambassadors (Celia George, Ruth Goodman, Lovell Haughton, and Artie McMillan). The term "Community Ambassador" was decided by the Team to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) contributions to this process. Profiles of Team members are denoted below.

As highlighted in **Appendix A**, there are a series of indicators and associated items linked with each Protective Factor. These indicators and items represent a series of actions/activities, program elements, protocols, and policies associated with implementation of services meant to enhance each Protective Factor according to best-practice/evidence-based standards. For services and supports focused on Parental Resilience there are 25 indicators with 97 associated items for which each team member is asked to individually rate their level of item statement agreement on a five-point Likert-type scale (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree) with an option for Not Applicable. This same scale is used for an assessment of all Protective Factor items/indicators. Collectively (for Parental Resilience services/activities), responses to these assessment items are meant to respond to the following questions:

How do programs demonstrate that parents are valued? (Items 1.1 through 1.5.9 and 1.8.1 through 1.10.2)

How do programs honor each family's race, language, culture, history, and approach to parenting? (Items 1.6.1 to 1.7.3)

How do programs encourage parents to manage stress effectively? (Items 1.11 to 1.13.7)

How do programs support parents as decision-makers and help build decision-making and leadership

skills? (Items 1.14.1 to 1.22.4)

How do programs help parents understand how to buffer their child during stressful times? (Items 1.23 to 1.25).

Team members received an orientation to the CSSP Protective Factors framework, its relationship to the CP Library Resource Center service model, and the Strengthening Families Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. See Appendix B for a copy of the electronic version of the tool associated with Parental Resilience questions/items (the focus of this report). For the electronic versions, each Team member was provided a unique (and secure) web link and a QR code, providing them with two electronic link options for responding to the survey (a preference/option desired by Team members) but informed to respond only once. Although the names of members/respondents were known to all Team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a Team member completed a paper version of the Tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the Lead Evaluator was available via phone and e-mail to field any questions related to the Tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members complete their scores, these data were shared via a written summary report (see Appendix C for the SFSA Tool for Community-Based Programs—Parental Resilience Results) highlighting the distribution of responses by Team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is not itemized in the tool protocols (it is left to the Team), the Lead Evaluator suggested some processes and the Team made initial decisions regarding how to proceed. Each question and associated items were reviewed as a collective and then as individual items. For many items established consensus and agreement was evident, especially for select items and questions identified as observed strengths of the CP Library Resource Center. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (including by role of the respondent as a stratum) and /or the weighted mean score for a select item was below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences and a collective decision was made regarding whether an action item was needed or should be considered. The Team engaged in facilitated brainstorming to identify potential recommendations for action items. Although action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation will follow the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications

to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

The initial meeting of the CPLRC SFSA Team took place on July 21, 2021. Following a review of the SFSA, associated process, and expected deliverables, the Team decided to meet monthly over an extended timeframe through the fall months instead other options, including multiple times over a more concentrated time frame. Communication with, between, and among individual Team members could take place in-between meetings but all discussion and brainstorming activities would take place during in-person, web-based, or hybrid meetings. Due to variations in community spread of Covid-19 during this timeframe, the meeting format changed/varied in accordance with safety concerns and Partnership for Strong Families service and administrative pandemic protocols. Subsequent meetings that involved the discussion of Parental Resilience items took place on August 18 and September 22. The dates and times of meeting were in accordance with preferred times and schedules of all Team members and attendees.

#### The Cone Park Strengthening Families Self-Assessment Team

As denoted earlier, a team of dedicated community ambassadors, CPLRC staff, and collaborative partners worked together to engage in a comprehensive assessment of the supports and services provided by the CPLRC in accordance with the CSSP's protective factors framework. The biographies of these team members are detailed below.



Celia George has been a patron at CPLRC since 2015. She is a Florida native and has spent much of her life living in Gainesville, FL. She graduated from the Santa Fe College Police Academy and went on to work with the University of Florida Police Department. During her time as a police officer, she moved near Morningside Nature Center which is only a few miles from the present location of CPLRC. She has raised two daughters who have gone on to be college graduates, building upon her successes. When Celia retired, she turned her attention to her grandchildren and began using the Fred Cone Park Facilities with them. She has made sure they are included in CPLRC summer camps, family events and activities like Homework Help and Girl Scouts. One of her granddaughters currently participates in the Girl Scouts program at CPLRC. She frequently uses the track behind the Cone Park library and attends the food distribution programs. She has been an

encouragement to her twin grandchildren who have started using the track as well. She wanted to be a part of this SFSA Team because "I want to help make a difference". Celia loves Cone Park because "it serves so many different purposes and meets the needs for so many families in the community".



**Ruth Goodman** has been a patron at the CPLRC since 2019. During that time, she also utilized services at the SWAG Family Resource Center and the Library Partnership Library Resource Center. She was born and raised in the French West Indies but after visiting the United States as a young woman she decided to stay and make a life for herself in the US. She married at age 19 and has raised 4 children with her husband. After retiring as a lead teacher for 20 years, Ruth now focuses on assisting with her 10 grandchildren. One of the ways she does this is by reaching out to the Resource Centers. She is happy to be a part of the Cone Park Library Resource Center because "it's very helpful and informative for children and families and the community". Ruth wanted to be a member of our Strengthening Families Self-Assessment Team because she wants to be a part of any work that could potentially help keep families together.



**Lovell Haughton** has been a patron of the CPLRC since August 2020. She is a native of New York but has been in this community for 30 years. Lovell has experience working with community organizations, resources, and support services for those diagnosed with HIV. Her drive to care for others pushes her forward in everything that she does. She strives to maintain and build partnerships with families and be a support and liaison for them. She also acts as a support for her family and 7 grandchildren. Lovell has enjoyed working with the CPLRC because it's community and family oriented.



Lashon Antonia Jenkins first became involved with the CPLRC 10 years ago, as a patron to the CPL. Lashon is a Gainesville native, residing on the eastside of town, where the CPLRC is located. For the past 10 years, she has been an employee with Partnership for Strong Families in the adoptions department. She has worked directly with CPLRC as an intern this last year to satisfy requirements for her Master of Social Work degree. Currently, Lashon holds a Bachelor of Arts in Psychology and a Master of Human Services degree. Her parents also live in the community, and she makes time to visit them regularly between school, work, and an occasional rest. Lashon likes the way patrons are treated by the staff as they seek services that they do not have access to, like computer use or emergency food and clothing. She is glad to be a part of the SFSA Team because "when we know how to

grow, it will make it that much better."



**Diane Holt Johnson** was born in Newark, New Jersey and has worked in Gainesville, FL for six years. She graduated from the University of Pennsylvania with a BA in Sociology and the University of South Florida with a master's degree in Library & Information Science. Diane has a lifetime of experience volunteering in churches, non-profit and social service organizations (i.e., United Way, Take Stock in Children, Boys & Girls Club, Reading Pals, American Cancer Society, local Community Development Corporations, and grassroots neighborhood associations.) She and her husband of 42 years, Derryl, have raised six children, who are their proudest accomplishments. She loves the CPLRC because it values families and works to preserve them; emphasizes preventing and protecting families from disasters rather than correcting after the problem has festered; and provides programs to "help families help themselves" as much as possible. Diane has

been glad to be a part of the SFSA Team because it gives voice to the patrons, who historically have not been asked to have input into the programs and services designed for them.



Artie McMillan has been a patron at CPLRC since 2014. She has been a part of the local community for 14 years and frequented the Cone Park Library before the Resource Center opened. Artie has dedicated her life to serving others and has compassion for people who have fallen on hard times and are experiencing homelessness. She knows what it's like to struggle and wants to help people in need. Artie also has an entrepreneurial spirit and has managed her own restaurant, daycare, and prayer ministry in the past. Her dream would be to work on a Tiny House community that could serve as a one-stop center for people experiencing homelessness, offering practical help to get stabilize them. She lives with her son and her two grandchildren that she legal custody of through Partnership for Strong Families. In 2014, she began seeking regular services at CPLRC when the children came to live with her. Artie loves the care and compassion that is displayed at CPLRC and says, "you

can feel the good energy". She joined the SFSA Team because she trusted Erica's advice that she would be a good fit and because she wants to make a difference and have her voice heard, "not as a victim but as the victor".



**Erica Reed** has been the Resource Center Manager of the CPLRC since 2016. She has been in this community her entire life and many of her family members live in the community. Erica graduated from the University of Florida with a B.S. degree in Family, Youth and Community Sciences with minors in nonprofit organization, leadership, and human services. In addition to her education, she has experience working as a Guardian Ad-Litem, a case manager for high-risk cases and in licensing foster homes. Erica has been married for 23 years and lives at home with her husband, two boys and two girls. She has a genuine compassion for people and loves the CPLRC because it gives her the opportunity to help individuals and families in need. Erica is pleased with the SFSA Team process because it brought together a team with a common goal of wanting to make things better and because she wasn't alone in the process.



**Stephanie Seawright** has been a member of the Gainesville community since 1987 and has been working with the CPLRC since 2017. She helped developed the local A. Quinn Jones Museum and Cultural Center in Gainesville and works with her church and sorority to be of service to mankind. With a lifetime of experience serving others, Stephanie chooses to collaborate with CPLRC because she loves that the staff are helpful and care about the community they serve. As the Chief Operations Officer of the Central Florida Community Action Agency, she works to bring services like the "Fight for your Money" class to patrons of the Resource Center. Stephanie chooses to be a part of the Strengthening Family's Self-Assessment team because she is impressed with the work that the Resource Center does and wants to be a part of its success in any way.

Although not formally members of the CPLRC SFSA Team, Robin Perry (Lead Evaluator) and Christen Lancaster (Community Research Coordinator for the CP Library Resource Center) attended each of the CP SFSA Team meetings, they, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended the majority of the meetings served as key supports for Team processes. Robin Perry provided initial training and overview of the Center for the Study of Social Policy's SFSA Tool for Community-Based Programs and associated processes for review of findings and development of an action plan and recommendations by the Team. Robin Perry was the lead facilitator of select group meetings; summarizing findings generated from the self-assessment tool/survey, asking questions, and clarifying Team members' views as they discussed survey results with the goal of moving toward a consensus of perspective related to select survey questions and recommended action items for the CP Library Resource Center. Christen Lancaster is the Community Research Coordinator for the CPLRC and a principal on-site contact for Team members. Ms. Lancaster maintained regular contact with Team members and distributed meeting materials; aided with facilitation of group processes, and (along with Robin Perry) took detailed notes of comments and discussion items. Toni Spoliansky served as an information support and assisted in answering any questions individual Team members had about the funded project and the role, function, and support of Partnership for Strong Families for the CPLRC. It is important to note that the role of the above three individuals was seen as supportive in nature. An empowerment perspective was adopted, as a Team they would decide the meeting schedule and facilitation process with all members assuming equal status as knowledge experts with respect to community needs and the role, value, functioning, and responsiveness of the CPLRC to community need related to supporting families through the promotion of parental resilience. There was no effort by those in supportive roles to censure conversation and discussion points, as feedback was regularly sought regarding facilitation processes and preferences of group members for these processes. All notes were converted into minutes that were distributed to Team members for their review, edits, and approval. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (the Team decided on monthly two-hour meetings) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings (which would then be discussed with all Team members at the next in-person or virtual meeting).

#### Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience

The following represents a summary of key findings and recommendations by the Team for questions and items associated with promoting Parental Resilience. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the SFSA Tool for Community-Based Programs—Parental Resilience Results; distributed to all Team members as a starting point for discussion and brainstorming activities. For the purposes of the summary, findings are presented in accordance with the broader questions select items/sets of questions the tool was structured to answer. Each summary is followed by an itemization of select discussion points and any identified action items for which there was consensus among Team members.

## How Does CP Library Resource Center Demonstrate that Parents are Valued? (Items 1.1 through 1.5.9 and 1.8.1 through 1.10.2)

Table 1 provides a detailed summary of the individual items/questions associated with a measure of how the CP Family Resource Center demonstrates that parents are valued, and the average Team score (weighted) associated with each. The following scores were associated with each rating of each item response, where Strongly Agree=5, Agree=4, Neither Agree nor Disagree=3, Disagree=2, Strongly Disagree=1. The weighted average score for each item reflects the average score across all Team members, excluding any Not Applicable responses. There were no SFSA tool items for which the majority of Team members thought were not applicable. At most, there were two Team members that found select items represented in Table 1 to be not applicable. These included Items 1.4.7, 1.4.8 and eight items associated 1.5 (1.5.3 through 1.5.6, 1.5.8, and 1.5.9)—the last set applies/focuses on services and activities focused on fathers. The Team Scores (weighted average) cells are color coded by where green represents Team consensus of Strongly Agree and Agree, yellow represents scores in the Neither Agree nor Disagree range, and red represents a level of Disagreement (either Disagree or Strongly Disagree).

Findings in Table 1 highlight a Team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 18 of the 31 items/indicators of demonstrating that parents are valued, with 13 within the Neither Agree nor Disagree range. There were no item/indicators for which there was a consensus of disagreement. The Team had an opportunity to discuss all item responses and brainstorm potential action items generating from open discussion of CPLRC's strengths and potential areas of improvement. Details regarding key discussion points can be found in meeting minutes for each Team meeting. These minutes would be utilized in future Team meetings and by CPLRC staff members when implementation tasks are itemized for each action item.

CP Library Resource Center and its staff... recognize and affirm the central role of parents in their children's lives; provide multiple avenues/means for regular communication with family members and make all family members feel welcome.

Taking together, ratings and discussion on items 1.1 through 1.3.2 reinforced the overall positive impact and meaningful practices (through multiple formal, informal, and regular communication methods) that the CP Library Resource Center and its staff (including volunteers and interns) engage in that recognize and affirm the central role of parents in their children's lives; provide multiple avenues/means for regular communication with family members, and make all family members feel welcome. There were no Action Items affiliated with any of these items given consensus agreement; no Team member disagreed with any of the surveyed statements. Members spoke highly of staff and their efforts, especially given that it is a small program with one full-time employee that relies heavily on volunteers and interns for support. It appears there is equal praise for the staff of the Cone Park Library who collaborate closely with the CP Library RC staff in providing and/or seeking supports and resources for families in the surrounding neighborhood(s). One Community Ambassador reinforced the perception of staff as valued sources of information that will meet individually with parents/caregivers to address individual and personalized needs; providing an example of her efforts to seek services for her autistic grandson whom she cares for. She notes "I know when I seek services, I find I get good information..." [at the CP Library RC and CP Library and is] "...directed to the answer, and if not, directed to someone who can answer [my questions]".

Equal praise and appreciation were directed toward the efforts made to welcome and show respect for family members regardless of the context for which services and supports are solicited from the CP Library RC (herein referred to as CPLRC) and the CP Library. Again, the collaboration between the resource center and library was seen as a valued asset in the community. Community Ambassadors noted (and staff and partners agreed) that the CPLRC and the Cone Park library "...feel like one and the same..." and that the cohesiveness of this relationship is manifested in the "equity" in the level of "welcoming" to all patrons/community members and that collectively, resources offered through both entities can aid families (examples were provided) in getting the resources and supports they need. There was consensus that if there is "...something that they can't help you with at the library, they send you to the resource center and vice versa." It was noted that collaborative partners "like to use" libraries and the CPLRC and that the quality of collaborative relationships with other partners/providers allow for meaningful referrals elsewhere, if needed. The library was described as a "...first source of content..." (e.g., community information) for "many people" in the community/neighborhood(s) served. The current collaboration was described as "in sync" as library staff and CPLRC staff "...work well together." Some indicated that ratings provided as part of the SFSA Tool may reflect joint efforts of library and the CPLRC given the nature of the working relationship/collaboration between both entities/organizations.

[T]he collaboration between the resource center and library was seen as a valued asset in the community.

The welcoming and affirming practices of staff seem to exist concurrently with practices that aid in the development and reinforcement of mutually respectful relationships with all family members. There was consensus agreement (with an average weighted score among respondents above 4) among CPLRC SFSA Team members that staff develop mutually respectful relationships with all family members by:

- 1.4.1 Taking time to get to know family members individually, by name.
- 1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.
- 1.4.3 Regularly inquiring about what is happening in their lives.
- 1.4.4 Providing emotional support and encouragement.
- 1.4.5 Sharing appropriate information about themselves.

There were three items where there was no consensus agreement but rather, a score suggesting a consensus Neither Agree nor Disagree ratings. These included:

- 1.4.6 Recognizing and acknowledging parents' strengths, efforts, and contributions.
- 1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.
- 1.4.8 Using intake forms, applications and surveys that are gender-neutral.

Although individual member ratings/scores may have been impacted by a lack of knowledge or limited utilization of services and supports (and associated conversations with staff) applicable to items 1.4.7 and 1.4.8; there was limited discussion or feedback of individual ratings for 1.4.6. One Community Ambassador spoke affectionately of her experiences with CPLRC staff (in relation to Item 1.4.6) and "...their uplifting, their congratulatory [interactions/statements] and [that they] give good feed-back".

Of the nine items affiliated associated with 1.5 (that focus on the value of fathers and their unique needs) there was consensus agreement on only one item (1.5.6). Items for which the consensus was a rating of Neither Agree nor Disagree included:

- 1.5 Staff show that they value fathers and are sensitive to their unique needs by:
  - 1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.
  - 1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.
  - 1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.
  - 1.5.4 Providing peer activities or services that are man-to-man, father-to-father.
  - 1.5.5 Engaging male participants to greet other men at program activities.
  - 1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.
  - 1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.
  - 1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.

All the scores associated with this cluster of questions were low with 1.5.1 the lowest followed by 1.5.4, then 1.5.9. There was a detailed and involved discussion regarding each of the items and in response to

a broader question posed to the group "are we connecting with dads?" that resulted in a specific Action Item:

**Action Item #1:** Explore options/possibilities to provide more father-focused programming at CPLRC; perhaps in collaboration with CP Library.

It is important to note that discussion regarding these items and the topic of engagement with fathers/male caregivers, considered a variety of contextual influences that impact the level, nature, and means of engaging with and involving fathers/men in households across a variety of settings (not just at the CP Library or CPLRC). Feedback and engagement with fathers/male caregivers were acknowledged (by the all-female CPLRC SFSA Team) as very important and desired/needed activities to enhance the impact of community services and supports on child and family well-being. Toward this end, it was recommended that there is a need more direct input, participation, and feedback from men to better respond to SFSA items/questions and develop more meaningful and targeted action items. A Community Ambassador shared feedback from a male family member/father regarding hesitancy to seek or engage in services and supports given a level of discomfort with speaking only to women staff. It was suggested that some men may be more receptive to professionals that are males and/or if there were males already active in supports and sponsored events (i.e., "...more males around" the Library and RC). Active direct engagement of, and invitations to, males in the community (perhaps by other males/fathers) may be necessary. These thoughts were contrasted by other suggestions/observations that some males/fathers are not interested in being involved in their children's lives. The group discussion expanded upon the influence of gender role expectations and the sense of shame some men may feel in accessing services, as well as privacy concerns when agencies/organizations are "in your business." There was consensus regarding these last potential influences and agreement in the value of more "...man-to-man and father-to father opportunities" at the CP Library and CPLRC.

Feedback and engagement with fathers/male caregivers were acknowledged... as very important and desired/needed activities to enhance the impact of community services and supports on child and family well-being.

As an example of a past initiative that showed promise in engaging fathers, Ms. Johnson shared that the Cone Park Library used to have a literacy program ("FRED"-Fathers Reading Every Day) that focused on dads reading with their children. The program "...fizzled out" about 4 years ago, but there was a suggestion that perhaps this program could be reinstated again. Ms. Johnson also shared information about a program affiliated with local/county jails (Alachua County) that recorded incarcerated fathers reading children/youth books and then sending the recordings to their children. Since the mother's (primary caregiver/custodian) gave permission/consent for this contact (between father and child), this was perceived as a good way to get the whole family involved in promoting literacy and family

connections. Possible collaborations with faith-based organizations/communities that intentionally try and reach out to young men were also discussed. In any regard, there was an identified need to engage fathers in a manner that is not stigmatizing and that it is "extremely important" to do so. Toward this end, Ms. Seawright suggested value in events that are couple-focused; for example, promoting financial literacy (budgeting, practical financial knowledge, etc.) classes and encouraging wives/female caregivers to bring their spouses/partners. The work done at the Community Action Agency (with Dr. Dixon) related to financial literacy was highlighted. There was support with suggestions that focused on "marketing" events as "...family events" for partners, husbands and wives, mothers, and fathers, etc. that would be of interest/value for fathers/male caregivers as a means of engagement. Providing an activity for children (using CP Library or outdoor space, etc.) while the adults (including fathers) are engaged in more activities/supports of interest would help alleviate childcare availability barriers that have impacted participation in the past. These supports and other incentives for participation (e.g., a gift card or budgeting book/resource for participating in a financial literacy workshop, etc.) were highlighted. In any event, there is value in better understanding the needs of households in the community, provide "...real assistance...", and develop a coordinated "marketing" plan to reach out to those that can benefit from such events, etc. throughout all areas served by Gainesville Resource Centers. These thoughts led to the following recommended Action Item by the CPLRC SFSA Team:

**Action Item #2**: Create a joint marketing strategy between CPLRC and other resource centers to market services and supports directly to fathers.

With respect to the final three sets of items (1.8 through 1.10.2), one additional action item resulted from involved discussion of the summarized results (see below). There were no action items associated with items 1.81 through 1.9.4; there was general agreement and praise for efforts of the CPLRC to ensure its program's efforts reflect the communities and families it serves. Ms. Reed shared recent statistics that suggested approximately 70% of patrons for the food distributions are African American. It was thought that an even higher percent of African American patrons come for services mid-week. Some Community Ambassadors remarked that they do not see many local individuals from "non-black races" suggesting that the highly homogeneous group of patrons (that are black) may be proportionally representative of the surrounding neighborhoods. Although no specific Action Item was recommended (for 1.8.2), the Team agreed that more research could be done to learn about nearby households and how similar or different these households are from those receiving services at the CPLRC.

[T]here was general agreement and praise for efforts of the CPLRC to ensure its program's efforts reflect the communities and families it serves.

Although the collective average Team score for items 1.10.1 and 1.10.2 were in the Neither Agree nor Disagree range, the Team was not aware of a significant refugee or immigrant population within the community/service area for the CPLRC (East Gainesville and Hawthorne areas) and thus unable to

collective agree with the following statements that the program and services support immigrant and refugee families by:

- 1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.
- 1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.

It was thought that the population within the service catchment area was primarily African American; however, some members highlighted an awareness of community members from Nigeria, Haiti, with an additional (minority number of) groups of Hispanic and/or Latino and White families/households. Ms. Johnson suggested that the library needs to design program materials/information sheets in multiple languages to encourage patrons to explore services outside of the concrete services (e.g., notary and fax services) and supports provided by the CP Library and CPLRC. The CPLRC does have some brochures in Spanish but not in Creole. With some Haitian visitors this lack of translated materials may be a barrier impacting engagement and service/support receipt. This discussion identified the need for more information regarding the community as such relates to distribution of immigrant, refugee, and diverse groups that speak other languages and services/supports within the community (that can be partnered with) tailored to their specific needs. The Action Item generated from this discussion is:

**Action Item #3:** Explore options for connecting immigrant and refugee families to services in their own language.

Table 1: How Does Cone Park Library Resource Center Demonstrate that Parents are Valued?	Team Score (Weighted Average
1.1 Staff strive to recognize and affirm the central role of parents in their children's lives through every interaction with families including policies, practices and informal communication	4.14
1.2 The program has multiple avenues for regular communication with families:	
1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.	4.14
1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input	4.00
from families about activities throughout the year.  1.2.3 Staff regularly ask parents about their observations of their child.	4.00
L.3 All family members are made to feel welcome:	
1.3.1 Someone is available to greet families when they come in.	4.67
1.3.2 Staff are respectful even when family visits are unexpected.	4.57
.4 Staff develop mutually respectful relationships with all family members by:	
1.4.1 Taking time to get to know family members individually, by name.	4.78
1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.	4.38
1.4.3 Regularly inquiring about what is happening in their lives.	4.22
1.4.4 Providing emotional support and encouragement.	4.38
1.4.5 Sharing appropriate information about themselves.	4.00
1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.	3.88
1.4.7 Taking time to understand the complex needs of individual parents, such as navigating	
child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.	3.86
1.4.8 Using intake forms, applications and surveys that are gender-neutral.	3.71
.5 Staff show that they value fathers and are sensitive to their unique needs by:	
1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.	3.25
1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.	3.63
1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.	3.50
1.5.4 Providing peer activities or services that are man-to-man, father-to- father.	3.33
1.5.5 Engaging male participants to greet other men at program activities.	3.86
1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.	4.00
1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.	3.75
1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.	3.86
1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	3.71
8 As a part of staff orientation and ongoing staff development, program staff regularly have opportunities to develop skills and knowledge to work effectively with diverse families. Staff	
levelopment may include:	
1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families.	4.33
1.8.2 Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.	3.88
1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.	4.11
.9 The program seeks to reflect the community and families it serves by:	
1.9.1 Building a staff that reflects the community and families served.	4.56
1.9.2 Intentionally recruiting and employing staff members who are skilled at working with the	
diversity of the families in the program.  1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups	4.13
represented in the community served.	
1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society - even if the program's community is mono-lingual, mono-ethnic	
or mono-cultural.	
10 The program supports participating immigrant and refugee families by:	
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.	3.88
1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.	3.88

## How Does CP Library Resource Center honor each family's race, language, culture, history, and approach to parenting? (Items 1.6.1 to 1.7.3)

Table 2 provides a detailed summary of the individual items/questions associated with a measure of how the CP Library Resource Center honors each family's race, language, culture, history, and approach to parenting. No Action Item was recommended by the Team as such relates to any of the items denoted in Table 2, including those Items (1.6.2 and 1.6.3) whose consensus rating was Neither Agree nor Disagree, with the average weighted Team Score approximating the agreement threshold (3.78 and 3.89 respectively). Although discussion regarding these items highlighted the respectfulness and responsiveness of program staff (at CPLRC and CP Library) to all patrons regardless of race, language, culture, history, and approach to parenting; some concern was noted that CPLRC's displays, and bulletin boards mostly reflect African American populations (the majority served at the CPLRC); these comments also applied to observations associated with Item 1.7.1 (re: ensuring program information and outreach materials are linguistically and culturally appropriate). This led to an expanded conversation on value of celebrating and sharing cultures in the form of international fairs; especially focused on those cultures and populations in the community that are minorities and/or marginalized/isolated. It was noted by Ms. Johnson that there are small populations of French, Asian, Caucasian, and Hispanic individuals and families in the service area that may be receptive (in addition to existent families serviced) to celebratory cultural events.

The above discussion was furthered in dialog related to Neither Agree nor Disagree consensus ratings for the following two items:

- 1.7. An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:
  - 1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.
  - 1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.

With respect to 1.7.1, it was noted that progress is being made at PSF to have CPLRC flyers and other outreach materials to be translated into Spanish, as well as, securing translation services/supports that can be utilized by CPLRC staff. Ms. Johnson highlighted Cone Park Library's award-winning programs that can help teach English online, in addition to other in person supports for those whose primary language is not English. Unfortunately, these services typically go underutilized but are a potential resource for community members/patrons (see "ESOL-English Classes" at https://www.aclib.us/literacy) to be linked to. Community Ambassadors spoke very favorably (and other Team members agreed such would be "tremendously helpful") about the development of a parent advisory council/committee as a benefit to address Item 1.7.2 and other functions/purposes (including program development/prioritizing, etc.) that would be beneficial to the CPLRC and CP Library (perhaps a joint/collaborative committee serving both organizations). Ms. Reed indicated that there are efforts/discussions under way at The Library Partnership Family Resource Center to pilot a parent advisory council program that could/will eventually include the Cone Park LRC. Discussion ensued, and support was provided for the idea of collaboration

between the Library and the CPLRC in developing a Parent Advisory Committee/Council, resulting in the following Action Item:

Action Item #4: Explore and consider a formal collaboration between Cone Park Library Resource Center (CPLRC) and the Cone Park Library (CPL) to establish a parent advisory council/committee.

Table 2: How Does Cone Park Library Resource Center Honor each Family's Race, Language,	Team Score
Culture, History, and Approach to Parenting?	(Weighted Average)
1.6 Program staff ensure that all families, regardless of family structure; socioeconomic, racial,	
religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in	
all aspects of the program, including volunteer opportunities.	
1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to	4.56
family decision-making of different cultural and ethnic groups.	4.50
1.6.2 The program regularly gathers information about family interests, beliefs and	
expectations, including those relating to the child's culture and language development, and	3.78
seeks to partner with families in incorporating those features into program activities and	5.76
structure.	
1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and	3.89
other parents.	3.69
1.6.4 Staff engage grandparents, elders and extended family members in discussions on	4.00
parenting and the transmission of cultural beliefs.	4.00
1.6.5 The program displays diverse families and family structures in books, posters and program	4.13
materials.	4.13
1.7 An effort is made to ensure program information and outreach materials are linguistically and	
culturally appropriate. Materials are:	
1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the	3.78
community served.	3.76
1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and	3.22
linguistically accessible to all families in the program.	3.22
1.7.3 Designed or selected to reflect the culture(s) of the community served.	4.38

## **How Does CP Library Resource Center encourage parents to manage stress effectively?** (Items 1.11 to 1.13.7)

Table 3 provides a detailed summary of the individual items/questions associated with a measure of how the CP Library Resource Center encourages parents to manage stress effectively. Of the 13 identified items, the Team scores signaled agreement with nine items (69.2%). Program staff are perceived as proactively responsive and supportive when parents/patrons demonstrate common signs of stress (see Item 1.11). Further, Team members reached consensus in their agreement on all seven items affiliated with 1.13. These items were as follows:

- 1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:
  - 1.13.1 Understanding the impact of family crises and/or loss on all family members especially children -- and how to respond appropriately.

- 1.13.2 Supporting families' immediate and long-term plans.
- 1.13.3 Talking to families about difficult issues and helping them access additional help.
- 1.13.4 Maintaining confidentiality.
- 1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.
- 1.13.6 Understanding trauma and its impact on children and how staff can help.
- 1.13.7 Other community agencies providing specialized services to families and children.

Consensus agreement on all the above items corroborates findings denoted elsewhere in the report that suggest a quality level of support, concern, respectfulness, and affirming attitude of CPLRC and CP Library staff toward parents and all patrons. Staff are seen as competent in their ability to be responsive to families in stress. These are encouraging thoughts that suggest staff and the supports provided at the CPLRC and CP Library are potential stabilizing resources for enhancing parental resilience.

[F]indings denoted...in the report...suggest a quality level of support, concern, respectfulness, and affirming attitude of CPLRC and CP Library staff toward parents and all patrons. Staff are seen as competent in their ability to be responsive to families in stress...and...are potential stabilizing resources for enhancing parental resilience.

Although the staff affiliated with CPLRC are seen as responsive to families in crisis, there was less agreement in terms of the extent to which regular opportunities are provided to relieve parental stress through:

- 1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.
- 1.12.3 Organizing spa days, exercise classes or other parent-only social activities.
- 1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.
- 1.12.5 Providing occasional childcare so parents can take a "night out," go shopping or participate in other parent-only activities.

All the above items received a consensus score of Neither Agree nor Disagree rating by the Team, although there was agreement that opportunities are provided for parents to relieve stress through links/referrals to support groups (1.12.1). The Team scores (below an average level of agreement) for Items 1.12.2 through 1.12.5 reflect a desire, especially among Community Ambassadors and patrons for opportunities for more parent-only activities at the CPLRC, resources permitting. Ms. Reed shared the difficulty with safely providing programs like some suggested in the above items during the COVID-19 pandemic. The CPLRC has reportedly planned and implemented similar parent-only programs/activities in the past (pre-COVID period), although there may have been a more heightened focus on enacting more parent-child initiatives (e.g., the creation of comfortable "snuggle up" areas in the CP Library

where were parents could read to their children) promoting attachment and/or child literacy. However, when the CP Library or CPLRC facilitated parent-focused activities/events (e.g., Help Me Help My Child, etc. that may have been parenting and child development focused), children could utilize play stations within the library while parents participated in meetings/programs. Similar arrangements could be made for children if parents were engaged in other parent-only social and informal support activities.

Many Team members identified that the COVID-19 pandemic has been hard on families within their communities with parents managing multiple responsibilities and an increase in stress levels. Concern and isolation have contributed to mental health struggles.

One Community Ambassador emphasized that some of the itemized programs/activities in 1.12.2 through 1.12.5 could be a great help to single parents and those working. Many Team members identified that the COVID-19 pandemic has been hard on families within their communities with parents managing multiple responsibilities and an increase in stress levels. Concern and isolation have contributed to mental health struggles. Children, it was noted, are also being sent to the library unaccompanied; this may be a byproduct of parents needing a break or respite from caregiving responsibilities. In this regard, these "breaks" may represent an informal act of stress relief but possibly in isolation of developing informal supports and connections with other parents. Providing activities/events like those noted in the above items, it was thought, may help relieve parental stress. Subsequently, expansion of such activities was seen as an area of value/importance in promoting parental and community resilience. All the Community Ambassadors were in consensus that programs like these would be "very helpful" but understand the necessity for restrictions during the COVID-19 pandemic. The implementation of parent-only activities may be a way of engaging parents and subsequently lead to knowledge and utilization of additional programs and supports offered by the CP LRC. These involved discussions led to the following recommended Action Item:

Action Item #5: Efforts should be made (perhaps in consultation with a newly formed Parent Advisory Council/Committee) to explore the collaborative development and implementation of possible parent-focused activities/events aimed at stress relief.

Table 3: How Does Cone Park Library Resource Center Encourage Parents to Manage Stress Effectively?	Team Score (Weighted Average)
1.11 When common signs of stress occur, program staff reach out to families proactively and	
supportively. Some commons signs of stress include: • Parents' acknowledgement of stress or	
problems • Unusual parental behavior • Repeated unexplained absences • Repeated tardiness or	
missed appointments • Divorce, separation, military deployment, family dissolution, job loss or other	4.17
family crises • Changes or fluctuations in a child's emotional state, acting out, distress, challenging	
behavior, fearful behavior, inappropriate language/behavior (such as sexual acting out), signs of abuse	
or neglect (such as bruises) or other unexplained changes in child behavior.	
1.12 The program provides regular opportunities for parents to relieve stress through:	
1.12.1 Linking parents to organized support groups.	4.50
1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.	3.63
1.12.3 Organizing spa days, exercise classes or other parent-only social activities.	3.29
1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.	3.75
1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	3.29
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:	
1.13.1 Understanding the impact of family crises and/or loss on all family members – especially children and how to respond appropriately.	4.38
1.13.2 Supporting families' immediate and long-term plans.	4.63
1.13.3 Talking to families about difficult issues and helping them access additional help.	4.38
1.13.4 Maintaining confidentiality.	4.75
1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.	4.38
1.13.6 Understanding trauma and its impact on children and how staff can help.	4.50
1.13.7 Other community agencies providing specialized services to families and children.	4.63

# How Does CP Library Resource Center support parents as decision-makers and help build decision-making and leadership skills? (Items 1.14.1 to 1.22.4)

Table 4 is expansive and provides a detailed summary of the 41 individual items/questions associated with a measure of how the CP Library Resource Center support parents as decision-makers and help build decision-making and leadership skills? No action items were recommended for items 1.14.1 through 1.17.4 (21 items). Among these 21 items there was only one for which the Team Score was slightly below the agreement threshold of 4.0 with select members indicating their rating of Neither Agree nor Disagree was influenced by a lack of knowledge about the item in question. Responses/Team Scores associated with 1.15.1 through 1.15.5 highlight a level of respect and understanding afforded parents by staff in actions that reinforce parental authority in dealings and interactions with their children. Items affiliated with 1.16.1 through 1.17.4 relate to applicable parents/families when activities, supports, and (mostly) referrals to community partners are made where screenings, assessments, and service plans are completed. Collectively, these findings reinforce a perceived perspective that CPLRC staff interactions and efforts are perceived as informed, responsive, respectful, and in the best interests of strengthening families through supportive engagement and promotion of parental authority/role as

decision makers. The quality and level of support for parents is clearly manifested in the Team Scores associated with Items 1.18.1 through 1.18.5 where the Team agreed that CPLRC staff and resources (across all activities associated with each item) clearly support a parent's personal education and career goals.

Collectively, these findings reinforce a perceived perspective that CPLRC staff interactions and efforts are perceived as informed, responsive, respectful, and in the best interests of strengthening families through supportive engagement and promotion of parental authority/role as decision makers. The quality and level of support for parents is clearly manifested... CPLRC staff and resources...clearly support a parent's personal education and career goals.

Particular attention and discussion focused on Item 1.18.5 (a means of supporting a parent's education and career goals); namely: *Providing formal and/or informal parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent leadership development.* The team was in full support of inviting both professionals and individuals with lived experience to come and provide advice, trainings, and encouragement to peers/fellow patrons and parents. These thoughts extended into a broader discussion (led by community partners) of existing educational and career supports within the community that may be underutilized. Ms. Johnson noted that the CP Library provides a series of links to online programs and supports such as tutor.com and lynda.com (focuses on professional development skills) that go unused/underutilized in addition to other in-person (education and career) services/supports offered at the CP Library. Many of the community ambassadors were not aware—and suggested other patrons were not aware—of these cited services/supports available at or through the CP Library. An increased awareness and engagement regarding these resources, it was thought, may increase their utilization.

Engagement resources may be limited; however, key staff at both the CPLRC and CP Library were seen as important assets for engagement. In reference to CPLRC, it was noted by a Community Ambassador that "Ms. Erica [Cone Park Library Resource Center Manager] is the biggest draw we have." Praise also existed for Ms. Johnson (at the CP Library) and other staff. Ms. Johnson has been proactive in reaching out to community members and highlighted that public relations resources within the library system may be a resource for helping develop a unique engagement strategy for the targeted community/neighborhood for promoting both the CP Library and CPLRC programs, activities, and supports. In any regard, the need for a better engagement and dissemination strategy that includes/builds upon parent advice and feedback is needed. Toward this end, it was thought that a group like a parenting advisory council could be invaluable in helping both the CPLRC and the CP Library in designing programing for the community and enhancing "buy-in" of select households and patrons (not within walking distance of the CPLRC) sometimes hesitant to venture to both the CPLRC and the CP Library since it's "...out of the way" for many. Subsequently, the following Action Item was recommended:

**Action Item #6:** Develop a coordinated and collaborative strategy for engagement and dissemination of program/service/activity information that is relatable to local families with the goal of creating buy-in and enhancing the utilization of the CPLRC and CPL.

Among the sixteen items represented in statements 1.19.1 through 1.22.4, Team members were in agreement that CPLRC provided opportunities, support, and promoted participation of parents and families as potential leaders for 11 (or 68.8%) circumstances/situations. More specifically, consensus agreement existed for the following statements:

- 1.19 The program provides opportunities and support for families to serve as leaders and decision-makers by:
  - 1.19.1 Providing opportunities for families to volunteer and contribute to the program.
  - 1.19.2 Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles
  - 1.19.3 Asking families for regular input on programmatic decisions.
  - 1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).
- 1.20 The program promotes participation in activities by:
  - 1.20.1 Addressing topics, issues and skills that families identify as important to them.
  - 1.20.3 Providing child care during trainings or workshops.
  - 1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.
- 1.21 The program helps to support the continued development of parent leaders by supporting:
  - 1.21.1 Personal growth -- such as attending conferences or special events and collecting and sharing information of interest to other parents.
  - 1.21.2 Leadership development trainings and mentoring activities.
- 1.22 The program helps to support parents' opportunities for leadership in community change by:
  - 1.22.1 Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.
  - 1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.

Collectively, the above ratings suggest that CP Library Resource Center adopts a perspective and practices that reinforce the value of parents as decision makers and potential leaders for building resilience within households within the community. No action items were suggested for any of the above noted items.

CP Library Resource Center adopts a perspective and practices that reinforce the value of parents as decision makers and potential leaders for building resilience within households within the community.

Consensus agreement did not exist for the following statements, instead consensus suggested a Neither Agree nor Disagree rating:

- 1.19.4 Asking families for input into staff hiring and training.
- 1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).
- 1.21.3 Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).
- 1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.
- 1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.

Item 1.20.2 became a focal point of an involved discussion that led to an identified Action Item for CPLRC (see below). More specifically, much of the team thought more should be done at the CPLRC to engage with fathers and grandparents and/or provide supports for other caregivers. The majority of Community Ambassadors felt that many kids don't have father role models or male mentors and/or there are limited opportunities/activities structured for father-child interaction/engagement within the community served. These comments build upon an early focus and concerns associated with Action Item #2. Movie events for adults and children and outside activities were suggested as possible opportunities for engagement. Both CPLRC and CP Library have access to a large outdoor space and athletic facilities (including a track). It was noted that the summer camp uses this space, and the area has been used for community dinners, the fall festival, and select events (including visits/demonstrations by a track coach) in the past. The use of sports activities like a formal or informal track or basketball league could be a "pull" for additional family members like fathers and care givers along with their children. It was suggested that the outside recreational space could be better used for engagement and communitybased activities (sports, family-health activities, etc.) and serve as a link to other CPLRC and CP Library services and supports. Other suggested activities build upon activities in the past or at other RCs that were seen as engaging, including (but not limited to): an 8-12-week educational health/well-being program (focused on healthy eating habits, body conditioning, physical well-being, etc.) coordinated by a representative from the University of Florida, story board walks at the track and associated field, community walks/exercise every morning for 30 minutes, etc. There was agreement that exploration of different options should be made but in consultation with community members/patrons/parents: "We need to know what they want!" highlighted one Community Ambassador. Toward this end, there is a need to engage parent leaders, get meaningful feedback, and reinforce those parents and community members that assist with program and activity development. These thoughts are represented in the following recommended Action Item:

Action Item #7: Explore how outdoor resources can be utilized for individual and health-based activities targeted towards caregivers. Consider (for example) the development of a regular program such as a formal or informal track league.

Table 4: How Does Cone Park Library Resource Center Support Parents as Decision-Makers and Help Build Decision-Making and Leadership Skills?	Team Score (Weighted Average)
1.14 Staff receive program support when working with families under stress through:	
1.14.1 Acknowledgement and support for their efforts from supervisors and administrators.	4.14
1.14.2 Opportunities to process their own emotional reactions with appropriate support.	4.14
1.14.3 Access to a mental health consultant.	4.43
1.14.4 Time off if needed.	4.43
1.15 Staff reinforce parental authority by:	
1.15.1 Respecting parents' directions and/or decisions about their children.	4.13
1.15.2 Learning about parents' expectations and limits for their children.	4.00
1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.	4.25
1.15.4 Understanding the parenting and child behavior norms of the parent's culture.	4.13
1.15.5 Being careful not to contradict a parent in front of his or her child or other children.	4.38
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	
1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.	4.13
1.16.2 Parents are informed about the confidentiality policy and what it means to them.	4.00
1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.	3.88
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.	4.25
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.	4.25
1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.	4.25
1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	4.13
1.17 Parents and staff develop family plans together that:	
1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.	4.38
1.17.2 Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.	4.38
1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.	4.50
1.17.4 Are updated regularly.	4.13

Table 4 (Continued): How Does Cone Park Library Resource Center Support Parents as Decision-Making and Leadership Skills?	Team Score (Weighted Average)
1.18 The program supports a parent's personal education and career goals by:	<u>,                                     </u>
1.18.1 Referring families to educational and career resources (e.g., GED programs, adult	
education, ESL classes, employment opportunities, workplace literacy, parenting skills, job	4.38
training, job preparation skills).	
1.18.2 Forming partnerships with nearby educational resources, including higher education	4.63
institutions, to support families' learning interests and educational goals.	4.03
1.18.3 Linking families with community resources for internships, volunteer and leadership	
activities and other experiences that expand parents' knowledge and skills and build on their	4.63
career interests.	
1.18.4 Inviting past program parents and community volunteers to share their educational and	4.14
career experiences with families.	
1.18.5 Providing formal and/or informal parent mentoring opportunities (potentially with staff,	
alumni parents/families, elders and/or professionals in the community) to serve as a resource	4.29
and support for parent leadership development.	
1.19 The program provides opportunities and support for families to serve as leaders and decision-	
makers by:	4.50
1.19.1 Providing opportunities for families to volunteer and contribute to the program.	4.50
1.19.2 Encouraging and supporting parents in becoming active members of the program's	4.25
governing/advisory groups and in taking on leadership roles	4.42
1.19.3 Asking families for regular input on programmatic decisions.	4.13
1.19.4 Asking families for input into staff hiring and training.	3.50
1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group	4.13
evaluation meetings).  1.20 The program promotes participation in activities by:	
1.20.1 Addressing topics, issues and skills that families identify as important to them.	4.38
1.20.2 Designing activities to address interests of different family members (e.g., fathers,	4.36
mothers, other family members).	3.88
1.20.3 Providing child care during trainings or workshops.	4.17
1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise	7.17
participate.	4.00
1.21 The program helps to support the continued development of parent leaders by supporting:	
1.21.1 Personal growth such as attending conferences or special events and collecting and	
sharing information of interest to other parents.	4.13
1.21.2 Leadership development trainings and mentoring activities.	4.00
1.21.3 Training opportunities for advocacy and civics (e.g., how local and state government	
works, how to foster change).	3.88
1.22 The program helps to support parents' opportunities for leadership in community change by:	
1.22.1 Hosting or linking parents to community events that help raise awareness of emerging	4.25
community needs and assets.	4.25
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and	4.50
community needs.	4.50
1.22.3 Ensuring that local, state and federal policy information is discussed at staff	3.77
meetings/advisory council meetings and relevant information is shared with families.	5.77
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national	3.88
level.	5.00

Table 5: How Does Cone Park Library Resource Center Help Parents Understand How to Buffer Their Child During Stressful Times?					
1.23 Staff receive training on talking with parents about helping children in times of family crisis.	4.00				
1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including: • How stress impacts the child's brain, behavior and development • Recognizing the signs of stress in children • How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly • The important role that parents and caring adults play in buffering children during stressful times	4.28				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.	4.57				

How Does CP Library Resource Center help parents understand how to buffer their child during stressful times? (Items 1.23 to 1.25).

No Action Items were suggested, or extended discussion ensued for items denoted in Table 5 as it was thought denoted efforts highlighted by the Partnership for Strong Families to provide continued and targeted training (including for training items associated/highlighted in Table 1 and 2) on these topic areas were sufficient for the future. In any regard, the importance of all staff to receive training and support to enhance their ability to help parents meet the needs of their children during stressful time was reinforced. Acknowledge with other Gainesville SFSA RC Teams, an itemization of any such training would be of value in any subsequent SFSA reviews.

#### Fidelity of Parental Resilience Services and Supports to CSSP Protective Factor

As denoted earlier, the SFSA Team identified the weighted average Team score as the consensus measure for each item associated with the Parental Resilience assessment questions. Following the development of a consensus rating, individual item scores were converted —in keeping with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014)¹ method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree or Disagree, and Not Applicable. Within the Tables denoted in this report, any green shaded cells (Agree and Strongly Agree) reflect a score of 1 and any yellow (Neither Agree or Disagree), red (Disagree and Strongly Disagree), or no shade (Not Applicable) reflects a score of 0 (zero). As observed, there were no red or no shade cells in each table. These scores were summed for the Parental Resilience Protective Factor where scores <50% of the total score possible represent low fidelity, 50-74% represent moderate fidelity, and >75% possible scores represent high fidelity. The aggregate fidelity score from all tabled findings is 71 (of a possible score of 97) or 73%, suggesting that the services and supports associated with the

<sup>&</sup>lt;sup>1</sup> Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

Tarr, J., Harnar, M. A., & Ahsan, N. (2014). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Unpublished whitepaper presented at the National Association for the Education of Young Children's annual conference in Dallas, TX.

Parental Resilience Factor were implemented with moderate fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework. The series of action items recommended by the CPLRC SFSA Team are appropriately targeted to enhance the fidelity score of provided supports and services addressing parental resilience.

## Appendix A

### STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR COMMUNITY-BASED PROGRAMS



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### ABOUT THE SELF-ASSESSMENT

The Program Self-Assessment helps programs determine how well they are implementing strategies to strengthen families. The Self-Assessment is based on findings from a national study that identified exemplary programs across the country. It allows all programs to compare their practices with those of the exemplary programs and identify areas for improvement. The Self-Assessment outlines how the protective factors can be supported through small but significant changes in program practice. It is written for programs committed to working with and supporting the families they serve. Versions of the Self-Assessment are available for:

- · Center-based early care and education programs
- · Family child care settings
- Home visiting programs
- Community-based programs such as family resource centers

While there is significant overlap across these different versions, each also contains unique strategies specific to each setting.

The Program Self-Assessment materials in this document are applicable to community-based programs serving children and families. The concrete actions described in the self-assessment can be carried out in a variety of settings such as family support and parenting education programs, health care settings, community centers and others. The strategies described can be implemented without creating new staff positions, making significant changes to existing facilities or raising additional financial resources.

#### **ORGANIZATION**

The Self-Assessment outlines practices used by exemplary programs to support families, organized around five protective factors:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- · Concrete Support in Times of Need
- Social and Emotional Competence of Children

Each section starts with a brief description of the protective factor and core strategies for building that protective factor. Self-Assessment items are organized under each of these core strategies. In this version of the Self-Assessment there

is also a special section about <u>Responding to Possible Child</u> <u>Abuse or Neglect</u>.

#### **COMPLETING THE SELF-ASSESSMENT**

While the Self-Assessment forms may appear long at first glance, most sections have fewer than ten items. To make the process easier, the forms address specific practices; thus, multiple practice examples often appear under a single strategy. While the time it takes to complete the Self-Assessment will vary from program to program and from form to form, on average, each form can be completed in approximately 90 minutes.

CSSP strongly recommends that programs create a Self-Assessment team that represents a number of different perspectives at your program, including:

- Administrative staff and/or program director
- · Direct service staff
- Parents who participate in the program (or whose children participate in the program)

Including a diverse group of participants in the Self-Assessment evaluation process allows programs to benefit from a large variety of viewpoints and perspectives. Once a team has been identified, the process begins by following the steps outlined below.

First, each member of the team should fill out the Self-Assessment forms individually.

Next, the team should convene to share and compare assessments. Teams should use this time to discuss rating results that differ among various team members, giving each person an opportunity to describe why they rated the practice the way they did and—if appropriate—to provide an example. Once everyone has had a chance to speak, all team members should be given an opportunity to re-rate the practice. It is not necessary for the entire team to come to consensus on every practice, but it is important that all team members come to understand each other's perspectives and that a final decision is made on how to rate the item based on broad input.

The consensus version of the Self-Assessment can be entered online at <a href="www.mosaic-network.com/gemslive/cssp/">www.mosaic-network.com/gemslive/cssp/</a>. Completing the Self-Assessment online allows the program to print reports showing strengths and areas to focus on improvement, as well as to link to parent and staff surveys.



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CREATING AN ACTION PLAN**

Once all team members have re-rated the practices, the team should identify areas where the program scored highly. Next, the team should create a sustainability plan to keep these areas strong. In developing a sustainability plan for each successful area, teams should be sure to specify:

- · Key reasons for success in the area
- What needs to be done to ensure continued strength in the area
- Who will be responsible for maintaining successful outcomes in the area

Next, the team should highlight practice areas that a majority of the team rated poorly. While we encourage programs to work on each of these areas eventually, the team can begin by deciding whether each poorly rated practice should be addressed (1) immediately, (2) over time, or (3) not at all. Again, teams should allow time for discussion and

reevaluation if/when team members disagree on practice ratings. When a majority of team members identify items that should be addressed immediately, teams should brainstorm plans to improve associated area outcomes. Teams should be sure to specify:

- The expected results
- All required resources (including staff hour costs)
- · A timeline for achieving the desired results
- · Who is responsible for each action step
- Check-in points for monitoring implementation progress
- How and when longer term action steps will be addressed/implemented

#### PARENTAL RESILIENCE

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

visits are unexpected.

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		45.	Strongly agi	Wifes 3.	. Weither age	ge not disaftee	jee Stangh di	sages Comments
	d affirm the central role of parents in their teraction with families including policies, ication.							
1.2 The program has multiple avenues for regular communication with families.	1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.							
	1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.							
	1.2.3 Staff regularly ask parents about their observations of their child.							
1.3 All family members are made to feel welcome:	1.3.1 Someone is available to greet families when they come in.							
	1.3.2 Staff are respectful even when family							



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?  5: Struct Halle 3: Rettle 2: Rettle 2: Rettle 2: Rettle 2: Rettle 2: Rettle 2: Rettle 3:										
		49.	, K	'5	'''		, A	Comments		
1.4 Staff develop mutually respectful relationships with all family members by:	1.4.1 Taking time to get to know family members individually, by name.									
	1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.									
	1.4.3 Regularly inquiring about what is happening in their lives.									
	1.4.4 Providing emotional support and encouragement.									
	1.4.5 Sharing appropriate information about themselves.									
	1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.									
	1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.									
	1.4.8 Using intake forms, applications and surveys that are gender-neutral.									



PARENTAL RESILIENCE: SELF How do programs demonstra		\(\si\)	Strongly agget	es 3: Heiner	gee Indiscate	es strongly disagn	ce Comments
1.5 Staff show that they value fathers and are sensitive to their unique	1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.						
needs by:	1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.						
	1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.						
	1.5.4 Providing peer activities or services that are man-to-man, father-to-father.						
	<b>1.5.5</b> Engaging male participants to greet other men at program activities.						
	<b>1.5.6</b> Establishing ongoing partnerships with community resources that provide services to fathers.						
	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.						
	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.						
	<b>1.5.9</b> Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS  How do programs honor each family's race, language, culture, history and approach to parenting?			A. Here 3. N	teither agree Inchieses	gee Met Application	
1.6 Program staff ensure that all families, regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.  1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.  1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.  1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.  1.6.5 The program displays diverse families and family structures in books, posters and program materials.					Comments
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.  1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.  1.7.3 Designed or selected to reflect the culture(s) of the community served.					



					Meither agri	or disagr	*/ */	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		Strongly ag	See /	, agr	e ne	Strongly die	a thicaite
How do programs demonstrat	e that parents are valued?	6	Strong!	Agree 3	Heither O.	Disagit.	Strong!	A Applie
		,,						Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	<b>1.8.1</b> Inviting partner organizations to provide workshops for staff on working with diverse families.							
ties to develop skills and knowledge to work effectively with diverse families. Staff development may include:	<b>1.8.2</b> Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.							
	1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.							
1.9 The program seeks to reflect the community and families it serves by:	<b>1.9.1</b> Building a staff that reflects the community and families served.							
rammes it serves by.	<b>1.9.2</b> Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.							
	1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.							
	1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program's community is mono-lingual, mono-ethnic or mono-cultural.							
1.10 The program supports participating immigrant and refugee families by:	1.10.1 Ensuring that staff are knowledge- able about immigrant and refugee families' unique challenges and can help address them in a respectful manner.							
	1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.							



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS  parents to manage stress effectively?	8.	Hilligh agige	Bee 3: Hei	2:Di	har disagree	Hot Hot	gree haricalite	
								Comment	s
proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, militar other family crises Changes or fluctuations in a challenging behavior, fearfu	ences ed appointments y deployment, family dissolution, job loss or a child's emotional state, acting out, distress, il behavior, inappropriate language/behavior signs of abuse or neglect (such as bruises) or								
1.12 The program provides regular opportunities for parents to relieve stress	1.12.1 Linking parents to organized support groups.								
parents to relieve stress through:	1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.								
	1.12.3 Organizing spa days, exercise classes or other parent-only social activities.								
	1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.								
	1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.								



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	5; Stud	N. Alies 3	. Heither 241	dieagles 1.5	stoney diss	Applicable Comments
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:	1.13.1 Understanding the impact of family crises and/or loss on all family members— especially children—and how to respond appropriately.						
	1.13.2 Supporting families' immediate and long-term plans.						
	1.13.3 Talking to families about difficult issues and helping them access additional help.						
	1.13.4 Maintaining confidentiality.						
	1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.						
	1.13.6 Understanding trauma and its impact on children and how staff can help.						
	1.13.7 Other community agencies providing specialized services to families and children.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS  How do programs support parents as decision-makers and help build decision-making and leadership skills?		5; Strongy agee 3; Weither agee Intridicate to 1; Strongy disable Comments							
1.14 Staff receive program support when working with families under stress through:	<b>1.14.1</b> Acknowledgement and support for their efforts from supervisors and administrators.								
	<b>1.14.2</b> Opportunities to process their own emotional reactions with appropriate support.								
	1.14.3 Access to a mental health consultant.								
	1.14.4 Time off if needed.								

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS  How do programs support parents as decision-makers and help build decision-making and leadership skills?			5; Studely ages 3; Neither ages utilisages study histoges for the forments						
1.15 Staff reinforce parental authority by:	1.15.1 Respecting parents' directions and/ or decisions about their children.								
	1.15.2 Learning about parents' expectations and limits for their children.								
	1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.								
	1.15.4 Understanding the parenting and child behavior norms of the parent's culture.								
	1.15.5 Being careful not to contradict a parent in front of his or her child or other children.								



					,		,	, , ,
How do programs support par	PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs support parents as decision-makers and help build decision-making and leadership skills?			Wifes 3.	Meither agr	ee nordisali	Strongly dis	gage e
build decision-making and le	adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Still A:	Values 3.	Mer 2	Dist 1.	Still	AR
								Comments
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							
	<b>1.16.2</b> Parents are informed about the confidentiality policy and what it means to them.							
	<b>1.16.3</b> Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.							
	1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.							
	1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.							
	<b>1.16.6</b> All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.							
	1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
1.17 Parents and staff develop family plans together that:	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.							
	<b>1.17.2</b> Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.							
	1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.							
	1.17.4 Are updated regularly.							



					, ,	,	, ,	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS			,	Weither 325	e nordisagi	88	agles .
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	5	Strongly age	Agiee 3:	Weither age	disagree 1.	Strongly die	L. Andricate
								Comments
1.18 The program supports a parent's personal education and career goals by:	1.18.1 Referring families to educational and career resources (e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting skills, job training, job preparation skills).							
	1.18.2 Forming partnerships with nearby educational resources, including higher education institutions, to support families' learning interests and educational goals.							
	1.18.3 Linking families with community resources for internships, volunteer and leadership activities and other experiences that expand parents' knowledge and skills and build on their career interests.							
	<b>1.18.4</b> Inviting past program parents and community volunteers to share their educational and career experiences with families.							
	1.18.5 Providing formal and/or informal parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent leadership development.							
1.19 The program provides opportunities and support for families to serve as leaders	<b>1.19.1</b> Providing opportunities for families to volunteer and contribute to the program.							
and decision-makers by:	<b>1.19.2</b> Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles.							
	1.19.3 Asking families for regular input on programmatic decisions.							
	<b>1.19.4</b> Asking families for input into staff hiring and training.							
	1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).							



					,	,	,	, , ,
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		di	*	, are	disagles 1.	8º /	and the state of t
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Strongly agi	Majee 3:	Meither as	disaglee	Strongly dis	A Philicipe
								Comments
<b>1.20</b> The program promotes participation in activities by:	<b>1.20.1</b> Addressing topics, issues and skills that families identify as important to them.							
	<b>1.20.2</b> Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).							
	<b>1.20.3</b> Providing child care during trainings or workshops.							
	1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.							
1.21 The program helps to support the continued development of parent leaders by supporting:	<b>1.21.1</b> Personal growth—such as attending conferences or special events and collecting and sharing information of interest to other parents.							
	1.21.2 Leadership development trainings and mentoring activities.							
	<b>1.21.3</b> Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).							
1.22 The program helps to support parents' opportunities for leadership in community change by:	<b>1.22.1</b> Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.							
comments change by	1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.							
	1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.							
	<b>1.22.4</b> Connecting parents to groups that inform and shape policy at the local, state or national level.							



How do programs help parents understand how to buffer their child during stressful times?

lisatie	/
attee attend a lisagee one	/
5: Stringth agges 3: Meither agges not lie agges 1: Stringth his agges 3: Meither agges 1: Stringth his agges 1	
Comm	16

				Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.				
<ul> <li>1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including:</li> <li>How stress impacts the child's brain, behavior and development</li> <li>Recognizing the signs of stress in children</li> <li>How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly</li> <li>The important role that parents and caring adults play in buffering children during stressful times</li> </ul>				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.				



## STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **SOCIAL CONNECTIONS**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- · Help families value, build, sustain and use social connections
- · Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

#### 3. Neither agree furthisagles 1. Strongly disagree 5: Stringly agree SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS Not Applicable How do programs help families value, build, sustain and use A: Agree social connections? Comments 2.1 Families have access to a comfortable space where they can meet informally **2.2** The program provides 2.2.1 Formally, through parent support groups (including those with both broad and opportunities for families with similar interests, chilnarrow focuses). dren's ages and/or circumstances (such as those with 2.2.2 Through parent mentoring and twins, parents of infants, matching for one-on-one support. parents with special-needs children or parents who 2.2.3 Informally, by introducing parents to speak the same language) to one another. connect with one another:



				,	, ,	,	, ,
SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS  How do programs help families value, build, sustain and use social connections?			Hillight affect	3. Neither 285	e nat disable e	ng Angli	alle
							Comments
2.3 The program provides opportunities for families to socialize and foster a sense	2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.						
of community by organizing/ hosting:	2.3.2 Periodic events like coffee breaks and breakfasts.						
	2.3.3 Celebrations, graduations and holidays.						
	2.3.4 Field trips and community events.						
	<b>2.3.5</b> Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.						
	2.3.6 Affordable family activities.						
	<b>2.3.7</b> Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.						
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.						
	ositive relationships between families and nal social events where staff can interact with						
	ects families to resources to strengthen ., healthy marriage skills, communication skills,						



					/ /		
SOCIAL CONNECTIONS: SELF- How do programs help famili use social connections?		\s.	A: Agre	e 3: Heitlet 2	7. headee	s Strangy disagn	e k
							Comments
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:	<b>2.6.1</b> Calling, sending notes or making home visits inviting them to program activities.						
ipate iii program activities by.	<b>2.6.2</b> Connecting with them on social media platforms through program pages or groups.						
	<b>2.6.3</b> Offering support with transportation, child care or other barriers to participation.						
	<b>2.6.4</b> Making special efforts to connect them with other families who share similar interests.						
	2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.						
	2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.						
	v isolation or reluctance to participate can due to differences in race, language, culture, ntation, ability, etc.						



SOCIAL CONNECTIONS: SELF-			Strongly allee		age age at the age of	gree his strught it	agles agles and a special agreement to the special agreement agreement to the special agreement agreement to the special agreement agreement agreement agreement agreement
How do programs create an i	inclusive environment:	45.	Strongly A: Ag	3: Ne.	2:0158	'Stre M	J.A.
2.8 The program and its staff	2.8.1 Welcoming all families.						Comments
model positive social skills and community building by:	2.8.2 Inviting all families to program parties or social events.						
	2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.						
	2.8.4 Helping to resolve conflicts among participants.						
	2.8.5 Promoting families' understandings of different cultures and backgrounds.						
	2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.						
<b>2.9</b> The program helps staff learn how to reduce stereotyping and bias by:	<b>2.9.1</b> Modeling inclusive behavior among the staff.						
storedtyping and odd by.	2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).						
	<b>2.9.3</b> Providing training and support for helping families and children resolve conflicts effectively.						
	<b>2.9.4</b> Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).						
	2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.						
	<b>2.9.6</b> Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.						
	o reach out and engage other families, includ- d members, in the program community.						



SOCIAL CONNECTIONS: SELF- How do programs facilitate n		\dots	Strangty age	White 3.	Weither agre	disagles 1.	ee Strongly dis	agies Andrealis
								Comments
(e.g., phone trees, car pools, bab	oarents to set up mutual support mechanisms bysitting co-ops, play groups, social media an communicate with one another).							
<b>2.12</b> There is time built in to proshare with each other.	ogram activities for parents to network and							
2.13 Parent-organized social/educational events and activities are encouraged and supported by:	<b>2.13.1</b> Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).							
	2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.							
the immediate neighborhood or I	eek opportunities to build good relations within ocal community (e.g., inviting neighbors to d resources for special projects, building rela-							
2.15 The program encourages s	staff and families to participate together in ocacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	with issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, pport).							
1 0	rents to local opportunities that promote family at the library, parent-child book groups, cultural							

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase. Programs can help parents increase their knowledge of parenting and child development. Programs should:

- · Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

#### 3. Neither agree for libraries 1. Strongly lie agree KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: 5. Strongly agree Not Applicable **SELF-ASSESSMENT ITEMS** A. Agree How do programs model developmentally appropriate interactions with children? **Comments** 3.1 Staff demonstrate a 3.1.1 Staff model developmentally strong understanding of child appropriate responses to children's behavior, development: interests, temperaments and need for exploration and learning. 3.1.2 Staff understand and can explain the development arc for young children. 3.1.3 Staff can explain to parents how various activities and interactions support their child's development. **3.1.4** Staff participate in regular training that updates their knowledge on advances in understanding child development. 3.2 Staff work collaboratively **3.2.1** Staff develop an ongoing partnership with parents to coordinate with parents to ensure regular communication, common understanding of the support for children's development: child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage. 3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development. 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs model developmentally appropriate interactions with children?				Strongly as	Jee Sinding	Meither agre	disagles 1.	ee Strongly dis	sage to the sage of the sage o	
									Comments	
	<b>3.4</b> When staff talk with parents about discipline, they:	<b>3.4.1</b> Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.								
		<b>3.4.2</b> Provide information on ageappropriate positive discipline techniques and reasonable expectations.								
		<b>3.4.3</b> Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.								
		<b>3.4.4</b> Encourage parents to discuss behavior challenges they may have at home.								
		<b>3.4.5</b> Connect parents to other parents who can share or model positive parenting approaches.								
		<b>3.4.6</b> Recognize different parental and cultural approaches to discipline and discuss them with parents.								
		<b>3.4.7</b> Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.								



KNOWLEDGE OF PARENTING A			u ag	es /	Meither agre	e nor disage	Strongly dis	aggee in the
How do programs provide inf parenting and child develop		89.	Strongly age	Agree 3:	Meither 2:	disagree 1.	Strongly	L. Andicate
								Comments
	s are offered as one among several strategies for f parenting and child development.							
<b>3.6</b> Parenting education classes are offered in a way that reflects best practices in the field, including:	<b>3.6.1</b> Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.							
	<b>3.6.2</b> Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.							
	<b>3.6.3</b> Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	<b>3.6.4</b> Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).							
	<b>3.6.5</b> Classes and programs are delivered by staff with appropriate training and credentials for the program.							
	<b>3.6.6</b> Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	<b>3.6.7</b> Child care is offered while parents are in classes.							
	<b>3.6.8</b> Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	<b>3.6.9</b> If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
<b>3.7</b> Information is provided to p to expect of their children at eac	arents on stages of child development and what h stage.							



KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	ormation and resources	(s, 5)	Jonely Sel	Prince 3:	Meither agre	a not disagle	Strongly die		//
<b>3.8</b> Parenting information and materials used by the	3.8.1 Are available in the language spoken by program families.							Comm	ents
program are culturally and linguistically appropriate, and:	3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.								
	<b>3.8.3</b> Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.								
<b>3.9</b> Parenting and child development information is	<b>3.9.1</b> Books and videos in a resource library.								
provided through multiple avenues to meet diverse learning styles, including:	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	<b>3.9.4</b> Regular postings on bulletin boards in public spaces.								
	3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.								
	<b>3.9.6</b> Posting of information and links on a program website and/or social media pages accessed by participants.								
<b>3.10</b> Parents are connected to a variety of resources	<b>3.10.1</b> Parent education groups (including fatherhood groups).								
that can help them explore different ways of parenting, such as:	3.10.2 Counseling.								
	3.10.3 Support groups.								
	3.10.4 Mentors/coaches.								
	<b>3.10.5</b> Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.								



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

• Planning for the child's needs after birth (e.g, car seats, cribs).

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide into on parenting and child devel	formation and resources	\$ ·	Strongly as	Agge 3:	Meither 321°	e nor disagle	Strongly dis	a de la companya del companya del companya de la co	
								Comments	
to the needs of parents in differe  Different parenting styles of  Needs and concerns of first  Needs of parents who are parents  Noncustodial parents	mothers and fathers and the strengths of each								
<b>3.12</b> Staff provide "just in time" parenting tips and discuss parenting issues with parents when:	<b>3.12.1</b> Child behavior or development issues arise (e.g., potty training, changes in eating or sleeping patterns, separation issues, aggressive behavior).								
	<b>3.12.2</b> A parent appears to be frustrated or stressed and in need of support.								
	<b>3.12.3</b> A parent appears to be having difficulty relating to or communicating with their child.								
the program provides opportunit  Prenatal and infant health at  The birth process and what  The needs of postnatal wom	nd development to expect								



					,	, ,	, ,	, ,
KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS How do programs encourage explore parenting issues and	65-	Strongly agr	Agree 3:	Heither 25te	jisagiee 1.	Strong Wilson		
								Comments
<b>3.14</b> Parents and staff work together to design and organize opportunities for parent	<b>3.14.1</b> Cultural/ethnic expectations and practices about parenting.							
led discussions (such as a Community Café or Parent	<b>3.14.2</b> Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	<b>3.14.4</b> How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	<b>3.14.5</b> Being especially supportive at the time that special needs are initially identified.							
	<b>3.14.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.							
	<b>3.14.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.							



How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

8	Strongly ar	ies 3:	Weither age	e nor disagree	strongly dis	agies Applicab		/
						(	Commen	its

					Comments
<b>3.15</b> Staff recognize and support the parenting challenges experienced by	<b>3.15.1</b> Regularly checking in with parents about parenting issues.				
families with children who have special needs by:	<b>3.15.2</b> Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.				
	<b>3.15.3</b> Supporting parents in understanding appropriate developmental expectations for their children with special needs.				
	<b>3.15.4</b> Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.				
	<b>3.15.5</b> Being especially supportive at the time that special needs are initially identified.				
	<b>3.15.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.				
	<b>3.15.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.				



KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs address pa strength-based perspective?		f; Suf	A; Age	s 3: Weither 2	7: headles 1:	strongly disco	Ege <sup>®</sup>	
		/ '3 /	<u> </u>	-5/			Comment	•
<b>3.16</b> Home visitors share their observations of children with parents to help the parents recognize:	<b>3.16.1</b> Their children's unique assets, temperament, personality, communication styles and behavioral cues.						Comment	.5
parents recognize.	<b>3.16.2</b> Their children's growth and development patterns.							
	<b>3.16.3</b> Their children's positive social skills and developmentally appropriate emotional behavior.							
	<b>3.16.4</b> Their children's independence and abilities.							
	<b>3.16.5</b> Activities families can use to enhance their children's skills and development.							
	<b>3.16.6</b> Signals that development may not be on track.							
<b>3.17</b> Staff reinforce positive parent-child interactions by:	<b>3.17.1</b> Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.							
	<b>3.17.2</b> Sharing something positive with parents about their children's behavior and development.							
<b>3.18</b> Staff proactively and respectfully address concerns about parenting techniques or behavior by:	<b>3.18.1</b> Asking open-ended questions to understand the behavior from the parent's perspective.							
репачи ву:	<b>3.18.2</b> Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.							
	<b>3.18.3</b> Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.							
	<b>3.18.4</b> Connecting parents to resources and supports that may help to address parenting issues.							



## STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CONCRETE SUPPORT IN TIMES OF NEED**

All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- · Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

## 3. Neither agree furt lisagues 1. Strongly liesque Not Applicable **CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS** A: Agree How do programs respond immediately when families are in crisis? **Comments** 4.1 Parents are encouraged 4.1.1 The fact that staff listen, show conto turn to staff in the event of a cern and share their own personal challengcrisis through: es as appropriate in informal conversations and regular interactions. 4.1.2 Materials regularly provided to participating families. **4.1.3** Information on which staff members can help families with particular issues.



					,	,	,	, , ,
					Meither 22:	or disagr	* /	
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		24	88	agre	enu	die	agie
How do programs respond im are in crisis?	mediately when families	6.	Strongly age	Agree 3:	Weither as	disagree 1:	Strongly die	L. Andicate
								Comments
<b>4.2</b> Staff proactively respond to signs of parent or family distress by:	<b>4.2.1</b> Expressing concern and offering help in line with the program's philosophy and resources.							
	<b>4.2.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.2.3</b> Making space available for staff to meet with parents privately.							
	<b>4.2.4</b> Ensuring that parents can talk with staff members with whom they are the most comfortable.							
	<b>4.2.5</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.2.6</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).							
<b>4.3</b> When a family is experiencing extreme difficulties or crisis:	<b>4.3.1</b> At least one staff member with a close relationship with the family reaches out to the family proactively.							
	<b>4.3.2</b> If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.							
	<b>4.3.3</b> The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.							
	<b>4.3.4</b> The program has flexible hours of operation to accommodate families outside of regular business hours.							
	<b>4.3.5</b> If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.							
	<b>4.3.6</b> Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.							



						,	,	, , ,
CONCRETE SUPPORTS: SELF- How do programs provide inf services in the community?		ું. જ	A: A: A	agies 3.N	Reither age	jisagiee 1:	strongly die	age e
								Comments
<b>4.4</b> Staff proactively respond to signs of parent or family distress by:	<b>4.4.1</b> Expressing concern and offering help.							
distress by.	<b>4.4.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.4.3</b> Making themselves and/or other designated home visitors available to parents if parents need to talk.							
	<b>4.4.4</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.4.5</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).							
	<b>4.4.6</b> Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.							
	share information about community resources s, play lots, family activities), as well as more							
	e services dults and children)							



			,	, ,	
CONCRETE SUPPORTS: SELF- How do programs provide inf services in the community?	-ASSESSMENT ITEMS formation and connections to	5; Sten	A. Age 3. No.	thet agree that it sagree	ingh licages
					Comments
<b>4.6</b> The program actively builds collaborative links with	<b>4.6.1</b> Bringing services on site, when possible.				
other service providers by:	<b>4.6.2</b> Easing the referral process by ensuring the workers in different programs know each other and work together.				
	<b>4.6.3</b> Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.				
	<b>4.6.4</b> Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.				
	<b>4.6.5</b> Using input from participating parents to identify and advocate to fill gaps in the services available to families.				



						,	,	, , , , ,
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		/		: Meither agr	nor disagi	* /	, , , , , , , , , , , , , , , , , , ,
	es to develop skills they need to	/	SHORELY 25	er les	aither agr	ee'	Strongly die	L. Andricatie
identify their freeds and comi	ect to supports:	45.	51. V.	Agree ?	: NE / 2	DI3/1	St. M	ir.
								Comments
<b>4.7</b> Staff help parents to identify and mobilize their own resources to address their families' needs by:	<b>4.7.1</b> Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.							
	<b>4.7.2</b> Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.							
	<b>4.7.3</b> Encouraging parents to advocate for themselves and their child.							
	<b>4.7.4</b> Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.							
	<b>4.7.5</b> Connecting parents to peer-to-peer navigation support.							
<b>4.8</b> When staff make referrals to outside services, they support family leadership by.	<b>4.8.1</b> Brainstorming with families about what resources would be helpful.							
port family leadership by.	<b>4.8.2</b> Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.							
	<b>4.8.3</b> Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).							
	<b>4.8.4</b> Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).							
	<b>4.8.5</b> Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.							
	<b>4.8.6</b> Making a personal connection between families and service providers (if families have agreed to share information through written consent).							

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. Programs should:

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

## SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: **SELF-ASSESSMENT ITEMS**

SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs help parent emotional development?		45	Strongly agi	Person 3:	Meither age	e nut disagn	Strongly dis	Aggree Comments
<b>5.1</b> The program introduces family members to social and emotional development by:	<b>5.1.1</b> Providing parents with information on the importance of supporting children's healthy social and emotional development—and its connection to success in school and life.							
	<b>5.1.2</b> Helping parents understand ageappropriate social and emotional skills and behaviors.							
	<b>5.1.3</b> Providing opportunities to discuss social and emotional issues within a racial and cultural context.							
	<b>5.1.4</b> Offering parents ideas on how to foster a child's social and emotional learning at home.							
	<b>5.1.5</b> Asking about parents' observations of their child's social and emotional development.							
parents and their children (e.g.,	pportunities to strengthen bonds between parent-child playgroups, playing together in ve, cooking, making an art project together).							
	edge and expertise about their children's as they share information about social and							



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs model nurt		, s. s.	di. Refee	s. Meither affect florid	sagee Hut A	es comments
<b>5.4</b> Staff nurture children and model nurturing for parents by:	<ul> <li>5.4.1 Responding consistently to children in a warm, supportive manner.</li> <li>5.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.</li> <li>5.4.3 Showing warmth through appropriate physical contact.</li> <li>5.4.4 Demonstrating mutual respect between children and adults (e.g., listening</li> </ul>					
	attentively, making eye contact, treating children fairly).  5.4.5 Responding sympathetically to help children who are upset, hurt or angry.  5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.  5.4.7 Modeling empathy and appropriate emotional responsiveness.					



						,	, , ,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		285	,	agree	nd disagles	lieste alle
How do programs model nurt	uring care to children?	45.	Strongly agr	Agree 3:	Aeither 2: D	sagree 1: Strong!	Aut thicage
							Comments
<b>5.5</b> Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	<b>5.5.1</b> Fostering children's social and emotional development in the context of their culture and language.						
social emotional development, including:	<b>5.5.2</b> Recognizing behavioral/emotional problems or developmental delays.						
	<b>5.5.3</b> Understanding the impact of loss or trauma on children and how to respond appropriately.						
	<b>5.5.4</b> Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.						
	<b>5.5.5</b> Understanding gender differences in child rearing and its impact on social and emotional development.						
	<b>5.5.6</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.7</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.8</b> Understanding how mental health and wellness affects family relationships and the developmental process of young children.						
	<b>5.5.9</b> Recognizing and responding to the impact of child or parental trauma on parent-child relationships.						
<b>5.6</b> Families are invited to obser and/or staff in the program.	ve their children interacting with other children						



					, ,	. ,	,	, , ,
SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs include chi development activities in prog	Idren's social and emotional	45	Standy all	Per 3.	Meither agree	ing disagre	strongly dis	ages and a second
								Comments
<b>5.7</b> The program supports children's social and emotional development with intentional practices that include:	<b>5.7.1</b> Encouraging children to express their feelings in ways that are the most comfortable for them.							
practices that include.	<b>5.7.2</b> Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.							
	<b>5.7.3</b> Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).							
	<b>5.7.4</b> Setting clear expectations and limits for behavior.							
	<b>5.7.5</b> Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).							
<b>5.8</b> Mental health consultants assist staff in integrating social emotional development into everyday work by:	<b>5.8.1</b> Providing coaching on how to support social and emotional learning for all children.							
overyddy work by.	<b>5.8.2</b> Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.							



				, ,	, ,	, ,	
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS			A. Agee	aure	a puritables	Aicagles Andricalle	
identity and learn to interact	en develop a positive cultural in a diverse society?	g <sup>x</sup>	dingly A: Aglee	Weither	disagle Strong	Applit /	
	•	5	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	<b>%`/ %</b>	/ % /	Comments	
<b>5.9</b> The program welcomes and affirms the cultures of families it serves by:	<b>5.9.1</b> Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					Comments	
	<b>5.9.2</b> Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.						
	<b>5.9.3</b> Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.						
<b>5.10</b> Staff receive training on how cultural differences affect social and emotional development, especially	<b>5.10.1</b> How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.						
differences in:	<b>5.10.2</b> The extent to which nonverbal communication is predominant across cultures.						
	<b>5.10.3</b> Diverse cultural views success and appropriate child development.						
<b>5.11</b> Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languag-	<b>5.11.1</b> Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.						
es and cultural expressions through:	<b>5.11.2</b> Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.						
	<b>5.11.3</b> Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.						
	tices support the preservation of home lan- ne languages and dialects of the children and						
	th consultant offers consultation that is ting behaviors and child behaviors that stem						
<b>5.14</b> Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.						



SOCIAL AND EMOTIONAL COI SELF-ASSESSMENT ITEMS How do programs respond premotional development need	roactively when social or	/ 4.	Stoney as	, kules	Heither age	isagee.	strongly di	Salte E. Comments	
<b>5.15</b> When staff are concerned about a child's social and emotional development, they respond by:	<b>5.15.1</b> Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.								
	<b>5.15.2</b> Arranging for appropriate screenings and assessments.								
	<b>5.15.3</b> Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).								
	<b>5.15.4</b> Helping parents develop strategies for addressing the issue at home.								
<b>5.16</b> Staff have access to a mental health consultant to help them:	<b>5.16.1</b> Identify and receive additional resources and/or training to work effectively with individual children and parents.								
	<b>5.16.2</b> Talk respectfully with parents about the child's development, needs or challenges.								

#### STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES

One responsibility of all child- and family-serving programs is to respond to possible child abuse and neglect when it is observed. Staff are mandatory reporters of child abuse and neglect in most states and should receive training every year on the state requirements on reporting. However, long before a report needs to be made, staff can also respond positively and supportively to early signs that have the potential to lead to maltreatment. The following items reflect best practices for programs in working effectively with child welfare officials.

HOW DO PROGRAMS RESPON OR NEGLECT?	D TO POSSIBLE CHILD ABUSE	/43	Strongly ag	Pares 3.	Weither all	e nordiesal	ee Strongly dis	saties Comments
<b>6.1</b> When children enter the program, staff discuss child abuse and neglect prevention	<b>6.1.1</b> The program's policies and practices that are designed to keep children safe from harm.							Comments
program, staff discuss child	<b>6.1.2</b> Staff members' responsibility as mandatory child abuse and neglect reporters.							
	<b>6.1.3</b> How the state defines child abuse and neglect.							
	<b>6.1.4</b> The program's protocols regarding child abuse and neglect reports.							
<b>6.2</b> All staff members are trained abuse reporting laws.	d according to their state's mandatory child							
<b>6.3</b> Staff receive additional training on child abuse and neglect including:	<b>6.3.1</b> Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.							
	<b>6.3.2</b> Following the program's protocols for reporting child abuse and neglect.							
	<b>6.3.3</b> Understanding how cases are generally handled by the child protective services agency once a report is made.							
	<b>6.3.4</b> The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.							
	<b>6.3.5</b> Recognizing cultural practices that can trigger reporting of child abuse and neglect (e.g., the practice of coining to treat fevers, the use of corporal punishment for toilet training, leaving a young sibling in the care of an older sibling under the age of ten) and respectfully discussing ways that parents can prevent the likelihood of mandatory reporting.							

# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?

, sage et	
5. Strongt agge 3. Heiter agge in disagge 1. Strongt disagge and Applicable	
5. Strongt ages 3. Heiter ages rot to 1. Strongt listages	
5. Strong, W. Wies 3. Weither 5. Disage, 1. Strong, W. William	

					Comments
<b>6.4</b> The program's protocols for reporting possible child abuse and neglect:	<b>6.4.1</b> Are consistent with state child welfare reporting guidelines.				
	<b>6.4.2</b> Are reviewed annually or anytime changes are made to state guidelines.				
6.5 Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the child welfare agency and to families that include:	<b>6.5.1</b> Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.				
	<b>6.5.2</b> Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.				
	<b>6.5.3</b> Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.				
	<b>6.5.4</b> Striving to be calm, caring and supportive of the family during the reporting process.				
	<b>6.5.5</b> Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.				
	<b>6.5.6</b> Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.				
<b>6.6</b> If a child is placed into child welfare custody, staff are trained to continue to support	<b>6.6.1</b> Maintaining contact with the child and family, if possible.				
the child and the family by:	<b>6.6.2</b> Advocating for the family with the Child Protective Services system, when possible.				
	<b>6.6.3</b> Helping parents connect with resources to help reunite them with their child.				



# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

						/		, , ,	
IOW DO PROGRAMS RESPON OR NEGLECT?	ND TO POSSIBLE CHILD ABUSE	/«	5. Strongly 2	gges x. Agges	3. Weither of	glee landie	A. Strongly di	sale e sa	
								Comments	
<b>6.7</b> Program staff seek to collaborate with child welfare caseworkers and Child	<b>6.7.1</b> Helping to maintain stability for children involved in the system.								
Protective Services staff to promote the child's ongoing healthy development by:	<b>6.7.2</b> Engaging in co-case management practices, if possible.								
, ,	<b>6.7.3</b> Conducting joint home visits.								
	<b>6.7.4</b> Attending Child Protective Services meetings to share information.								

# Appendix B

**Electronic Version of Parental Resilience Questions of SFSA Tool** 



Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

#### **Parental Resilience-Self Assessment Items**

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- · Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Parental Resilience. You will be asked to identify (on a 5-point scale) your level of agreement with a series of statements associated with questions related to promoting parental resilience. A Not Applicable (N/A) option is also provided. If desired, a comments text box is provided for each question should you wish to provide additional thoughts, reflections, and/or clarifications regarding your response.

This tool/survey was developed by the Center for the Study of Social Policy as part of their Strengthening Families Protective Factors Framework initiative.

Thank you for participating in this process. Your feedback and participation as a Team member is important.

What best describes your	role/perspective as a Team	Member?
--------------------------	----------------------------	---------

$\bigcirc$	Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community
$\bigcirc$	Administrative Staff and/or Program Director
$\bigcirc$	Direct Service Staff and/or Volunteer
$\bigcirc$	Community Collaborator/Partner that Works with Resource Center





Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

1.1 Staff strive to recognize and affirm the central role of every interaction with families including policies, practic	-					gh
Strongly agree Agree Neither agree nor disagree	Disag			igly disagr		
Not applicable						
Comment						
2 The program has multiple avenues for regular communic	cation wit	h fam	ilies.			
	Strongly		Neither agree nor	Disagree	Strongly disagree	N
2.1 The program provides an orientation for families about the program	agroo	, igi cc	aloagico	Dioagree	alougico	
hilosophy, goals and objectives.		$\circ$		$\bigcirc$		
hilosophy, goals and objectives.					0	
comments						
		0			0	
comments  2.2 Staff use a variety of methods (e.g., new family orientations, small ground proceedings, individual conversations, and written questionnaires) to provide		0			0	

	Strongly agree	Agree	Neither dis	agree agree			Strongly disagree	N/A
1.3.1 Someone is available to greet families when they come in.		0	(				0	
Comments								
1.3.2 Staff are respectful even when family visits are unexpected.	$\bigcirc$		(			$\bigcirc$	$\bigcirc$	
Comments								
4 Staff develop mutually respectful relations	ships with	all fan	nily men	nbers	by:			
			Ctrongly		Neither agree		Ctrongly	
			Strongly agree		nor disagree	Disagree	Strongly e disagree	N/
1.4.1 Taking time to get to know family members individua	lly, by name.							$\subset$
Comments								
1.4.2 Listening and learning about their interests, current a expectations for themselves and their children.	activities, hop	oes and	0	0				
Comments								
1.4.3 Regularly inquiring about what is happening in their l	i							
1.4.3 Requiany inquining about what is nappening in their i	ives.							
						0		
Comments								
Comments			0	0	0	0	0	
			0	0	0	0	0	
Comments  1.4.4 Providing emotional support and encouragement.			0	0	0	0	0	
Comments  1.4.4 Providing emotional support and encouragement.  Comments			0	0	0	0	0	
1.4.4 Providing emotional support and encouragement.  Comments  1.4.5 Sharing appropriate information about themselves.				0	0	0		

Comments	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.	0	0	0	0	0	
L.4.8 Using intake forms, applications and surveys that are gender-neutral.	0	0				
Comments						
			agree			
L.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.  Comments	Strongly agree	Agree	agree nor disagree	Disagree	Strongly disagree	N/A
needs and parenting.	agree	Agree	nor	Disagree		N/A
L.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.	agree	Agree	nor	Disagree		
Comments  L.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.  Comments  L.5.3 Providing a diaper changing table in the men's room or other area accessible to men.	agree	Agree	nor	Disagree		
Comments  1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.  Comments  1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.  Comments	agree	Agree	nor	Disagree		

1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.  Comments  1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.  Comments  1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.  Comments  1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	Comments						
2.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.  Comments  1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.							
1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.  Comments  1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.	$\circ$		0	0		
to engage them in activities.  Comments  1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	Comments						
1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.			0		0	
relationship with the child's mother, lack of information or a non-custodial relationship with child.  Comments  1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	Comments						
1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.	0	0	0	0	0	
the program, not only activities for fathers, including leadership roles.	Comments						
Comments	1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.		0				
	Comments						



How do programs honor each family's race, language, culture, history and approach to parenting?

1.6 Program staff ensure that all families, regardless of family structure; socioeconomic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.						
Comments						
1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.	0	0	0	0	0	C
Comments						
1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.		0	0	0	0	C
Comments						
1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.		$\circ$		0		C
Comments						
1.6.5 The program displays diverse families and family structures in books, posters and program materials.	0	0	0	0	0	С
Comments						

The community served.  Comments  The community served.  The community served.		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
.7.2 Reviewed by a Parent Advisory Committee to ensure that they are ulturally relevant and linguistically accessible to all families in the program.  Comments  .7.3 Designed or selected to reflect the culture(s) of the community served.	L.7.1 Translated, whenever possible, into the language(s) spoken by all families n the community served.		0				
Comments  7.3 Designed or selected to reflect the culture(s) of the community served.	Comments						
.7.3 Designed or selected to reflect the culture(s) of the community served.	7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.		0				
	Comments						
Comments	L.7.3 Designed or selected to reflect the culture(s) of the community served.				0	0	0
	Comments						



How do programs demonstrate that parents are valued?

1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportunities to develop skills and knowledge to work effectively with diverse families. Staff development may include:

	Strongly agree		agree nor disagree	Disagree	Strongly disagree	
1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families.		$\bigcirc$				
Comments						
1.8.2 Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.  Comments	0		0	0	0	
1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.	0		0	0	$\circ$	
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.9.1 Building a staff that reflects the community and families served.						$\mathbb{C}$
Comments						
1.9.2 Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.		0	0	0		C
Comments						
1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.	0	0	0	0		C
Comments						
1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society - even if the program's community is mono-lingual, mono-ethnic or mono-cultural.	0	0	0	0	0	С
10 The program supports participating immigrant and refu	gee fami Strongly		<b>y:</b> Neither  agree  nor		Strongly	
10 The program supports participating immigrant and refu	Strongly	,	Neither agree nor	Disagree		N//
10 The program supports participating immigrant and refuge  1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.	Strongly	,	Neither agree nor	Disagree		N/A
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee	Strongly	,	Neither agree nor	Disagree		N/A
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.	Strongly	,	Neither agree nor	Disagree		N//
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.  Comments  1.10.2 Maintaining up-to-date information on supports and services most	Strongly	,	Neither agree nor	Disagree		N//
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.  Comments  1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.	Strongly	,	Neither agree nor	Disagree		N//



How do programs encourage parents to manage stress effectively?

- 1.11 When common signs of stress occur, program staff reach out to families proactively and supportively. Some commons signs of stress include:
- Parents' acknowledgement of stress or problems
- Unusual parental behavior
- Repeated unexplained absences
- Repeated tardiness or missed appointments
- Divorce, separation, military deployment, family dissolution, job loss or other family crises
- Changes or fluctuations in a child's emotional state, acting out, distress, challenging behavior, fearful behavior, inappropriate language/behavior (such as sexual acting out), signs of abuse or neglect (such as bruises) or other unexplained changes in child behavior.

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
O Not applicable					
Comment					

1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.  Comments  1.12.3 Organizing spa days, exercise classes or other parent-only social activities.  Comments  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
in informal activities.  Comments  1.12.3 Organizing spa days, exercise classes or other parent-only social activities.  Comments  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	1.12.1 Linking parents to organized support groups.						
1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.  Comments  1.12.3 Organizing spa days, exercise classes or other parent-only social activities.  Comments  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.  Comments  Comments	Comments						
1.12.3 Organizing spa days, exercise classes or other parent-only social activities.  Comments  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.		$\circ$	0	$\circ$		$\circ$	
activities.  Comments  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	Comments						
1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	activities.		0	0	0	0	
about issues that are troubling them.  Comments  1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	Comments						
shopping or participate in other parent-only activities.	about issues that are troubling them.	0			0	0	
shopping or participate in other parent-only activities.							
Comments	shopping or participate in other parent-only activities.						0
	Comments						

			0	
0	0	0	0	C
0	0	0	0	
0	0	0	0	C
0				
				C
0	0		0	C
	0	0	0	
	0			



How do programs support parents as decision-makers and build decision-making and leadership skills?

#### 1.14 Staff receive program support when working with families under stress through:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.14.1 Acknowledgement and support for their efforts from supervisors and administrators.		$\bigcirc$	$\circ$	$\bigcirc$		$\bigcirc$
Comments						
1.14.2 Opportunities to process their own emotional reactions with appropriate support.	own emotional reactions with		$\circ$			
Comments						
1.14.3 Access to a mental health consultant.	$\circ$		0			
Comments						
1.14.4 Time off if needed.			0			
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.15.1 Respecting parents' directions and/or decisions about their children.						C
Comments						
L.15.2 Learning about parents' expectations and limits for their children.  Comments	0	0	0	0		C
1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.	0	0	0	0	0	С
Comments						
L.15.4 Understanding the parenting and child behavior norms of the parent's culture.  Comments	O	O	0		0	<u> </u>
L.15.5 Being careful not to contradict a parent in front of his or her child or other children.  Comments	0		0	0	0	С
	-in-a	r asse	essment	ts of the	ir child:	
16 Parents are engaged as partners in developmental screer	Strongly		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.	Strongly		agree nor	Disagree		N//
1.16.1 All staff are trained in the program's confidentiality policy regarding	Strongly		agree nor	Disagree		N//

1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.  Comments  1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.  Comments  1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.  Comments  1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.  Comments		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.  Comments  1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.  Comments  1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
behavior or developmental problems are suspected or identified.  Comments  1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.  Comments  1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	Comments						
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.  Comments  1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	behavior or developmental problems are suspected or identified.	$\circ$		0	0	0	
children based on the screening.  Comments  1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	Comments						
1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.			$\bigcirc$				
with parents and documented in the children's files, and parents are provided copies of the plan.  Comments  1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	Comments						
(e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	with parents and documented in the children's files, and parents are provided copies of the plan.	0	0	0	0	0	
(e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
Comments	(e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible	$\bigcirc$		0	0	$\bigcirc$	
	Comments						

emselves and their children.  omments  17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milles achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	Strongly agree Strongly agree Page disagree Disa	Strongly agree Strongly agree Poisagree Disagree	.17 Parents and staff develop family plans together that:					
emselves and their children.  omments  17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milles achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	emselves and their children.  omments  17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milles achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	emselves and their children.  omments  17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milies achieve their goals, continue their learning and/or provide other avenues rinvolvement and leadership.  omments  17.4 Are updated regularly.		∖gree	agree nor	Disagree		N/A
17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milles achieve their goals, continue their learning and/or provide other avenues rinvolvement and leadership.  omments  17.4 Are updated regularly.	17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milles achieve their goals, continue their learning and/or provide other avenues rinvolvement and leadership.  omments  17.4 Are updated regularly.	17.2 Identify services and opportunities within the program that may help arents achieve their goals and effectively use their skills and talents.  omments  17.3 Identify other community resources and opportunities that may help milies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  omments  17.4 Are updated regularly.	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.			$\circ$		
arents achieve their goals and effectively use their skills and talents.  Omments  17.3 Identify other community resources and opportunities that may help millies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  Omments  17.4 Are updated regularly.	arents achieve their goals and effectively use their skills and talents.  Omments  17.3 Identify other community resources and opportunities that may help millies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  Omments  17.4 Are updated regularly.	arents achieve their goals and effectively use their skills and talents.  17.3 Identify other community resources and opportunities that may help millies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  17.4 Are updated regularly.	Comments					
17.3 Identify other community resources and opportunities that may help milies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  omments  17.4 Are updated regularly.	17.3 Identify other community resources and opportunities that may help milies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  omments  17.4 Are updated regularly.	17.3 Identify other community resources and opportunities that may help milies achieve their goals, continue their learning and/or provide other avenues r involvement and leadership.  omments  17.4 Are updated regularly.	1.17.2 Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.	0	0	0		
milies achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	milies achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	milies achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.  omments  17.4 Are updated regularly.	Comments					
17.4 Are updated regularly.	17.4 Are updated regularly.	17.4 Are updated regularly.	L.17.3 Identify other community resources and opportunities that may help amilies achieve their goals, continue their learning and/or provide other avenues or involvement and leadership.		0	0	0	
			Comments					

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
18.1 Referring families to educational and career resources (e.g., GED rograms, adult education, ESL classes, employment opportunities, workplace eracy, parenting skills, job training, job preparation skills).						С
omments						
18.2 Forming partnerships with nearby educational resources, including gher education institutions, to support families' learning interests and ducational goals.	$\circ$					C
omments						
18.3 Linking families with community resources for internships, volunteer and adership activities and other experiences that expand parents' knowledge and kills and build on their career interests.	0	0	0	0	0	C
omments						
18.4 Inviting past program parents and community volunteers to share their ducational and career experiences with families.		0				С
ominents —						
18.5 Providing formal and/or informal parent mentoring opportunities obtentially with staff, alumni parents/families, elders and/or professionals in the ommunity) to serve as a resource and support for parent leadership evelopment.	0	0	0	0	0	
omments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.19.1 Providing opportunities for families to volunteer and contribute to the program.				$\circ$	$\bigcirc$	0
Comments						
1.19.2 Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles  Comments	0	0	0	0	0	
1.19.3 Asking families for regular input on programmatic decisions.	0		0	0		
Comments						
1.19.4 Asking families for input into staff hiring and training.  Comments						
1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).		0				C
Comments						

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/
L.20.1 Addressing topics, issues and skills that families identify as important o them.						
Comments						
L.20.2 Designing activities to address interests of different family members e.g., fathers, mothers, other family members).		0	0	0	0	
Comments						
1.20.3 Providing child care during trainings or workshops.	0	0	0	0		
Comments						
1.20.4 Conducting face-to-face or telephone outreach to families who might					$\bigcirc$	
not otherwise participate.						
Comments	ant of n	erent	leaders h	av sunno	orting	
	Strong	ly	Neither agree nor		Strongly	N/I
Comments	Strong agree	ly	Neither agree		Strongly	N/
21 The program helps to support the continued development.  2.21.1 Personal growth such as attending conferences or special events and	Strong agree	ly	Neither agree nor		Strongly	N/
21 The program helps to support the continued developmed21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents.	Strong agree	ly	Neither agree nor		Strongly	N/
21 The program helps to support the continued developmed.  2.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents.  Comments	Strong agree	ly	Neither agree nor		Strongly	N/
21 The program helps to support the continued developmed.  2.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents.  Comments  2.21.2 Leadership development trainings and mentoring activities.	Strong agree	ly	Neither agree nor		Strongly	N/

.22 The program helps to support parents' opportunities for	ieaders	nıp ır	ı commı	unity ch	ange by	<b>':</b>
	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	
1.22.1 Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.  Comments		0	0	0	0	C
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.  Comments	0	0	0	0	0	C
1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.			0	0	0	C
Comments						
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.  Comments	0	0	0	0	0	
Comments						



How do programs help parents understand how to buffer their child during stressful times? 1.23 Staff receive training on talking with parents about helping children in times of family crisis. Disagree Strongly agree Agree Neither agree nor disagree Strongly disagree Not applicable Comment 1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including: • How stress impacts the child's brain, behavior and development Recognizing the signs of stress in children • How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly • The important role that parents and caring adults play in buffering children during stressful times Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree Not applicable Comment 1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times. Strongly agree Neither agree nor disagree Disagree Strongly disagree Agree Not applicable Comment

#### **Appendix C**

#### Cone Park Library Resource Center Strengthening Families Self-Assessment Team

 ${\sf SFSA\ Tool\ for\ Community-Based\ Programs} \color{red} \color{red} \color{blue} \underline{\textbf{Parental\ Resilience}} \ Results$ 

#### Cone Park Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs—<u>Parental Resilience</u> Results

Updated/Revised (September 2021)

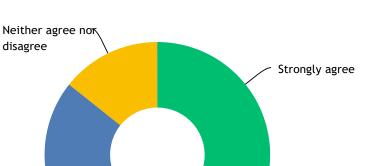
### Q1 What best describes your role/perspective as a Team Member?



ANSWER CHOICES	RESPON	SES
Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community	60.00%	6
Administrative Staff and/or Program Director	0.00%	0
Direct Service Staff and/or Volunteer	20.00%	2
Community Collaborator/Partner that Works with Resource Center	20.00%	2
TOTAL		10

# Q 1.1 Staff strive to recognize and affirm the central role of parents in their children's lives through every interaction with families including policies, practices and informal communication.

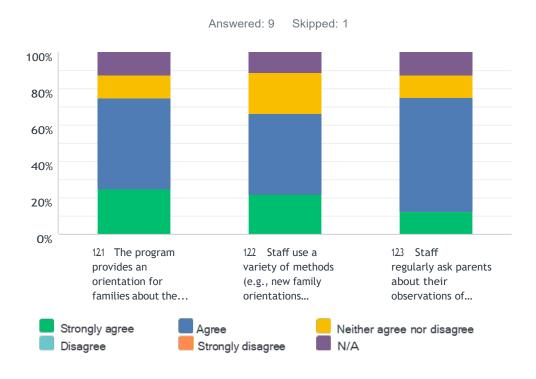
Answered: 7 Skipped: 3



ANSWER CHOICES	RESPONSES	
Strongly agree	28.57%	2
Agree	57.14%	4
Neither agree nor disagree	14.29%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		7
# COMMENT	DATE	

There are no responses.

### Q 1.2 The program has multiple avenues for regular communication with families.

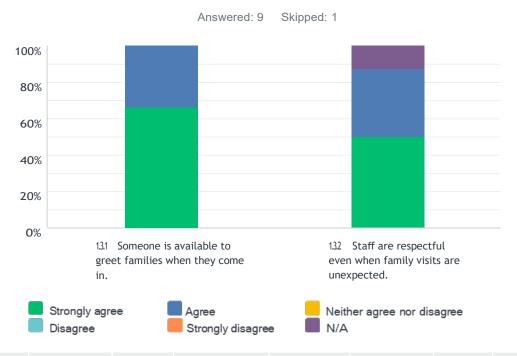


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.	25.00% 2	50.00%	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.14
1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.	22.22% 2	44.44%	22.22% 2	0.00%	0.00% 0	11.11% 1	9	4.00
1.2.3 Staff regularly ask parents about their observations of their child.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00%	12.50% 1	8	4.00

#	COMMENTS FOR "1.2.1 THE PROGRAM PROVIDES AN ORIENTATION FOR FAMILIES ABOUT THE PROGRAM PHILOSOPHY, GOALS AND OBJECTIVES."	DATE
	There are no responses.	
#	COMMENTS FOR "1.2.2 STAFF USE A VARIETY OF METHODS (E.G., NEW FAMILY	DATE

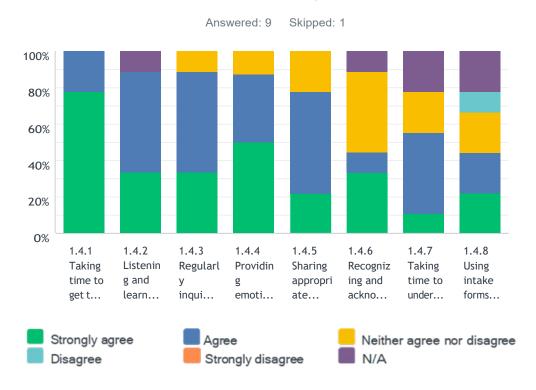
	ORIENTATIONS, SMALL GROUP MEETINGS, INDIVIDUAL CONVERSATIONS, AND WRITTEN QUESTIONNAIRES) TO PROVIDE INFORMATION AND GATHER INPUT FROM FAMILIES ABOUT ACTIVITIES THROUGHOUT THE YEAR."	
1	I am not sure how they reach out to parents.	8/2/2021 10:49 AM
#	COMMENTS FOR "1.2.3 STAFF REGULARLY ASK PARENTS ABOUT THEIR OBSERVATIONS OF THEIR CHILD."	DATE
	There are no responses.	

### Q 1.3 All family members are made to feel welcome:



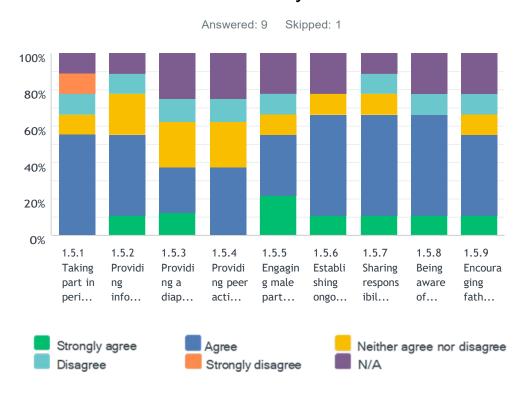
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.3.1 Someone is available to greet families when they come in.	66.67% 6	33.33%	0.00%	0.00%	0.00%	0.00%	9	4.67
1.3.2 Staff are respectful even when family visits are unexpected.	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	12.50% 1	8	4.57

# Q 1.4 Staff develop mutually respectful relationships with all family members by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.4.1 Taking time to get to know family members individually, by name.	77.78% 7	22.22%	0.00%	0.00%	0.00% 0	0.00%	9	4.78
1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.	33.33% 3	55.56% 5	0.00%	0.00%	0.00%	11.11% 1	9	4.38
1.4.3 Regularly inquiring about what is happening in their lives.	33.33% 3	55.56% 5	11.11% 1	0.00% 0	0.00% 0	0.00%	9	4.22
1.4.4 Providing emotional support and encouragement.	50.00% 4	37.50% 3	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.38
1.4.5 Sharing appropriate information about themselves.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.00
1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.	33.33% 3	11.11% 1	44.44% 4	0.00% 0	0.00% 0	11.11% 1	9	3.88
1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.	11.11% 1	44.44%	22.22% 2	0.00% 0	0.00% 0	22.22% 2	9	3.86
1.4.8 Using intake forms, applications and surveys that are genderneutral.	22.22% 2	22.22%	22.22% 2	11.11% 1	0.00% 0	22.22% 2	9	3.71

## Q 1.5 Staff show that they value fathers and are sensitive to their unique needs by:



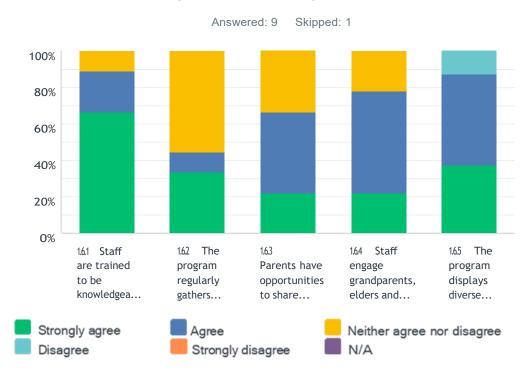
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.	0.00% 0	55.56% 5	11.11% 1	11.11% 1	11.11% 1	11.11% 1	9	3.25
1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.	11.11% 1	44.44%	22.22% 2	11.11% 1	0.00% 0	11.11% 1	9	3.63
1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.	12.50% 1	25.00% 2	25.00% 2	12.50% 1	0.00% 0	25.00% 2	8	3.50
1.5.4 Providing peer activities or services that are man-to-man, father-to-father.	0.00% 0	37.50% 3	25.00% 2	12.50% 1	0.00% 0	25.00% 2	8	3.33
1.5.5 Engaging male participants to greet other men at program activities.	22.22%	33.33%	11.11% 1	11.11% 1	0.00% 0	22.22% 2	9	3.86
1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.	11.11% 1	55.56% 5	11.11% 1	0.00%	0.00%	22.22% 2	9	4.00
1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.	11.11% 1	55.56% 5	11.11% 1	11.11% 1	0.00%	11.11% 1	9	3.75
1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a noncustodial relationship with child.	11.11% 1	55.56% 5	0.00%	11.11% 1	0.00%	22.22%	9	3.86
1.5.9 Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.	11.11% 1	44.44%	11.11% 1	11.11% 1	0.00%	22.22%	9	3.71

COMMENTS FOR "1.5.1 TAKING PART IN PERIODIC TRAINING ON UNDERSTANDING AND APPRECIATING FATHERS' NEEDS AND PARENTING."

DATE

1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.2 PROVIDING INFORMATION SPECIFIC TO FATHERS/MALE FAMILY MEMBERS IN A SPECIAL AREA SUCH AS A LOUNGE, BULLETIN BOARD, OR BOOKSHELF."	DATE
1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.3 PROVIDING A DIAPER CHANGING TABLE IN THE MEN'S ROOM OR OTHER AREA ACCESSIBLE TO MEN."	DATE
1	unknown	8/6/2021 8:07 AM
2	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.4 PROVIDING PEER ACTIVITIES OR SERVICES THAT ARE MANTO-MAN, FATHER-TO-FATHER."	DATE
1	unknown	8/6/2021 8:07 AM
2	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.5 ENGAGING MALE PARTICIPANTS TO GREET OTHER MEN AT PROGRAM ACTIVITIES."	DATE
1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.6 ESTABLISHING ONGOING PARTNERSHIPS WITH COMMUNITY RESOURCES THAT PROVIDE SERVICES TO FATHERS."	DATE
1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.7 SHARING RESPONSIBILITY FOR INVITING FATHERS TO ATTEND PROGRAMS AND WORKING TO ENGAGE THEM IN ACTIVITIES."	DATE
1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.8 BEING AWARE OF BARRIERS THAT LIMIT FATHER INVOLVEMENT, SUCH AS A DIFFICULT RELATIONSHIP WITH THE CHILD'S MOTHER, LACK OF INFORMATION OR A NON-CUSTODIAL RELATIONSHIP WITH CHILD."	DATE
1	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM
#	COMMENTS FOR "1.5.9 ENCOURAGING FATHERS AND MALE FAMILY MEMBERS TO ENGAGE IN ALL ASPECTS OF THE PROGRAM, NOT ONLY ACTIVITIES FOR FATHERS, INCLUDING LEADERSHIP ROLES."	DATE
1	I think that it is very important to have males participate in this assessment	8/27/2021 4:02 PM
2	I am not aware of any of these things but think it should be if not, but strongly agree that these kind of things should be for fathers	8/3/2021 2:00 PM

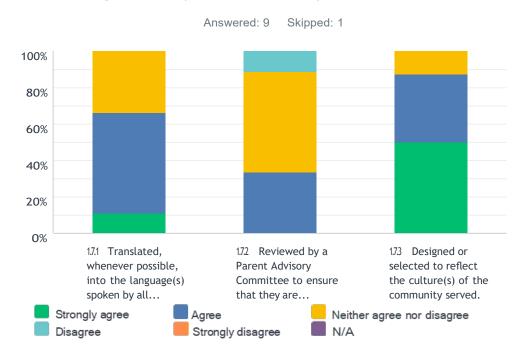
Q 1.6 Program staff ensure that all families, regardless of family structure; socioeconomic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.6.1 Staff are be knowledged the parenting and approach decision-maked different culture thnic groups	eable about practices hes to family king of ural and	66.67% 6	22.22%	11.11% 1	0.00% 0	0.00% 0	0.00%	9	4.56
1.6.2 The proregularly gath information a interests, bell expectations those relating culture and ladevelopment to partner wit incorporating features into activities and	ners bout family iefs and , including g to the child's anguage , and seeks th families in those program	33.33% 3	11.11% 1	55.56% 5	0.00% 0	0.00% 0	0.00%	9	3.78
1.6.3 Parent opportunities skills, talents traditions wit other parents	to share and cultural h children and	22.22% 2	44.44%	33.33% 3	0.00%	0.00%	0.00%	9	3.89
1.6.4 Staff e grandparents extended fan in discussion parenting and transmission beliefs.	s, elders and nily members s on d the	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.00
1.6.5 The prodisplays diversity and family st books, poster program maters.	rse families ructures in rs and	37.50% 3	50.00%	0.00%	12.50% 1	0.00%	0.00%	8	4.13
#	COMMENTS	-OB "4 6 4 STA	VEE A DE TO	AINED TO BE	KNOWI EDGE	ABLE ABOUT T	ue	DATE	
#	PARENTING I		ND APPROA	ACHES TO FA	MILY DECISION		nc	DATE	
1	would like to se	ee more						8/3/2021 2:	01 PM
#	FAMILY INTER	RESTS, BELIEF CULTURE ANI ES IN INCORPO	FS AND EXE	PECTATIONS, GE DEVELOPI	INCLUDING THE	FORMATION AB HOSE RELATING EKS TO PARTN IGRAM ACTIVIT	G TO IER	DATE	
1	would like to se	ee more						8/3/2021 2:	01 PM
#					IITIES TO SHAI REN AND OTHE			DATE	
1	would like to se	ee more						8/3/2021 2:	01 PM
#		BERS IN DISC				S AND EXTEND ANSMISSION O		DATE	

1	would like to see more	8/3/2021 2:01 PM
#	COMMENTS FOR "1.6.5 THE PROGRAM DISPLAYS DIVERSE FAMILIES AND FAMILY STRUCTURES IN BOOKS, POSTERS AND PROGRAM MATERIALS."	DATE
1	would like to see more	8/3/2021 2:01 PM

### Q 1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:

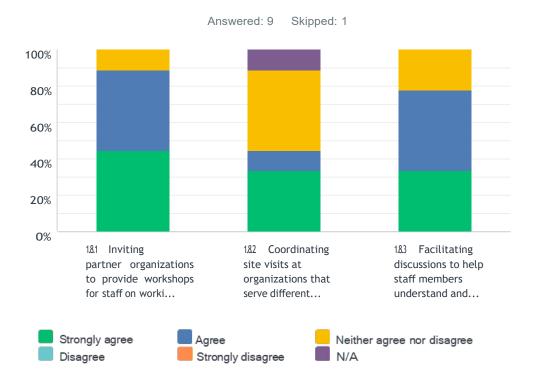


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.	11.11% 1	55.56% 5	33.33%	0.00%	0.00% 0	0.00%	9	3.78
1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.	0.00%	33.33%	55.56% 5	11.11% 1	0.00% 0	0.00%	9	3.22
1.7.3 Designed or selected to reflect the culture(s) of the community served.	50.00% 4	37.50% 3	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.38

#	COMMENTS FOR "1.7.1 TRANSLATED, WHENEVER POSSIBLE, INTO THE LANGUAGE(S) SPOKEN BY ALL FAMILIES IN THE COMMUNITY SERVED."	DATE
1	would like to see more	8/3/2021 2:01 PM
#	COMMENTS FOR "1.7.2 REVIEWED BY A PARENT ADVISORY COMMITTEE TO ENSURE THAT THEY ARE CULTURALLY RELEVANT AND LINGUISTICALLY ACCESSIBLE TO ALL FAMILIES IN THE PROGRAM."	DATE
1	would like to see more	8/3/2021 2:01 PM
#	COMMENTS FOR "1.7.3 DESIGNED OR SELECTED TO REFLECT THE CULTURE(S) OF THE COMMUNITY SERVED."	DATE

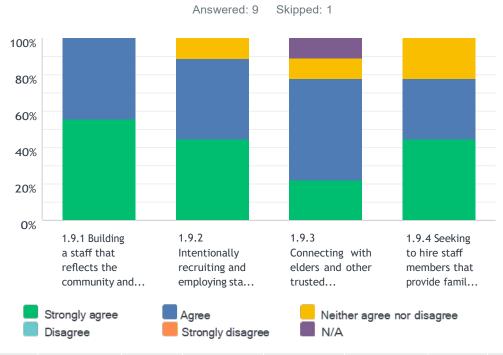
1	would like to see more	8/3/2021 2:01 PM
2	Somewhat agree	8/2/2021 9:47 AM

Q 1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportunities to develop skills and knowledge to work effectively with diverse families. Staff development may include:



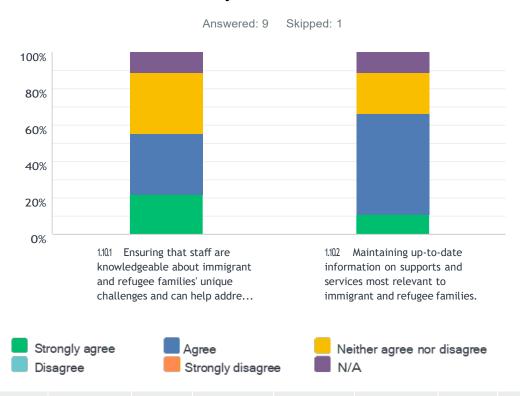
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families.	44.44% 4	44.44%	11.11% 1	0.00%	0.00% 0	0.00%	9	4.33
1.8.2 Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.	33.33% 3	11.11% 1	44.44% 4	0.00%	0.00%	11.11% 1	9	3.88
1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.	33.33% 3	44.44%	22.22% 2	0.00%	0.00%	0.00%	9	4.11

## Q 1.9 The program seeks to reflect the community and families itserves by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.9.1 Building a staff that reflects the community and families served.	55.56% 5	44.44%	0.00% 0	0.00%	0.00%	0.00%	9	4.56
1.9.2 Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.	44.44% 4	44.44%	11.11% 1	0.00%	0.00%	0.00%	9	4.33
1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.	22.22% 2	55.56% 5	11.11% 1	0.00%	0.00% 0	11.11% 1	9	4.13
1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society - even if the program's community is mono-lingual, mono-ethnic or mono-cultural.	44.44%	33.33%	22.22% 2	0.00%	0.00%	0.00%	9	4.22

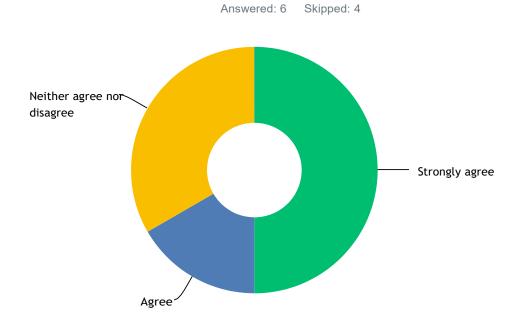
## Q 1.10 The program supports participating immigrant and refugeefamilies by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner.	22.22% 2	33.33%	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.88
1.10.2 Maintaining up-to- date information on supports and services most relevant to immigrant and refugee families.	11.11% 1	55.56% 5	22.22%	0.00%	0.00%	11.11% 1	9	3.88

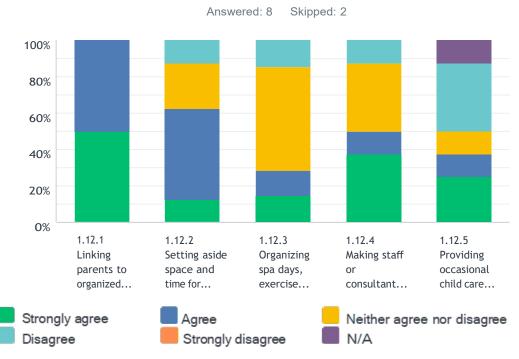
#	COMMENTS FOR "1.10.1 ENSURING THAT STAFF ARE KNOWLEDGEABLE ABOUT IMMIGRANT AND REFUGEE FAMILIES' UNIQUE CHALLENGES AND CAN HELP ADDRESS THEM IN A RESPECTFUL MANNER."	DATE
	There are no responses.	
#	COMMENTS FOR "1.10.2 MAINTAINING UP-TO-DATE INFORMATION ON SUPPORTS AND SERVICES MOST RELEVANT TO IMMIGRANT AND REFUGEE FAMILIES."	DATE
1	I rarely see info posted about immigration or nationalization help.	8/27/2021 4:03 PM

Q 1.11 When common signs of stress occur, program staff reach out to families proactively and supportively. Some commons signs of stress include: • Parents' acknowledgement of stress or problems • Unusual parental behavior • Repeated unexplained absences • Repeated tardiness ormissed appointments • Divorce, separation, military deployment, family dissolution, job loss or other family crises • Changes or fluctuations in a child's emotional state, acting out, distress, challenging behavior, fearful behavior, inappropriate language/behavior (such as sexual acting out), signs of abuse or neglect (such as bruises) or other unexplained changes in child behavior.



ANSWER	CHOICES	RESPONSES		
Strongly a	угее	50.00%		3
Agree		16.67%		1
Neither ag	ee nor disagree	33.33%		2
Disagree		0.00%		0
Strongly di	sagree	0.00%		0
Not applica	ıble	0.00%		0
TOTAL				6
#	COMMENT		DATE	
	There are no responses.			

## Q 1.12 The program provides regular opportunities for parents torelieve stress through:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.12.1 Linking parents to organized support groups.	50.00% 4	50.00%	0.00%	0.00% 0	0.00% 0	0.00%	8	4.50
1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.	12.50% 1	50.00% 4	25.00% 2	12.50% 1	0.00% 0	0.00%	8	3.63
1.12.3 Organizing spa days, exercise classes or other parent-only social activities.	14.29% 1	14.29% 1	57.14% 4	14.29% 1	0.00% 0	0.00%	7	3.29
1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.	37.50% 3	12.50% 1	37.50% 3	12.50% 1	0.00%	0.00%	8	3.75
1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	25.00% 2	12.50% 1	12.50% 1	37.50% 3	0.00% 0	12.50% 1	8	3.29

# COMMENTS FOR "1.12.1 LINKING PARENTS TO ORGANIZED SUPPORT GROUPS."

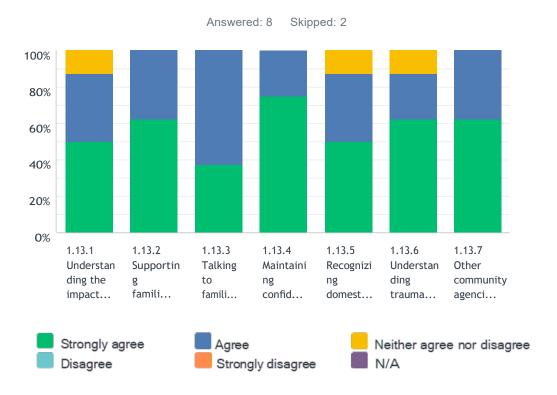
**DATE** 

### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

There are no responses.

#	COMMENTS FOR "1.12.2 SETTING ASIDE SPACE AND TIME FOR PARENTS TO GATHER, TALK AND PARTICIPATE IN INFORMAL ACTIVITIES."	DATE
	There are no responses.	
#	COMMENTS FOR "1.12.3 ORGANIZING SPA DAYS, EXERCISE CLASSES OR OTHER PARENT-ONLY SOCIAL ACTIVITIES."	DATE
1	never seen	8/27/2021 4:04 PM
2	unknown	8/6/2021 8:11 AM
#	COMMENTS FOR "1.12.4 MAKING STAFF OR CONSULTANTS AVAILABLE FOR PARENTS TO TALK TO INDIVIDUALLY ABOUT ISSUES THAT ARE TROUBLING THEM."	DATE
	There are no responses.	
#	There are no responses.  COMMENTS FOR "1.12.5 PROVIDING OCCASIONAL CHILD CARE SO PARENTS CAN TAKE A "NIGHT OUT," GO SHOPPING OR PARTICIPATE IN OTHER PARENT-ONLY ACTIVITIES."	DATE
#	COMMENTS FOR "1.12.5 PROVIDING OCCASIONAL CHILD CARE SO PARENTS CAN TAKE A "NIGHT OUT," GO SHOPPING OR PARTICIPATE IN OTHER PARENT-ONLY	<b>DATE</b> 8/27/2021 4:04 PM

# Q 1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:



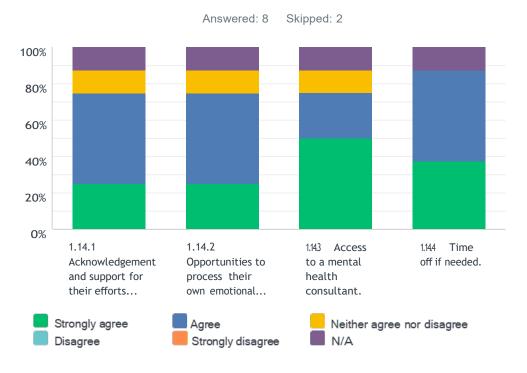
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE		
				DISAGREE							
1.13.1 Unde impact of fan and/or loss o members e children an respond appr	n all family especially d how to	50.00% 4	37.50%	12.50% 1	0.00%	0.00% 0	0.00%	8	4.38		
1.13.2 Supportion families' imm long-term pla	ediate and	62.50% 5	37.50% 3	0.00% 0	0.00% 0	0.00%	0.00% 0	8	4.63		
1.13.3 Talkir about difficul helping them additional hel	t issues and access	37.50% 3	62.50% 5	0.00% 0	0.00%	0.00% 0	0.00% 0	8	4.38		
1.13.4 Maint	-	75.00%	25.00%	0.00%	0.00%	0.00%	0.00%	0	4.75		
confidentiality		6	2	0	0	0	0	8	4.75		
1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.		50.00% 4	37.50%	12.50% 1	0.00%	0.00%	0.00%	8	4.38		
1.13.6 Unde trauma and it children and help.		62.50% 5	25.00%	12.50% 1	0.00%	0.00%	0.00% 0	8	4.50		
1.13.7 Other agencies pro specialized s families and	viding ervices to	62.50% 5	37.50%	0.00%	0.00%	0.00%	0.00%	8	4.63		
#		L FAMILY MEM				Y CRISES AND HOW TO RESF		DATE			
1	It would help if	it was available	e					8/2/2021 9	:53 AM		
#	COMMENTS I	FOR "1.13.2 SU	IPPORTING	FAMILIES' IM	IMEDIATE AND	LONG-TERM		DATE			
	There are no re	esponses.									
#		FOR "1.13.3 TA EM ACCESS A			OUT DIFFICUL	T ISSUES AND		DATE			
	There are no re	esponses.									
#	COMMENTS	FOR "1.13.4 MA	AINTAINING	CONFIDENTI	ALITY."			DATE			
	There are no re	esponses.									
#	There are no responses.  COMMENTS FOR "1.13.5 RECOGNIZING DOMESTIC VIOLENCE, DEPRESSION, DEVELOPMENTAL DELAYS, MENTAL ILLNESS, CHRONIC HEALTH PROBLEMS, SUBSTANCE ABUSE AND OTHER SIGNS OF IMMINENT CRISIS AND KNOWING HOW TO RESPOND APPROPRIATELY."										

### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

There are no responses.

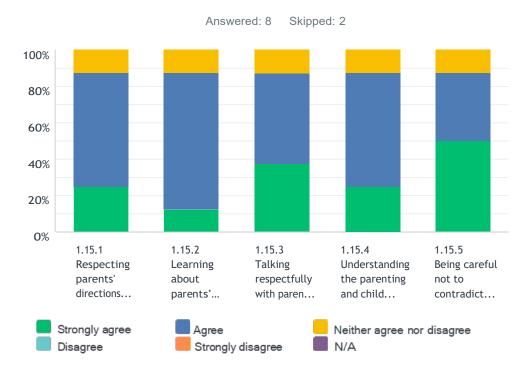
#	COMMENTS FOR "1.13.6 UNDERSTANDING TRAUMA AND ITS IMPACT ON CHILDREN AND HOW STAFF CAN HELP."	DATE
	There are no responses.	
#	COMMENTS FOR "1.13.7 OTHER COMMUNITY AGENCIES PROVIDING SPECIALIZED SERVICES TO FAMILIES AND CHILDREN."	DATE
1	If there was such help	8/2/2021 9:53 AM

## Q15 1.14 Staff receive program support when working with families under stress through:



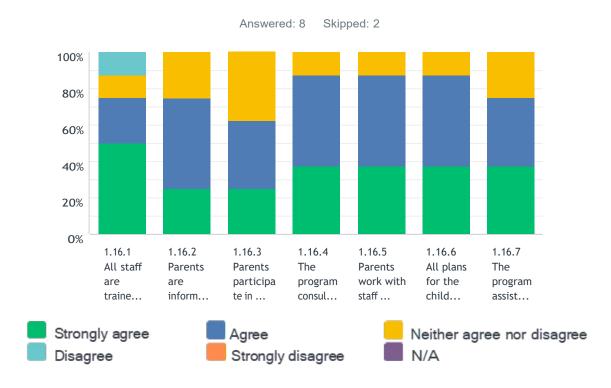
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.14.1 Acknowledgement and support for their efforts from supervisors and administrators.	25.00% 2	50.00%	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.14
1.14.2 Opportunities to process their own emotional reactions with appropriate support.	25.00% 2	50.00%	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.14
1.14.3 Access to a mental health consultant.	50.00% 4	25.00% 2	12.50% 1	0.00%	0.00%	12.50% 1	8	4.43
1.14.4 Time off if needed.	37.50% 3	50.00% 4	0.00%	0.00%	0.00%	12.50% 1	8	4.43

## Q 1.15 Staff reinforce parental authority by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.15.1 Respecting parents' directions and/or decisions about their children.	25.00% 2	62.50% 5	12.50% 1	0.00%	0.00%	0.00%	8	4.13
1.15.2 Learning about parents' expectations and limits for their children.	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00%	0.00%	8	4.00
1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
1.15.4 Understanding the parenting and child behavior norms of the parent's culture.	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.13
1.15.5 Being careful not to contradict a parent in front of his or her child or other children.	50.00% 4	37.50% 3	12.50% 1	0.00% 0	0.00%	0.00%	8	4.38

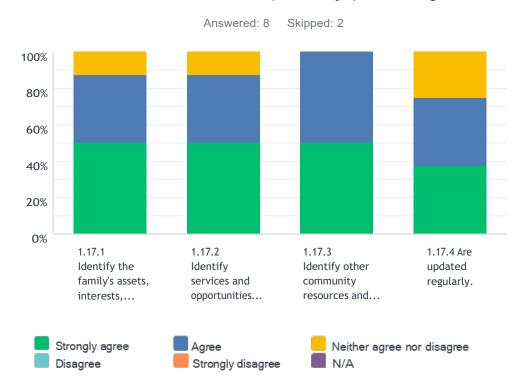
## Q 1.16 Parents are engaged as partners in developmental screeningsor assessments of their child:



### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

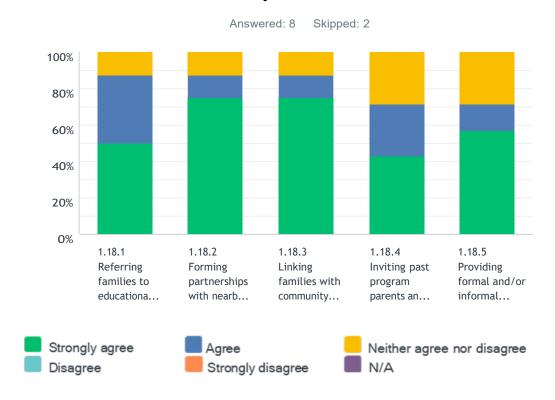
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.	50.00% 4	25.00%	12.50% 1	12.50% 1	0.00% 0	0.00%	8	4.13
1.16.2 Parents are informed about the confidentiality policy and what it means to them.	25.00% 2	50.00%	25.00% 2	0.00%	0.00% 0	0.00%	8	4.00
1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.	25.00% 2	37.50%	37.50% 3	0.00%	0.00% 0	0.00%	8	3.88
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.	37.50% 3	50.00%	12.50% 1	0.00%	0.00% 0	0.00%	8	4.25
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
1.16.6 All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.	37.50% 3	37.50%	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.13

## Q 1.17 Parents and staff develop family plans together that:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.	50.00% 4	37.50% 3	12.50% 1	0.00%	0.00%	0.00%	8	4.38
1.17.2 Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.	50.00% 4	37.50% 3	12.50% 1	0.00%	0.00%	0.00%	8	4.38
1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.	50.00%	50.00%	0.00%	0.00%	0.00%	0.00%	8	4.50
1.17.4 Are updated regularly.	37.50% 3	37.50% 3	25.00% 2	0.00%	0.00%	0.00%	8	4.13

## Q 1.18 The program supports a parent's personal education and careergoals by:

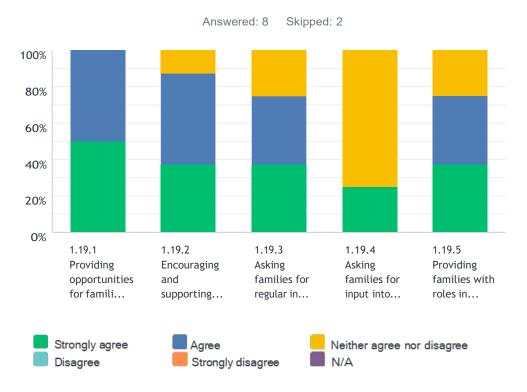


		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
	al and career g., GED ult education, employment , workplace nting skills, ob	50.00%	37.50%	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.38
1.18.2 Formi partnerships of educational reincluding high institutions, to families' learn and education	with nearby esources, ner education o support ning interests	75.00% 6	12.50% 1	12.50% 1	0.00%	0.00%	0.00%	8	4.63
1.18.3 Linkin with commun for internship and leadersh and other expexpand parer knowledge ar build on their interests.	ity resources s, volunteer ip activities periences that hts' nd skills and	75.00% 6	12.50% 1	12.50% 1	0.00%	0.00%	0.00%	8	4.63
1.18.4 Invitir program pare community vo share their ed and career ex with families.	ents and old old old old old old old old old ol	42.86% 3	28.57%	28.57% 2	0.00% 0	0.00%	0.00%	7	4.14
1.18.5 Provide and/or inform mentoring op (potentially walumni parentelders and/or professionals community) to resource and parent leader development	al parent portunities vith staff, ts/families, s in the o serve as a support for ship	57.14% 4	14.29% 1	28.57% 2	0.00% 0	0.00% 0	0.00%	7	4.29
#	COMMENTS FOR "1.18.1 REFERRING FAMILIES TO EDUCATIONAL AND CAREER RESOURCES (E.G., GED PROGRAMS, ADULT EDUCATION, ESL CLASSES, EMPLOYMENT OPPORTUNITIES, WORKPLACE LITERACY, PARENTING SKILLS, JOB TRAINING, JOB PREPARATION SKILLS)."								
	There are no re	esponses.							
#	RESOURCES	COMMENTS FOR "1.18.2 FORMING PARTNERSHIPS WITH NEARBY EDUCATIONAL RESOURCES, INCLUDING HIGHER EDUCATION INSTITUTIONS, TO SUPPORT FAMILIES' LEARNING INTERESTS AND EDUCATIONAL GOALS."							
	There are no re	esponses.							
#						SOURCES FOR THER EXPERIE		DATE	

### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

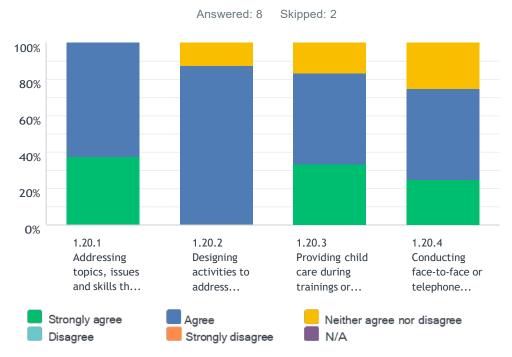
	THAT EXPAND PARENTS' KNOWLEDGE AND SKILLS AND BUILD ON THEIR CAREER INTERESTS."	
	There are no responses.	
#	COMMENTS FOR " 1.18.4 INVITING PAST PROGRAM PARENTS AND COMMUNITY VOLUNTEERS TO SHARE THEIR EDUCATIONAL AND CAREER EXPERIENCES WITH FAMILIES."	DATE
1	unknown	8/6/2021 8:13 AM
#	COMMENTS FOR "1.18.5 PROVIDING FORMAL AND/OR INFORMAL PARENT MENTORING OPPORTUNITIES (POTENTIALLY WITH STAFF, ALUMNI PARENTS/FAMILIES, ELDERS AND/OR PROFESSIONALS IN THE COMMUNITY) TO SERVE AS A RESOURCE AND SUPPORT FOR PARENT LEADERSHIP DEVELOPMENT."	DATE
	There are no responses.	

## Q 1.19 The program provides opportunities and support for families toserve as leaders and decision-makers by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.19.1 Providing opportunities for families to volunteer and contribute to the program.	50.00% 4	50.00%	0.00%	0.00%	0.00%	0.00%	8	4.50
1.19.2 Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles	37.50% 3	50.00%	12.50% 1	0.00%	0.00% 0	0.00%	8	4.25
1.19.3 Asking families for regular input on programmatic decisions.	37.50% 3	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.13
1.19.4 Asking families for input into staff hiring and training.	25.00% 2	0.00%	75.00% 6	0.00%	0.00% 0	0.00%	8	3.50
1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).	37.50% 3	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.13

### Q 1.20 The program promotes participation in activities by:



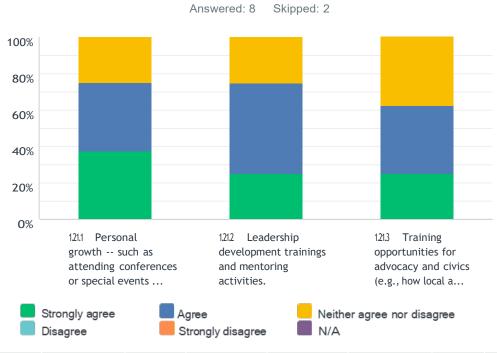
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.20.1 Addressing topics, issues and skills that families identify as important to them.	37.50% 3	62.50% 5	0.00%	0.00%	0.00%	0.00%	8	4.38
1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).	0.00%	87.50% 7	12.50% 1	0.00% 0	0.00% 0	0.00%	8	3.88
1.20.3 Providing child care during trainings or workshops.	33.33% 2	50.00%	16.67% 1	0.00%	0.00%	0.00%	6	4.17
1.20.4 Conducting face- to-face or telephone outreach to families who might not otherwise participate.	25.00% 2	50.00%	25.00% 2	0.00%	0.00%	0.00%	8	4.00

#	COMMENTS FOR "1.20.1 ADDRESSING TOPICS, ISSUES AND SKILLS THAT FAMILIES IDENTIFY AS IMPORTANT TO THEM."	DATE
	There are no responses.	
#	COMMENTS FOR "1.20.2 DESIGNING ACTIVITIES TO ADDRESS INTERESTS OF DIFFERENT FAMILY MEMBERS (E.G., FATHERS, MOTHERS, OTHER FAMILY MEMBERS)."	DATE
	There are no responses.	

### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

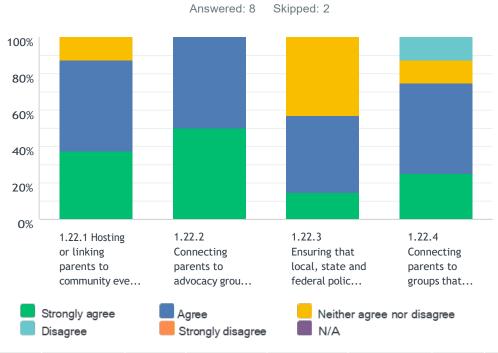
#	COMMENTS FOR "1.20.3 PROVIDING CHILD CARE DURING TRAININGS OR WORKSHOPS."	DATE
1	unknown	8/6/2021 8:13 AM
#	COMMENTS FOR "1.20.4 CONDUCTING FACE-TO-FACE OR TELEPHONE OUTREACH TO FAMILIES WHO MIGHT NOT OTHERWISE PARTICIPATE."	DATE

## Q 1.21 The program helps to support the continued development ofparent leaders by supporting:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents.	37.50% 3	37.50%	25.00% 2	0.00%	0.00% 0	0.00%	8	4.13
1.21.2 Leadership development trainings and mentoring activities.	25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00%	0.00%	8	4.00
1.21.3 Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).	25.00% 2	37.50% 3	37.50% 3	0.00%	0.00% 0	0.00%	8	3.88

## Q 1.22 The program helps to support parents' opportunities for leadership in community change by:



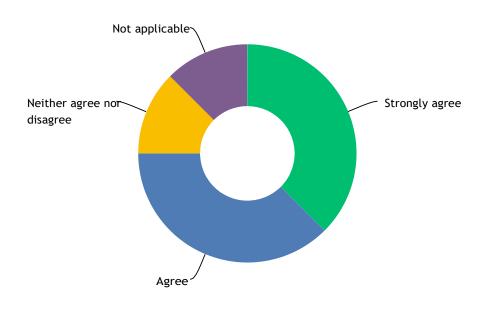
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.22.1 Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.	50.00% 4	50.00%	0.00%	0.00%	0.00%	0.00%	8	4.50
1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.	14.29% 1	42.86%	42.86% 3	0.00%	0.00%	0.00%	7	3.71
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.	25.00% 2	50.00%	12.50% 1	12.50% 1	0.00%	0.00%	8	3.88

### Cone Park Library - Strengthening Families Self-Assessment Tool - Resilience

#	COMMENTS FOR "1.22.1 HOSTING OR LINKING PARENTS TO COMMUNITY EVENTS THAT HELP RAISE AWARENESS OF EMERGING COMMUNITY NEEDS AND ASSETS."	DATE
	There are no responses.	
#	COMMENTS FOR "1.22.2 CONNECTING PARENTS TO ADVOCACY GROUPS THAT WORK ON ISSUES RELATED TO CHILD, FAMILY AND COMMUNITY NEEDS."	DATE
	There are no responses.	
#	COMMENTS FOR "1.22.3 ENSURING THAT LOCAL, STATE AND FEDERAL POLICY INFORMATION IS DISCUSSED AT STAFF MEETINGS/ADVISORY COUNCIL MEETINGS AND RELEVANT INFORMATION IS SHARED WITH FAMILIES."	DATE
1	unknown	8/6/2021 8:13 AM
#	COMMENTS FOR "1.22.4 CONNECTING PARENTS TO GROUPS THAT INFORM AND SHAPE POLICY AT THE LOCAL, STATE OR NATIONAL LEVEL."	DATE
	There are no responses.	

## Q 1.23 Staff receive training on talking with parents about helpingchildren in times of family crisis.

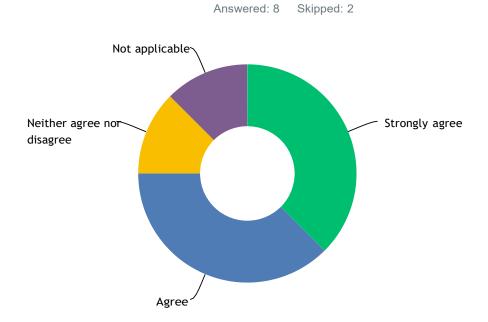
Answered: 8 Skipped: 2



ANSWER CHOICES	RESPONSES	
Strongly agree	37.50%	3
Agree	37.50%	3
Neither agree nor disagree	12.50%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	12.50%	1
TOTAL		8
# COMMENT	DATE	

#	COMMENT	DATE
	There are no responses.	

Q 1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including: How stress impacts the child's brain, behavior and development • Recognizing the signs of stress in children • How stress may impact the child's behavior andhow to shape adult responses to the child's behavior accordingly • The important role that parents and caring adults play in buffering children during stressful times

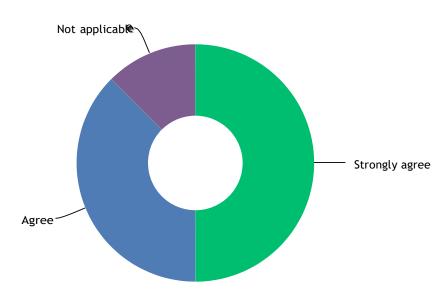


**ANSWER CHOICES RESPONSES** 37.50% 3 Strongly agree 37.50% 3 Agree 12.50% 1 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 12.50% 1 Not applicable **TOTAL** 8

#	COMMENT	DATE
	There are no responses.	

Q26 1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.





ANSWER CHOICES		RESPONSES		
Strongly agree		50.00%		4
Agree		37.50%		3
Neither agree nor disagree		0.00%		0
Disagree		0.00%		0
Strongly disagree		0.00%		0
Not applicable		12.50%		1
TOTAL				8
#	COMMENT		DATE	
	There are no recommended			

There are no responses.





The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting

Social and Emotional Competence of Children

Christen Lancaster (Cone Park Library Resource Center Community Research Coordinator), Robin Perry (Lead Evaluator), Celia George, Ruth Goodman, Lovell Haughton, Lashon Jenkins, Diane Johnson, Artie McMillan, Erica Reed, Stephanie Seawright, and Toni Spoliansky (CP SFSA Team)

**Institute for Child and Family Services Research** 



This report was funded by the Children's Bureau; Administration on Children, Youth, and Families; Administration for Children and Families, U.S. Department of Health and Human Services, under grant # 90CA1868. The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of the Children's Bureau.

### **Table of Contents**

	Page	
Introduction		
The CP Library Resource Center—Brief History	1	
The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs	2	
The CP Strengthening Families Self-Assessment Team		
Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/ Action Items Associated with Supporting Families by Promoting Social and Emotional Competence of Children		
How Does Cone Park Library Resource Center Help Parents Foster Their Child's Social Emotional Development?	10	
How Does Cone Park Library Resource Center Model Nurturing Care to Children?	12	
How Does Cone Park Library Resource Center Include Children's Social and Emotional Development Activities in Programming?	14	
How Does Cone Park Library Resource Center Help Children Develop a Positive Cultural Identity and Learn to Interact in a Diverse Society?	16	
How Does Cone Park Library Resource Center Respond Proactively When Social or Emotional Development Needs Extra Support?	19	
Fidelity of Promoting Social and Emotional Competence of Children to CSSP Protective Factor		
Appendix A: The Strengthening Families Self-Assessment Tool		
Appendix B: Electronic Version of Social and Emotional Competence of Children Questions of SFSA Tool		
Appendix C: SFSA Tool for Community-Based Programs—Social and Emotional Competence of Children Results		

### Suggested Citation:

Lancaster, C., Perry, R., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2022). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social and Emotional Competence of Children*. Tallahassee: Institute for Child and Family Services Research.

#### Introduction

This report summarizes findings from, and recommendations developed by the Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) team utilizing a standardized process developed by the Center for the Study of Social Policy. This report focuses specifically upon findings generated from the utilization of the Strengthening Families Self-Assessment Tool for Community-Based Programs (and associated processes) by the CPLRC SFSA team with a specific focus on items/measures associated with supporting families by promoting social and emotional competence of children. Social and Emotional Competence of Children is one of five protective factors that serve as an organizing framework for the structure and delivery of supports and services to the neighborhood/community served by the Cone Park Library Resource Center. Specific strengths associated with promoting social and emotional competence of children have been identified along with discussion and a recommended action item for enhancing/strengthening responsiveness to address this protective factor.

#### The Cone Park Library Resource Center—Brief History

Partnership for Strong Families (PSF), the lead community-based care agency under contract with the Florida Department of Children and Families (since 2003) to provide comprehensive child welfare services in 13 North Central Florida counties, has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in North Central Florida). PSF's efforts began in 2007 to develop a network of Family Resource Centers (FRC) that emphasize a strengthening family approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

The PSF Resource Center (RC) model is built upon a multi-system collaborative focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care. One of the major strengths of the Resource Center Model utilized at the four existing sites (which includes the CPLRC) is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There is a strong history of collaboration with each of the existing three Resource Centers in Gainesville. Over time, a network of over 75 community partners (across all sites) has been developed. These collaborative efforts have been well documented in select Resource Center reports (for each RC and PSF), website and social media posts, Resource Center pamphlets/infographics, news reports, and select publications. The services provided are free and are intended to be responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons and enhancement of the community's ability to leverage resources to benefit some of Gainesville's most at-risk populations.

The first Family Resource Center developed by Partnership for Strong Families was the Library Partnership Family Resource Center (developed in collaboration with the Alachua County Library District) which opened its doors to the community in July 2009. In 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, a historically under-served community. Due to the existing perceived success of the Library Partnership Resource Center, along with the identified needs of the community, Partnership for Strong Families (PSF) was asked to partner with ACLD to also open a resource center at the Cone Park Library. As southeast

Gainesville was considered a "hotspot" of high rates of reported child maltreatment, PSF eagerly agreed to move forward with this new venture. Prior to opening the new Resource Center, PSF met with the community, assessed household needs, and established collaborative partnerships. Through community meetings and assessments, several local needs were identified that the new Resource Center could help address. The following local needs were identified: GED services, concrete and educational supports for children and parents, meaningful engagement and empowerment of parents and access to healthcare in southeast Gainesville. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Resource Center began operating full-time in May 2014.

All Gainesville Resource Centers are frequently described as "one-stop-shops" for local resources. Patrons may walk into the RCs for immediate access to available services or meet with professional RC staff to help determine needs and connect with local resources. Services provided through the RCs are voluntary and are free of charge to all community members as the result of community partnerships, various funding opportunities, and both monetary and in-kind donations.

The basis of PSF's RC Model is the Strengthening Families Approach and Protective Factors Framework (Center for the Study of Social Policy [CSSP], 2014). The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each RC. Although there may be some common services and supports across RCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each RC. The five protective factors include:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the CP Library Resource Center at promoting knowledge of parenting and child development. This report represents one small element of a comprehensive process evaluation meant to advance knowledge regarding the functioning, responsiveness, and impact of PSF Family Resource Centers upon the communities they serve. Since supports and services at the CP Library Resource Center are structured in accordance with the CSSP Protective Factors Framework, the Strengthening Families Self-Assessment Tool for Community-Based Programs, and associated processes (see below) are being used to help determine the fidelity of specific implementation strategies (in accordance with the above noted framework) at promoting parental resilience and strengthening families. This process will help identify existing strengths of select supports and services and help identify areas for potential improvements.

### The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs

The Strengthening Families Self-Assessment Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) that will aid each in assessing the extent to which each of the RCs have implemented services/activities to engage and strengthen families with respect to

each of the protective factors<sup>1</sup>. The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Resource Center has implemented services/activities in alignment with core strategies for building each of the following protective factors (see above).

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). See Appendix A for a copy of the assessment tool and protocol. Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) two administrative and direct service staff, three community collaborators, and three parents who have been active participants in the program (or whose children participate in the program). The four parents/patrons initially selected to be members of each assessment team were chosen from a list of patrons that consented to be part of the broader study and who, following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons), received services or participated in activities linked to protective factors. These processes were followed in the establishment of the CPLRC SFSA Team, although only two community collaborators were able to actively participate in the process. Composition (see below) includes two administrators and direct service staff (Lashon Jenkins and Erica Reed), two community collaborators (Diane Johnson and Stephanie Seawright), and four Community Ambassadors (Celia George, Ruth Goodman, Lovell Haughton, and Artie McMillan). The term "Community Ambassador" was decided by the Team to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) contributions to this process. Profiles of team members are denoted below.

As highlighted in **Appendix A**, there are a series of indicators and associated items linked with each Protective Factor. These indicators and items represent a series of actions/activities, program elements, protocols, and policies associated with implementation of services meant to enhance each Protective Factor according to best-practice/evidence-based standards. For services and supports focused on Social and Emotional Competence of Children there are 16 indicators with 48 associated items for which each team member is asked to individually rate their level of item statement agreement on a five-point Likert-type scale (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree) with an option for Not Applicable. This same scale is used for an assessment of all Protective Factor items/indicators. Collectively (for Social and Emotional Competence of Children), responses to these assessment items are meant to respond to the following questions:

<sup>&</sup>lt;sup>1</sup> For more information regarding CSSP's Strengthening Families and Protective Factors Framework, please see: <a href="https://cssp.org/our-work/project/strengthening-families/">https://cssp.org/our-work/project/strengthening-families/</a> Additional information regarding the self-assessment model and associated methodology, tools, and recommended processes, see: <a href="https://cssp.org/our-work/projects/self-assessments-for-programs/">https://cssp.org/our-work/projects/self-assessments-for-programs/</a> and Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

How Does Cone Park Library Resource Center Help Parents Foster Their Child's Social Emotional Development? (Items 5.1.1 through 5.3)

How Does Cone Park Library Resource Center Model Nurturing Care to Children? (Items 5.4.1 through 5.6)

How Does Cone Park Library Resource Center Include Children's Social and Emotional Development Activities in Programming? (Items 5.7.1 through 5.8.2)

How Does Cone Park Library Resource Center Help Children Develop a Positive Cultural Identity and Learn to Interact in a Diverse Society? (Items 5.9 through 5.14)

How Does Cone Park Library Resource Center Respond Proactively When Social or Emotional Development Needs Extra Support? (Items 5.15.1 through 5.16.2)

Team members received an orientation to the CSSP Protective Factors framework, its relationship to the CPLRC service model, and the Strengthening Families Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. See Appendix B for a copy of the electronic version of the tool associated with Social and Emotional Competence of Children questions/items (the focus of this report). For the electronic versions, each team member was provided a unique (and secure) web link and a QR code, providing them with two electronic link options for responding to the survey (a preference/option desired by team members) but informed to respond only once. Although the names of members/respondents were known to all team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a team member completed a paper version of the tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the Lead Evaluator was available via phone and e-mail to field any questions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members complete their scores, these data were shared via a written summary report (see **Appendix C** for the *SFSA Tool for Community-Based Programs*— *Social and Emotional Competence of Children Results*) highlighting the distribution of responses by team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is not itemized in the tool protocols (it is left to the team), the lead evaluator suggested some processes and the team made initial decisions regarding how to proceed. Each question and associated items were reviewed as a collective and then as individual items. For many items established consensus and agreement was evident, especially for select items and questions identified as observed

strengths of the CPLRC. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (including by role of the respondent as a stratum) and /or the weighted mean score for a select item was below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences and a collective decision was made regarding whether an action item was needed or should be considered. The team engaged in facilitated brainstorming to identify potential recommendations for action items (if any). If any action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation will follow the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

The initial meeting of the CPLRC SFSA Team took place on July 21, 2021. Following a review of the SFSA, associated process, and expected deliverables, the Team decided to meet monthly over an extended timeframe through the fall months instead other options, including multiple times over a more concentrated time frame. Communication with, between, and among individual team members could take place in-between meetings but all discussion and brainstorming activities would take place during in-person, web-based, or hybrid meetings. Due to variations in community spread of Covid-19 during this timeframe, the meeting format changed/varied in accordance with safety concerns and Partnership for Strong Families service and administrative pandemic protocols. Subsequent meetings that involved the discussion of Social and Emotional Competence of Children items took place on November 17, 2021. A follow up to the November 17<sup>th</sup> meeting with the Manager of the CPLRC and the CPL was held on December 15, 2021. The dates and times of meeting were in accordance with preferred times and schedules of all Team members and attendees.

#### The Cone Park Strengthening Families Self-Assessment Team

As denoted earlier, a team of dedicated community ambassadors, CPLRC staff, and collaborative partners worked together to engage in a comprehensive assessment of the supports and services provided by the CPLRC in accordance with the CSSP's protective factors framework. The biographies of these team members are detailed below.



Celia George has been a patron at CPLRC since 2015. She is a Florida native and has spent much of her life living in Gainesville, FL. She graduated from the Santa Fe College Police Academy and went on to work with the University of Florida Police Department. During her time as a police officer, she moved near Morningside Nature Center which is only a few miles from the present location of CPLRC. She has raised two daughters who have gone on to be college graduates, building upon her successes. When Celia retired, she turned her attention to her grandchildren and began using the Fred Cone Park Facilities with them. She has made sure they are included in CPLRC summer camps, family events and activities like Homework Help and Girl Scouts. One of her granddaughters currently participates in the Girl Scouts program at CPLRC. She frequently uses the track behind the Cone Park library and attends the food distribution programs. She has been an

encouragement to her twin grandchildren who have started using the track as well. She wanted to be a part of this SFSA Team because "I want to help make a difference". Celia loves Cone Park because "it serves so many different purposes and meets the needs for so many families in the community".



Ruth Goodman has been a patron at the CPLRC since 2019. During that time, she also utilized services at the SWAG Family Resource Center and the Library Partnership Library Resource Center. She was born and raised in the French West Indies but after visiting the United States as a young woman she decided to stay and make a life for herself in the US. She married at age 19 and has raised 4 children with her husband. After retiring as a lead teacher for 20 years, Ruth now focuses on assisting with her 10 grandchildren. One of the ways she does this is by reaching out to the Resource Centers. She is happy to be a part of the Cone Park Library Resource Center because "it's very helpful and informative for children and families and the community". Ruth wanted to be a member of our Strengthening Families Self-Assessment Team because she wants to be a part of any work that could potentially help keep families together.



**Lovell Haughton** has been a patron of the CPLRC since August 2020. She is a native of New York but has been in this community for 30 years. Lovell has experience working with community organizations, resources, and support services for those diagnosed with HIV. Her drive to care for others pushes her forward in everything that she does. She strives to maintain and build partnerships with families and be a support and liaison for them. She also acts as a support for her family and 7 grandchildren. Lovell has enjoyed working with the CPLRC because it's community and family oriented.



Lashon Antonia Jenkins first became involved with the CPLRC 10 years ago, as a patron to the CPL. Lashon is a Gainesville native, residing on the eastside of town, where the CPLRC is located. For the past 10 years, she has been an employee with Partnership for Strong Families in the adoptions department. She has worked directly with CPLRC as an intern this last year to satisfy requirements for her Master of Social Work degree. Currently, Lashon holds a Bachelor of Arts in Psychology and a Master of Human Services degree. Her parents also live in the community, and she makes time to visit them regularly between school, work, and an occasional rest. Lashon likes the way patrons are treated by the staff as they seek services that they do not have access to, like computer use or emergency food and clothing. She is glad to be a part of the SFSA Team because "when we know how to

grow, it will make it that much better."



**Diane Holt Johnson** was born in Newark, New Jersey and has worked in Gainesville, FL for six years. She graduated from the University of Pennsylvania with a BA in Sociology and the University of South Florida with a master's degree in Library & Information Science. Diane has a lifetime of experience volunteering in churches, non-profit and social service organizations (i.e., United Way, Take Stock in Children, Boys & Girls Club, Reading Pals, American Cancer Society, local Community Development Corporations, and grassroots neighborhood associations.) She and her husband of 42 years, Derryl, have raised six children, who are their proudest accomplishments. She loves the CPLRC because it values families and works to preserve them; emphasizes preventing and protecting families from disasters rather than correcting after the problem has festered; and provides programs to "help families help themselves" as much as possible. Diane has

been glad to be a part of the SFSA Team because it gives voice to the patrons, who historically have not been asked to have input into the programs and services designed for them.



Artie McMillan has been a patron at CPLRC since 2014. She has been a part of the local community for 14 years and frequented the Cone Park Library before the Resource Center opened. Artie has dedicated her life to serving others and has compassion for people who have fallen on hard times and are experiencing homelessness. She knows what it's like to struggle and wants to help people in need. Artie also has an entrepreneurial spirit and has managed her own restaurant, daycare, and prayer ministry in the past. Her dream would be to work on a Tiny House community that could serve as a one-stop center for people experiencing homelessness, offering practical help to stabilize them. She lives with her son and her two grandchildren that she has legal custody of through Partnership for Strong Families. In 2014, she began seeking regular services at CPLRC when the children came to live with her. Artie loves the care and compassion that is displayed at CPLRC and says, "you

can feel the good energy". She joined the SFSA Team because she trusted Erica's advice that she would be a good fit and because she wants to make a difference and have her voice heard, "not as a victim but as the victor".



**Erica Reed** has been the Resource Center Manager of the CPLRC since 2016. She has been in this community her entire life and many of her family members live in the community. Erica graduated from the University of Florida with a B.S. degree in Family, Youth and Community Sciences with minors in nonprofit organization, leadership, and human services. In addition to her education, she has experience working as a Guardian Adlitem, a case manager for high-risk cases and in licensing foster homes. Erica has been married for 23 years and lives at home with her husband, two boys and two girls. She has a genuine compassion for people and loves the CPLRC because it gives her the opportunity to help individuals and families in need. Erica is pleased with the SFSA Team process because it brought together a team with a common goal of wanting to make things better and because she wasn't alone in the process.



**Stephanie Seawright** has been a member of the Gainesville community since 1987 and has been working with the CPLRC since 2017. She helped developed the local A. Quinn Jones Museum and Cultural Center in Gainesville and works with her church and sorority to be of service to mankind. With a lifetime of experience serving others, Stephanie chooses to collaborate with CPLRC because she loves that the staff are helpful and care about the community they serve. As the Chief Operations Officer of the Central Florida Community Action Agency, she works to bring services like the "Fight for your Money" class to patrons of the Resource Center. Stephanie chooses to be a part of the Strengthening Family's Self-Assessment team because she is impressed with the work that the Resource Center does and wants to be a part of its success in any way.

Although not formally members of the CPLRC SFSA Team, Robin Perry (Lead Evaluator) and Christen Lancaster (Community Research Coordinator for the CP Library Resource Center) attended each of the CP SFSA Team meetings, they, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended the majority of the meetings served as key supports for Team processes. Robin Perry provided initial training and overview of the Center for the Study of Social Policy's SFSA Tool for Community-Based Programs and associated processes for review of findings and development of an action plan and recommendations by the team. Robin Perry was the lead facilitator of select group meetings; summarizing findings generated from the self-assessment tool/survey, asking questions, and clarifying team members' views as they discussed survey results with the goal of moving toward a consensus of perspective related to select survey questions and recommended action items for the CP Library Resource Center. Christen Lancaster is the Community Research Coordinator for the CPLRC and a principal on-site contact for team members. Ms. Lancaster maintained regular contact with team members and distributed meeting materials; aided with facilitation of group processes, and (along with Robin Perry) took detailed notes of comments and discussion items. Toni Spoliansky served as an information support and assisted in answering any questions individual team members had about the funded project and the role, function, and support of

Partnership for Strong Families for the CPLRC. It is important to note that the role of the above three individuals was seen as supportive in nature. An empowerment perspective was adopted, as a team they would decide the meeting schedule and facilitation process with all members assuming equal status as knowledge experts with respect to community needs and the role, value, functioning, and responsiveness of the CPLRC to community need related to supporting families through the promotion of parental resilience. There was no effort by those in supportive roles to censure conversation and discussion points, as feedback was regularly sought regarding facilitation processes and preferences of group members for these processes. All notes were converted into minutes that were distributed to team members for their review, edits, and approval. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (the team decided on monthly two-hour meetings) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings (which would then be discussed with all team members at the next in-person or virtual meeting).

## Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social and Emotional Competence of Children

The following represents a summary of key findings and recommendations by the team for questions and items associated with promoting social and emotional competence of children knowledge of parenting and child development. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the SFSA Tool for Community-Based Programs — Social and Emotional Competence of Children Results; distributed to all team members as a starting point for discussion and brainstorming activities. For the purposes of the summary, findings are presented in accordance with the broader questions select items/sets of questions the tool was structured to answer.

Many of the items in this protective factor are addressed on an individual level and are never shared with the larger group. Comments related to the service and support model (and associated actions of Ms. Reed, volunteers, and interns) denoted for Knowledge of Parenting and Child Development, it was asserted, apply to items affiliated with this protective factor (Social and Emotional Competence of Children). One community Ambassador responded to this idea with "whatever issues come up; she (Ms. Reed) is here." Each summary is followed by an itemization of select discussion points and any identified action items for which there was consensus among team members.

There was only one action item that was established following the discussion of SFSA findings associated with three protective factors (Concrete Supports, Knowledge of Parenting and Child Development, and Social and Emotional Competence of Children):

**Action Item #1:** Explore the possibilities of enhancing/expanding staff and space resources so that CPLRC can ensure a maximization of potential service and support benefits linked to protective factors.

## How Does Cone Park Library Resource Center Help Parents Foster Their Child's Social Emotional Development? (Items 5.1.1 through 5.3)

Findings in Table 1 provide a summary of how the CPLRC helps parents foster their child's social and emotional development, with 4 of the 7 items/indicators in the agreement range and items 5.1.1, 5.2 and 5.3 within the range of neither agree nor disagree.

Currently, the CPLRC has several programs that strengthen the child's social and emotional competence. Homework Help, Girl Scouts, and Science Club all offer opportunities to build up a child's confidence and knowledge while modeling nurturing care.

During an involved discussion of 5.1.1, a Community Ambassador (Ms. George) shared a recent example of CPLRC helping a mother who was exasperated by her child's struggles in school. The CPLRC Manager (Ms. Reed) was able to speak to the mother privately and give her hope and help identify next steps to move forward in supporting her child. The attributes of Ms. Reed, volunteers, and interns and their genuine sense of commitment and concern for the well-being of children and families was acknowledged by the team.

- 5.1 The program introduces family members to social and emotional development by:
  - 5.1.1 Providing parents with information on the importance of supporting children's healthy social and emotional development— and its connection to success in school and life.
  - 5.1.2 Helping parents understand age-appropriate social and emotional skills and behaviors.
  - 5.1.3 Providing opportunities to discuss social and emotional issues within a racial and cultural context.
  - 5.1.4 Offering parents ideas on how to foster a child's social and emotional learning at home.
  - 5.1.5 Asking about parents' observations of their child's social and emotional development.
- 5.2 Program activities provide opportunities to strengthen bonds between parents and their children (e.g., parent-child playgroups, playing together in cooperative games or make believe, cooking, making an art project together).
- 5.3 Staff respect families' knowledge and expertise about their children's unique strengths and challenges as they share information about social and emotional competence.

Ms. Reed reiterated that programming developed by partners is used to assist children and families with more specific social, emotional, behavioral, and mental health needs. She "...relies on the professionals [within PSF and collaborative partners] to get tips, advice, and consultation..." when needed to assist select families and those children with specific or special needs. Examples include obtaining advice as to how best support and enhance the learning experience of children participating in the after-school program that were identified to have ADHD (Attention Deficit Hyperactivity Disorder), ASD (Autism Spectrum Disorder), light sensitivities, and other special needs requiring individualized accommodations. Similar efforts of solicitation for consultation are made for children that participate in summer camps. All these efforts are done with the intent of better meeting the needs of the children and enhancing their experiences in programs.

Community providers who teach a range of classes for children's social and emotional well-being are wanted and welcomed at the CPLRC (some of which are collaborative partners), however low staffing prohibits CPLRC and its staff from establishing curriculum or leading such groups. The CPLRC and CPL managers are working collaboratively on reconnecting the Alachua County Council of Parent Teacher Associations (PTA)<sup>2</sup> with the library, as well as a program entitled "Help Me Help My Child!" that specializes in Florida developmental learning and teaching children with disabilities. The CPL also has partnerships with Florida Diagnostic & Learning Resources System (FDLERS) and Family Network on Disabilities (FND).<sup>3</sup>

Community providers who teach a range of classes for children's social and emotional well-being are wanted and welcomed at the CPLRC

Table 1: How Does Cone Park Library Resource Center Help Parents Foster Their Child's Social Emotional Development?	Team Score (Weighted Average)
5.1 The program introduces family members to social and emotional development by:	
5.1.1 Providing parents with information on the importance of supporting children's healthy social and emotional development— and its connection to success in school and life.	3.82
5.1.2 Helping parents understand age-appropriate social and emotional skills and behaviors.	4.09
5.1.3 Providing opportunities to discuss social and emotional issues within a racial and cultural context.	4.00
5.1.4 Offering parents ideas on how to foster a child's social and emotional learning at home.	4.09
5.1.5 Asking about parents' observations of their child's social and emotional development.	4.00
5.2 Program activities provide opportunities to strengthen bonds between parents and their children (e.g., parent-child playgroups, playing together in cooperative games or make believe, cooking, making an art project together).	3.70
5.3 Staff respect families' knowledge and expertise about their children's unique strengths and challenges as they share information about social and emotional competence.	3.82

-

<sup>&</sup>lt;sup>2</sup> For more information regarding the Alachua County Council PTA please see: <a href="https://accpta.org/about/our-mission/">https://accpta.org/about/our-mission/</a> This organization serves as a branch of Florida PTA, supporting and providing the county voice for local PTA school units.

<sup>&</sup>lt;sup>3</sup> For more information regarding the Florida Diagnostic & Learning Resources System (FDLERS) please see: <a href="https://www.fdlrs.org/">https://www.fdlrs.org/</a> They provide an array of instructional and technical support services to school district Exceptional Student Education programs statewide. For more information on the Family Network on Disabilities (FND) please see: <a href="https://fndusa.org/">https://fndusa.org/</a> They are a family-centered and family-driven grassroots organization for persons with disabilities and their families.

## How Does Cone Park Library Resource Center Model Nurturing Care to Children? (Items 5.4.1 through 5.6)

Findings in Table 2 (see below) highlight the team's assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 12 of the 16 items/indicators the CP Library Resource Center models nurturing care to children, with 4 within the Neither Agree nor Disagree range.

The team agreed that staff nurture children and model nurturing for parents by:

- 5.4.1 Responding consistently to children in a warm, supportive manner.
- 5.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.
- 5.4.3 Showing warmth through appropriate physical contact.
- 5.4.4 Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).
- 5.4.5 Responding sympathetically to help children who are upset, hurt or angry.
- 5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.
- 5.4.7 Modeling empathy and appropriate emotional responsiveness.

The team came to consensus agreement that staff receive training, consultation, and ongoing coaching to support their skills in supporting children's social emotional development, including:

- 5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.
- 5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.
- 5.5.6 Promoting positive relationships among children living in the same household.
- 5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.
- 5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.

There was there was a score of neither agreement nor disagreement as to whether staff receive training, consultation, and ongoing coaching to support their skills in supporting children's social emotional development, including:

- 5.5.1 Fostering children's social and emotional development in the context of their culture and language.
- 5.5.2 Recognizing behavioral/emotional problems or developmental delays.
- 5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.

Responses to 5.5.1, 5.5.2, and 5.5.5 were, in part, impacted by a lack of awareness of select members of what trainings were provided to staff. Though CPLRC staff receive training in Mental Health First Aid<sup>4</sup> and other peer reviewed trainings, it is not standard practice to post this information in the RC where space and time are focused on providing resources to community members. Some support exists within the team for posting or making it known to the community and patrons the scope and nature of training that CPLRC staff receive. In any regard, there is a clearly identified peer support mechanism between the CPL and CPLRC managers that consult with one another regarding identified (either through direct observation and/or communications with children, parents/caregivers) social and emotional needs of select children that access services and supports at the CPL and CPLRC. Proactive engagement in a supporting manner with a child, parent/patron is valued by both managers. As an example, it was noted that Ms. Johnson (the CPL Manager) recently observed a young man struggling with reading while at the library. She consulted privately with Ms. Reed and the child's mother, whom both managers have worked with and supported extensively in the past on other service/support matters. Because of the rapport that has already been built with this mother, when advice to put her child in the Homework Help (a CPLRC service) was given, the mother was open to the idea and did so. These proactive (nonstigmatizing) efforts help establish and build upon existing trust with parents, subsequently enhancing the likelihood of children and families utilizing existing services and supports that can aid in meeting the social and emotional needs of their children. The development of meaningful, trusting, and authentic professional relationships between staff and parents is an important component for the CPLRC and CPL service model.

The development of meaningful, trusting, and authentic professional relationships between staff and parents is an important component for the CPLRC and CPL service model.

There was a neither agreement for disagreement result for:

5.6 Families are invited to observe their children interacting with other children and/or staff in the program.

<sup>&</sup>lt;sup>4</sup> For more information regarding Mental Health First Aid trainings please see:

https://www.mentalhealthfirstaid.org/ These trainings are an initiative of the National Council for Mental Wellbeing (see: https://www.thenationalcouncil.org/ for more information). Staff at CPLRC have access to all professional development trainings offered or contracted by the Partnership for Strong Families. For a list of existing training provided by the Partnership, please see: https://www.pfsf.org/training/professional-development/

Table 2: How Does Cone Park Library Resource Center Model Nurturing Care to Children?	Team Score (Weighted Average)
5.4 Staff nurture children and model nurturing for parents by:	
5.4.1 Responding consistently to children in a warm, supportive manner.	4.38
5.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.	4.50
5.4.3 Showing warmth through appropriate physical contact.	4.22
5.4.4 Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).	4.57
5.4.5 Responding sympathetically to help children who are upset, hurt or angry.	4.43
5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.	4.57
5.4.7 Modeling empathy and appropriate emotional responsiveness.	4.43
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's social emotional development, including:	
5.5.1 Fostering children's social and emotional development in the context of their culture and language.	3.86
5.5.2 Recognizing behavioral/emotional problems or developmental delays.	3.83
5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.	4.43
5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.	4.14
5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.	3.71
5.5.6 Promoting positive relationships among children living in the same house hold.	4.00
5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.	4.14
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.	4.00
5.6 Families are invited to observe their children interacting with other children and/or staff in the program.	3.60

# How Does Cone Park Library Resource Center Include Children's Social and Emotional Development Activities in Programming? (Items 5.7.1 through 5.8.2)

Table 3 provides a detailed summary of How Cone Park Library Resource Center Includes Children's Social and Emotional Development Activities in Programming. Within Table 3 items 5.7.2 and 5.7.4 were the only items scoring with a census agreement threshold (4.0). Programming for Social and Emotional Competence of Children (protective factor) reportedly include classes that involve age-appropriate musical activities (e.g., guitar lessons and activities); however, these activities/events have not been maintained due to historically low participation rates. Both managers' report programming specific to this protective factor has been difficult due to variation in parents' work schedule (reportedly, many parents within the community do shift work) and lack of patron interest.

Ms. Reed and Ms. Johnson commented on their frustration in seeing the parking lot filled with parents and kids for sporting programs using the fields behind the Cone Park Library (CPL) while helpful

programs for parents and children go unattended. The CPL staff attempted to feed off this interest in sports activity by providing tutoring to children on the sports teams who were struggling in school. The coach was reportedly ecstatic for the library's support and the established partnership but as soon as attending children got better in school, they would participation in the program "teetered off" with limited expansion/recruitment of new/additional children. Although the recreational and sports facilities (and associated organized team sports) adjacent to the CPLRC and CPL are valued assets for the children and families in the community served, some concern was expressed by staff regarding the motivation and interest of select parents in addressing other developmental (including social and emotional) needs of their children. Ms. Johnson remarked: "For some parents it wouldn't matter if you knocked on their door and offered to read to their child in their home, they still wouldn't be interested." Reported variation of parental interest and motivation (or different prioritization) in participation in targeted supports and programs structured around this protective factor was identified as a challenge for both program managers. Subsequently, limited programming options and family participation in past activities contributed to a lack of consensus agreement (average team scores reflect a neither agree nor disagree rating) for the following items:

- 5.7 The program supports children's social and emotional development with intentional practices that include:
  - 5.7.1 Encouraging children to express their feelings in ways that are the most comfortable for them.
  - 5.7.3 Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).
  - 5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).

The team highlighted that these ratings are not meant to imply that the CPLRC and CPL managers and staff are not sensitive and/or responsive to the social and emotional needs of children served. In fact, manager and staff efforts of engagement and attentiveness to these needs were praised. It was noted that children sometimes arrive at Cone Park aggravated and experiencing stress and there is no way of knowing what they are going through at home. Staff at the CPLRC and CPL model an open and calm means of interaction. Community Ambassadors agree that they have witnessed their children and the children of other people being comforted by staff. Community Ambassadors, whom have all been long time patrons of the CPLRC all strongly agreed that Ms. Reed is "like family to us" and "she knows who we really are". Efforts are made to respond to these needs (see above comments for 5.5.5) as best that staff at CPLRC and CPL can and in consultation with community partners/professionals. Efforts are also made (resources permitting) to consider or re-consider the integration of additional supports or contracts with collaborative partners to provide targeted programming for children. Ms. Reed was happy to report that the organization that previously ran the Courageous Kids group has been secured to come back to the CPLRC. This programming, in addition to Homework Help, Girl Scouts and Science Club will help build up children's social and emotional competence.

Community Ambassadors, whom have all been long time patrons of the CPLRC all strongly agreed that Ms. Reed is "like family to us" and "she knows who we really are".

There was no expanded discussion or recommended action item associated with the following items that received a consensus rating of neither agree nor disagree:

- 5.8 Mental health consultants assist staff in integrating social emotional development into everyday work by:
  - 5.8.1 Providing coaching on how to support social and emotional learning for all children.
  - 5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.

Table 3: How Does Cone Park Library Resource Center Include Children's Social and Emotional Development Activities in Programming?	Team Score (Weighted Average)
5.7 The program supports children's social and emotional development with intentional practices	
that include:	
5.7.1 Encouraging children to express their feelings in ways that are the most comfortable for them.	3.71
5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.	4.00
5.7.3 Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).	3.86
5.7.4 Setting clear expectations and limits for behavior.	4.00
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).	3.71
5.8 Mental health consultants assist staff in integrating social emotional development into	
everyday work by:	
5.8.1 Providing coaching on how to support social and emotional learning for all children.	3.67
5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.	3.83

How Does Cone Park Library Resource Center Help Children Develop a Positive Cultural Identity and Learn to Interact in a Diverse Society? (Items 5.9 through 5.14)

Table 4 provides a detailed summary of the individual items/questions associated with how Cone Park Library Resource Center helps children develop a positive cultural identity and learn to interact in a diverse society. Of the 12 identified items, the team scores signaled agreement with 5 items (41.7%). These items are as follows:

- 5.10 Staff receive training on how cultural differences affect social and emotional development, especially differences in:
  - 5.10.1 How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.
- 5.11 Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:
  - 5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.
  - 5.11.3 Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.
- 5.12 Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.
- 5.13 The program's mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots.

The remainder of items from Table 4 fall between the neither agree nor disagree range. These are:

- 5.9 The program welcomes and affirms the cultures of families it serves by:
  - 5.9.1 Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.
  - 5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.
  - 5.9.3 Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.

While the CPL has many books for all developmental groups on cultural identity and diversity, Ms. Johnson is clear that this resource is not being utilized and many CPLRC patrons are not "funneling back" into the library to check out books/resources. The possibility of half sheets of book examples relevant to the patrons needs that could be given to the patron by Ms. Reed was discussed to build up library attendance. Ms. Reed also suggested incorporating "mini field trips" to the library for the children participating in afterschool programs at CPLRC; children can be walked through the process of getting a library card and checking out and returning books. A combined event a few times a year that supports learning about the library and getting a library card was also suggested.

- 5.10 Staff receive training on how cultural differences affect social and emotional development, especially differences in:
  - 5.10.2 The extent to which nonverbal communication is predominant across cultures.
  - 5.10.3 Diverse cultural views success and appropriate child development.

5.11 Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:

5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.

5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.

There was a limited detailed discussion of many of the individual item ratings denoted in Table 4. Comments spoke to the broader question associated with the scored items. Although there may not have been a consensus agreement on the majority of items (nor any specific recommended action items) the team made general assessments and agreed that the CPLRC staff go "...out of their way..." to accommodate the social and emotional needs, working directly with partners to identify plans for service delivery. Sensitivity to one-on-one individualized needs was seen as present in planned CPLRC and CPL activities. Ms. Reed reportedly consistently makes use of her community/collaborative partners' expertise (i.e., seeking professional consultation) in planning events that are accessible to all patrons. She has utilized advise from these partners on how to communicate with children and has provided sensory toys (in one example) in response to this advice. If the needs of the patron are too high to be accommodated at the center they are referred and connected with someone who can help.

CPLRC staff go "...out of their way..." to accommodate the social and emotional needs, working directly with partners to identify plans for service delivery

Table 4: How Does Cone Park Library Resource Center Help Children Develop a Positive	Team Score
Cultural Identity and Learn to Interact in a Diverse Society?	(Weighted Average)
5.9 The program welcomes and affirms the cultures of families it serves by:	
5.9.1 Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.	3.50
5.9.2 Inviting families to define and express their ethnicity or culture, including the	3.14
experiences and values they hold to be most important.	3.14
5.9.3 Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.	3.25
5.10 Staff receive training on how cultural differences affect social and emotional development,	
especially differences in:	
5.10.1 How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.	4.00
5.10.2 The extent to which nonverbal communication is predominant across cultures.	3.57
5.10.3 Diverse cultural views success and appropriate child development.	3.71
5.11 Staff are encouraged to enhance their own understanding and appreciation for different	
races, ethnicities, sexual orientations, languages and cultural expressions through:	
5.11.1 Being encouraged to share and reflect on their own cultural background, including	3.75
self-awareness of biases they may hold.	3.75
5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.	4.00
5.11.3 Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.	4.13
5.12 Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.	4.43
5.13 The program's mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots.	4.00
5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.	3.57

## How Does Cone Park Library Resource Center Respond Proactively When Social or Emotional Development Needs Extra Support? (Items 5.15.1 through 5.16.2)

Findings in Table 5 highlight the team's assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 5 of the 6 items/indicators the CP Library Resource Center responds proactively when social or emotional development needs extra support, with 1 (5.15.2) within the Neither Agree nor Disagree range.

The team reached consensus agreement that:

- 5.15 When staff are concerned about a child's social and emotional development, they respond by:
  - 5.15.1 Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.
  - 5.15.3 Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).

5.15.4 Helping parents develop strategies for addressing the issue at home.

5.16 Staff have access to a mental health consultant to help them:

5.16.1 Identify and receive additional resources and/or training to work effectively with individual children and parents.

5.16.2 Talk respectfully with parents about the child's development, needs or challenges.

Observation and collaboration continue to be the primary means utilized by the Managers to respond proactively when children need extra support. When they suspect or know a child needs support, they work with the parent—respecting their special role in the child's life—to determine what supports and referrals need to be made. In Homework Help, Ms. Reed and her staff look for those areas where a child is not confident in something they don't know how to do and focus on those things to encourage them where they are at, skill wise. The newest young participant showed confidence in math, however he was distracted and disinterested with his English homework. With keen observation Ms. Reed said, "You really get upset when it's time to read but I guarantee you if you continue to come here and continue to work on your words and let us help you, you will go to school and be confident when the teachers ask you to read aloud". Then, when the first and second word came that he read correctly, staff would give a lot of praise to begin to build up his confidence and his reading began to improve. After her son began doing good in Homework Help, the mother opened up and disclosed that her son has ASD which will allow staff to be even more supportive to the family. Ms. Johnson was glad to provide an update that she recently spotted him reading in the library.

Observation and collaboration continue to be the primary means utilized by the Managers to respond proactively when children need extra support

Where there was a lack of consensus agreement on items denoted in Table 4 and 5, the Team felt that although consensus was not reached on these points, the CPLRC staff are doing their best with the resources and supports they have. The Team identified a heavy dependency on Ms. Reed for all needs at the CPLRC. Ms. Reed is making the best use of the volunteers and interns that are affiliated and recruited for CPLRC; however, the need for additional paid staff was evident and made known.

Ms. Reed (the only full-time staff at CPLRC) expressed gratitude with Ms. Lancaster (The Community Research Coordinator) coming once a week to assist at the RC and another Partnership staff member coming every Wednesday to provide assistance. These supports have reportedly aided considerably in the reduction of strain on her and provided extra assistance in facilitating workplace task accomplishment. An expanded discussion of these realities, led to the following (and only) action item associated with this protective factor (denoted earlier):

**Action Item #1:** Explore the possibilities of enhancing/expanding staff and space resources so that CPLRC can ensure a maximization of potential service and support benefits linked to protective factors.

Table 5: How Does Cone Park Library Resource Center Respond Proactively When Social or Emotional Development Needs Extra Support?					
5.15 When staff are concerned about a child's social and emotional development, they respond by					
5.15.1 Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.	4.14				
5.15.2 Arranging for appropriate screenings and assessments.	3.88				
5.15.3 Connecting the family to resourc- es that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).	4.38				
5.15.4 Helping parents develop strategies for addressing the issue at home.	4.38				
5.16 Staff have access to a mental health consultant to help them:					
5.16.1 Identify and receive additional resources and/or training to work effectively with individual children and parents.	4.50				
5.16.2 Talk respectfully with parents about the child's development, needs or challenges.	4.33				

## Fidelity of Social and Emotional Competence of Children Services and Supports to CSSP Protective Factor

As denoted earlier, the SFSA Team identified the weighted average Team score as the consensus measure for each item associated with the Social and Emotional Competence of Children assessment questions. Following the development of a consensus rating, individual item scores were converted —in keeping with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014)<sup>5</sup> method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree or Disagree, and Not Applicable. Within the Tables denoted in this report, any green shaded cells (Agree and Strongly Agree) reflect a score of 1 and any yellow (Neither Agree or Disagree), red (Disagree and Strongly Disagree), or no shade (Not Applicable) reflects a score of 0 (zero). These scores were summed for the Social and Emotional Competence of Children Protective Factor where scores <50% of the total score possible represent low fidelity, 50-74% represent moderate fidelity, and >75% possible scores represent high fidelity. The aggregate fidelity score from all tabled findings is 28 (of a possible score of 48) or 58%, suggesting that the services and supports associated with the Social and Emotional Competence of Children were implemented with moderate fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

<sup>&</sup>lt;sup>5</sup> Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

Tarr, J., Harnar, M. A., & Ahsan, N. (2014). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Unpublished whitepaper presented at the National Association for the Education of Young Children's annual conference in Dallas, TX.

## Appendix A

### STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR COMMUNITY-BASED PROGRAMS



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### ABOUT THE SELF-ASSESSMENT

The Program Self-Assessment helps programs determine how well they are implementing strategies to strengthen families. The Self-Assessment is based on findings from a national study that identified exemplary programs across the country. It allows all programs to compare their practices with those of the exemplary programs and identify areas for improvement. The Self-Assessment outlines how the protective factors can be supported through small but significant changes in program practice. It is written for programs committed to working with and supporting the families they serve. Versions of the Self-Assessment are available for:

- · Center-based early care and education programs
- · Family child care settings
- Home visiting programs
- Community-based programs such as family resource centers

While there is significant overlap across these different versions, each also contains unique strategies specific to each setting.

The Program Self-Assessment materials in this document are applicable to community-based programs serving children and families. The concrete actions described in the self-assessment can be carried out in a variety of settings such as family support and parenting education programs, health care settings, community centers and others. The strategies described can be implemented without creating new staff positions, making significant changes to existing facilities or raising additional financial resources.

#### **ORGANIZATION**

The Self-Assessment outlines practices used by exemplary programs to support families, organized around five protective factors:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

Each section starts with a brief description of the protective factor and core strategies for building that protective factor. Self-Assessment items are organized under each of these core strategies. In this version of the Self-Assessment there

is also a special section about <u>Responding to Possible Child</u> <u>Abuse or Neglect</u>.

#### **COMPLETING THE SELF-ASSESSMENT**

While the Self-Assessment forms may appear long at first glance, most sections have fewer than ten items. To make the process easier, the forms address specific practices; thus, multiple practice examples often appear under a single strategy. While the time it takes to complete the Self-Assessment will vary from program to program and from form to form, on average, each form can be completed in approximately 90 minutes.

CSSP strongly recommends that programs create a Self-Assessment team that represents a number of different perspectives at your program, including:

- Administrative staff and/or program director
- · Direct service staff
- Parents who participate in the program (or whose children participate in the program)

Including a diverse group of participants in the Self-Assessment evaluation process allows programs to benefit from a large variety of viewpoints and perspectives. Once a team has been identified, the process begins by following the steps outlined below.

First, each member of the team should fill out the Self-Assessment forms individually.

Next, the team should convene to share and compare assessments. Teams should use this time to discuss rating results that differ among various team members, giving each person an opportunity to describe why they rated the practice the way they did and—if appropriate—to provide an example. Once everyone has had a chance to speak, all team members should be given an opportunity to re-rate the practice. It is not necessary for the entire team to come to consensus on every practice, but it is important that all team members come to understand each other's perspectives and that a final decision is made on how to rate the item based on broad input.

The consensus version of the Self-Assessment can be entered online at <a href="www.mosaic-network.com/gemslive/cssp/">www.mosaic-network.com/gemslive/cssp/</a>. Completing the Self-Assessment online allows the program to print reports showing strengths and areas to focus on improvement, as well as to link to parent and staff surveys.



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CREATING AN ACTION PLAN**

Once all team members have re-rated the practices, the team should identify areas where the program scored highly. Next, the team should create a sustainability plan to keep these areas strong. In developing a sustainability plan for each successful area, teams should be sure to specify:

- · Key reasons for success in the area
- What needs to be done to ensure continued strength in the area
- Who will be responsible for maintaining successful outcomes in the area

Next, the team should highlight practice areas that a majority of the team rated poorly. While we encourage programs to work on each of these areas eventually, the team can begin by deciding whether each poorly rated practice should be addressed (1) immediately, (2) over time, or (3) not at all. Again, teams should allow time for discussion and

reevaluation if/when team members disagree on practice ratings. When a majority of team members identify items that should be addressed immediately, teams should brainstorm plans to improve associated area outcomes. Teams should be sure to specify:

- The expected results
- All required resources (including staff hour costs)
- · A timeline for achieving the desired results
- · Who is responsible for each action step
- Check-in points for monitoring implementation progress
- How and when longer term action steps will be addressed/implemented

#### PARENTAL RESILIENCE

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

visits are unexpected.

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		45.	Strongly agi	Wifes 3.	Meither age	ge not disaftee	jee Stangh di	sages Comments
	d affirm the central role of parents in their teraction with families including policies, ication.							
1.2 The program has multiple avenues for regular communication with families.	1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.							
	1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.							
	1.2.3 Staff regularly ask parents about their observations of their child.							
1.3 All family members are made to feel welcome:	1.3.1 Someone is available to greet families when they come in.							
	1.3.2 Staff are respectful even when family							



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?  5: Strongly ages  5: Strongly ages  7: Weither ages under the parents are valued?											
		49.	, K	'5	' '		, A	Comments			
1.4 Staff develop mutually respectful relationships with all family members by:	1.4.1 Taking time to get to know family members individually, by name.										
an failing members by:	1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.										
	1.4.3 Regularly inquiring about what is happening in their lives.										
	1.4.4 Providing emotional support and encouragement.										
	1.4.5 Sharing appropriate information about themselves.										
	1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.										
	1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.										
	1.4.8 Using intake forms, applications and surveys that are gender-neutral.										



PARENTAL RESILIENCE: SELF How do programs demonstra		45	Strongly agget	es 3: Heiner	gree in lister	es strongly disagn	ce Comments
1.5 Staff show that they value fathers and are sensitive to their unique	1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.						
needs by:	1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.						
	1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.						
	1.5.4 Providing peer activities or services that are man-to-man, father-to-father.						
	<b>1.5.5</b> Engaging male participants to greet other men at program activities.						
	<b>1.5.6</b> Establishing ongoing partnerships with community resources that provide services to fathers.						
	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.						
	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.						
	<b>1.5.9</b> Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.						



PARENTAL RESILIENCE: SELF-How do programs honor each culture, history and approach	ı family's race, language,	5; Stan	A. Here 3. N	teither agree Inchieses	gee Met Application	
1.6 Program staff ensure that all families, regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.  1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.  1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.  1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.  1.6.5 The program displays diverse families and family structures in books, posters and program materials.					Comments
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.  1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.  1.7.3 Designed or selected to reflect the culture(s) of the community served.					



					Meither agri	or disagr	*/ */	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		Strongly ag	See /	, agr	e ne	Strongly die	a thicaite
How do programs demonstrat	e that parents are valued?	6	Strong!	Agree 3	Heither O.	Disagit.	Strong!	A Applie
		,,						Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	<b>1.8.1</b> Inviting partner organizations to provide workshops for staff on working with diverse families.							
ties to develop skills and knowledge to work effectively with diverse families. Staff development may include:	<b>1.8.2</b> Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.							
	1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.							
1.9 The program seeks to reflect the community and families it serves by:	<b>1.9.1</b> Building a staff that reflects the community and families served.							
rammes it serves by.	<b>1.9.2</b> Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.							
	1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.							
	1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program's community is mono-lingual, mono-ethnic or mono-cultural.							
1.10 The program supports participating immigrant and refugee families by:	1.10.1 Ensuring that staff are knowledge- able about immigrant and refugee families' unique challenges and can help address them in a respectful manner.							
	1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.							



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS  parents to manage stress effectively?	8.	Hilligh agige	Bee 3: Hei	2.Di	har disagree	Hot Hot	gree haricalite	
								Comment	s
proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, militar other family crises Changes or fluctuations in a challenging behavior, fearfu	ences ed appointments y deployment, family dissolution, job loss or a child's emotional state, acting out, distress, il behavior, inappropriate language/behavior signs of abuse or neglect (such as bruises) or								
1.12 The program provides regular opportunities for parents to relieve stress	1.12.1 Linking parents to organized support groups.								
through:	1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.								
	1.12.3 Organizing spa days, exercise classes or other parent-only social activities.								
	1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.								
	1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.								



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	5; Strut	N. Alies 3	Meither 2gr	dieaglee	stangy dist	Lage Comments
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:	1.13.1 Understanding the impact of family crises and/or loss on all family members— especially children—and how to respond appropriately.						
	1.13.2 Supporting families' immediate and long-term plans.						
	1.13.3 Talking to families about difficult issues and helping them access additional help.						
	1.13.4 Maintaining confidentiality.						
	1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.						
	1.13.6 Understanding trauma and its impact on children and how staff can help.						
	1.13.7 Other community agencies providing specialized services to families and children.						



PARENTAL RESILIENCE: SELF- How do programs support par build decision-making and le	rents as decision-makers and help	્રિક ક	Strongly at	ikules 3:	Meither 25's	disagles	Strongly dis	adde the comments
1.14 Staff receive program support when working with families under stress through:	<b>1.14.1</b> Acknowledgement and support for their efforts from supervisors and administrators.							
	<b>1.14.2</b> Opportunities to process their own emotional reactions with appropriate support.							
	1.14.3 Access to a mental health consultant.							
	1.14.4 Time off if needed.							

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs support pa build decision-making and le	rents as decision-makers and help	45	Strongly as	White 3.	Meither agre	disagles 1:	z trongly dis	a street catte  Comments
1.15 Staff reinforce parental authority by:	1.15.1 Respecting parents' directions and/ or decisions about their children.							
	1.15.2 Learning about parents' expectations and limits for their children.							
	1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.							
	1.15.4 Understanding the parenting and child behavior norms of the parent's culture.							
	1.15.5 Being careful not to contradict a parent in front of his or her child or other children.							



					,		,	, , ,
	rents as decision-makers and help	/	itingh agi	88	Meither agr	ee nordisali	Strongly dis	gage e
build decision-making and le	adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Still A:	Values 3.	Mer 2	Dist 1.	Still	AR
								Comments
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							
	<b>1.16.2</b> Parents are informed about the confidentiality policy and what it means to them.							
	<b>1.16.3</b> Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.							
	1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.							
	1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.							
	<b>1.16.6</b> All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.							
	1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
1.17 Parents and staff develop family plans together that:	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.							
	<b>1.17.2</b> Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.							
	1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.							
	1.17.4 Are updated regularly.							



					, ,	,	, ,	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS			, , ,	Weither 325	e nordisagi	88	agles .
		5	Strongly age	Agiee 3:	Weither age	disagree 1.	Strongly die	L. Andricate
and career goals by:  and career goals goa							Comments	
1.18 The program supports a parent's personal education and career goals by:	and career resources (e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting							
	educational resources, including higher education institutions, to support families'							
	resources for internships, volunteer and leadership activities and other experiences that expand parents' knowledge and skills							
	community volunteers to share their educa-							
	parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent							
1.19 The program provides opportunities and support for families to serve as leaders								
and decision-makers by:	parents in becoming active members of the program's governing/advisory groups and in							
	<b>1.19.4</b> Asking families for input into staff hiring and training.							
	<b>1.19.5</b> Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).							



					,	,	,	, , ,
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		- S	*	, are	disagles 1.	8º /	and the state of t
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Strongly agi	Majee 3:	Meither as	disaglee	Strongly dis	A Philicipe
								Comments
<b>1.20</b> The program promotes participation in activities by:	<b>1.20.1</b> Addressing topics, issues and skills that families identify as important to them.							
	<b>1.20.2</b> Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).							
	<b>1.20.3</b> Providing child care during trainings or workshops.							
	1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.							
1.21 The program helps to support the continued development of parent leaders by supporting:	<b>1.21.1</b> Personal growth—such as attending conferences or special events and collecting and sharing information of interest to other parents.							
	1.21.2 Leadership development trainings and mentoring activities.							
	<b>1.21.3</b> Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).							
1.22 The program helps to support parents' opportunities for leadership in community change by:	<b>1.22.1</b> Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.							
comments change by	1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.							
	1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.							
	<b>1.22.4</b> Connecting parents to groups that inform and shape policy at the local, state or national level.							



How do programs help parents understand how to buffer their child during stressful times?

lisatie	/
attee attend a lisagee one	/
5: Stringth agges 3: Meither agges not lie agges 1: Stringth his agges 3: Meither agges 1: Stringth his agges 1	
Comm	16

				Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.				
<ul> <li>1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including:</li> <li>How stress impacts the child's brain, behavior and development</li> <li>Recognizing the signs of stress in children</li> <li>How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly</li> <li>The important role that parents and caring adults play in buffering children during stressful times</li> </ul>				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.				



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **SOCIAL CONNECTIONS**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- · Help families value, build, sustain and use social connections
- · Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

#### 3. Neither agree furthisagles 1. Strongly disagree 5: Stringly agree SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS Not Applicable How do programs help families value, build, sustain and use A: Agree social connections? Comments 2.1 Families have access to a comfortable space where they can meet informally **2.2** The program provides 2.2.1 Formally, through parent support groups (including those with both broad and opportunities for families with similar interests, chilnarrow focuses). dren's ages and/or circumstances (such as those with 2.2.2 Through parent mentoring and twins, parents of infants, matching for one-on-one support. parents with special-needs children or parents who 2.2.3 Informally, by introducing parents to speak the same language) to one another. connect with one another:



				,	, ,	,	, ,
SOCIAL CONNECTIONS: SELF- How do programs help famili- use social connections?		\s.	Hillight affect	3. Neither 285	e nat disable e	ng Angli	alle
							Comments
2.3 The program provides opportunities for families to socialize and foster a sense	2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.						
of community by organizing/ hosting:	2.3.2 Periodic events like coffee breaks and breakfasts.						
	2.3.3 Celebrations, graduations and holidays.						
	2.3.4 Field trips and community events.						
	<b>2.3.5</b> Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.						
	2.3.6 Affordable family activities.						
	<b>2.3.7</b> Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.						
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.						
	ositive relationships between families and nal social events where staff can interact with						
	ects families to resources to strengthen ., healthy marriage skills, communication skills,						



					/ /		
SOCIAL CONNECTIONS: SELF- How do programs help famili use social connections?		\s.	A: Agre	e 3: Weither 2	7. headee	s Strangy disagn	e k
							Comments
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:	<b>2.6.1</b> Calling, sending notes or making home visits inviting them to program activities.						
ipate iii program activities by.	<b>2.6.2</b> Connecting with them on social media platforms through program pages or groups.						
	<b>2.6.3</b> Offering support with transportation, child care or other barriers to participation.						
	<b>2.6.4</b> Making special efforts to connect them with other families who share similar interests.						
	2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.						
	2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.						
	v isolation or reluctance to participate can due to differences in race, language, culture, ntation, ability, etc.						



						nor disagi	, & /	, , , , , , , , , , , , , , , , , , ,
SOCIAL CONNECTIONS: SELF- How do programs create an i		ر ن	Strongly at	gee 3:	Meither 25:	disaglee	Strongly dis	r kulicule
								Comments
<b>2.8</b> The program and its staff model positive social skills and	2.8.1 Welcoming all families.							
community building by:	<b>2.8.2</b> Inviting all families to program parties or social events.							
2.8 The program and its staff model positive social skills and community building by:  2.9 The program helps staff learn how to reduce	<b>2.8.3</b> Encouraging newcomers and reluctant families to participate through special outreach efforts.							
	2.8.4 Helping to resolve conflicts among participants.							
	2.8.5 Promoting families' understandings of different cultures and backgrounds.							
	<b>2.8.6</b> Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.							
<b>2.9</b> The program helps staff learn how to reduce stareotyping and hiss by:	<b>2.9.1</b> Modeling inclusive behavior among the staff.							
stereotyping and bias by:	2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).							
	2.9.3 Providing training and support for helping families and children resolve conflicts effectively.							
	<b>2.9.4</b> Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).							
	2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.							
	<b>2.9.6</b> Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.							
	o reach out and engage other families, includ- d members, in the program community.							



	Parent-organized educational events and es are encouraged and ted by:  2.13.1 Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun far or libraries).  2.13.2 Providing supports such as gathering space, childcare and food so the parents can organize and participate in activities together.  Administrators and staff seek opportunities to build good relations within mediate neighborhood or local community (e.g., inviting neighbors to ouses, using neighborhood resources for special projects, building relaps with local schools).  The program encourages staff and families to participate together in unity improvement or advocacy projects.  Staff are visibly engaged with issues of concern to the community and a vinvolved with other community organizations.  The program provides and receives support from the local community nancial support, donated services, volunteer service, tangible gifts,					,	,	
		\rightarrow \right	Strongly agree	Se Si	Heither agre	isaglee	es Strongly dis	agies Anticalis
								Comments
(e.g., phone trees, car pools, bab	ysitting co-ops, play groups, social media							
2.11 The program encourages processes (e.g., phone trees, car pools, bat groups or pages where parents of the control of the c	gram activities for parents to network and							
	activities for parents to attend together (for example, gathering at playgrounds, fun fairs							
	gathering space, childcare and food so that parents can organize and participate in							
the immediate neighborhood or lo open houses, using neighborhood	ocal community (e.g., inviting neighbors to							
social/educational events and activities are encouraged and supported by:  activities are encouraged and supported by:  activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).  2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.  2.14 Administrators and staff seek opportunities to build good relations within the immediate neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood resources for special projects, building rela-								

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase. Programs can help parents increase their knowledge of parenting and child development. Programs should:

- · Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

#### 3. Neither agree for libraries 1. Strongly lie agree KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: 5. Strongly agree Not Applicable **SELF-ASSESSMENT ITEMS** A. Agree How do programs model developmentally appropriate interactions with children? **Comments** 3.1 Staff demonstrate a 3.1.1 Staff model developmentally strong understanding of child appropriate responses to children's behavior, development: interests, temperaments and need for exploration and learning. 3.1.2 Staff understand and can explain the development arc for young children. 3.1.3 Staff can explain to parents how various activities and interactions support their child's development. **3.1.4** Staff participate in regular training that updates their knowledge on advances in understanding child development. 3.2 Staff work collaboratively **3.2.1** Staff develop an ongoing partnership with parents to coordinate with parents to ensure regular communication, common understanding of the support for children's development: child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage. 3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development. 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		\$.	Strongly as	jee jee	Meither agre	disages	ee Strongly dis	sage to the sage of the sage o	
								Comments	
<b>3.4</b> When staff talk with parents about discipline, they:	<b>3.4.1</b> Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.								
	<b>3.4.2</b> Provide information on ageappropriate positive discipline techniques and reasonable expectations.								
	<b>3.4.3</b> Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.								
	<b>3.4.4</b> Encourage parents to discuss behavior challenges they may have at home.								
	<b>3.4.5</b> Connect parents to other parents who can share or model positive parenting approaches.								
	<b>3.4.6</b> Recognize different parental and cultural approaches to discipline and discuss them with parents.								
	<b>3.4.7</b> Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.								



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A	5: Strucky ages 3: Neither ages that it strucky dischere hat Annicalie									
How do programs provide information and resources on parenting and child development?		89.	Strongly A:	Agree 3:	Meither 2:	disagles 1: Strongly		at Applicable		
								Comments		
<b>3.5</b> Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.										
<b>3.6</b> Parenting education classes are offered in a way that reflects best practices in the field, including:	<b>3.6.1</b> Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.									
	<b>3.6.2</b> Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.									
	<b>3.6.3</b> Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.									
	<b>3.6.4</b> Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).									
	<b>3.6.5</b> Classes and programs are delivered by staff with appropriate training and credentials for the program.									
	<b>3.6.6</b> Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.									
	<b>3.6.7</b> Child care is offered while parents are in classes.									
	<b>3.6.8</b> Transportation, food or other supports are provided as appropriate to enable parents to participate.									
	<b>3.6.9</b> If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.									
<b>3.7</b> Information is provided to parents on stages of child development and what to expect of their children at each stage.										



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs provide information and resources on parenting and child development?			5; Strong A; before 3; beither agree the list of the hort price of the strong of the s							
								Comme	nts	
<b>3.8</b> Parenting information and materials used by the program are culturally and linguistically appropriate, and:	<b>3.8.1</b> Are available in the language spoken by program families.									
	<b>3.8.2</b> Reflect a diversity of racial and ethnic backgrounds and family structures.									
	<b>3.8.3</b> Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.									
3.9 Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:	<b>3.9.1</b> Books and videos in a resource library.									
	3.9.2 Parenting classes.									
	3.9.3 Support groups.									
	<b>3.9.4</b> Regular postings on bulletin boards in public spaces.									
	3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.									
	<b>3.9.6</b> Posting of information and links on a program website and/or social media pages accessed by participants.									
3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:	<b>3.10.1</b> Parent education groups (including fatherhood groups).									
	3.10.2 Counseling.									
	3.10.3 Support groups.									
	3.10.4 Mentors/coaches.									
	<b>3.10.5</b> Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.									



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

• Planning for the child's needs after birth (e.g, car seats, cribs).

SELF-ASSESSMENT ITEMS How do programs provide inf	programs provide information and resources nting and child development?  Contains and child development?  Distribution and child development issues with  Distribution and child development issues with		J. Applicable				
						Comments	
to the needs of parents in differe  Different parenting styles of  Needs and concerns of first  Needs of parents who are parents  Noncustodial parents	ent circumstances. For example: mothers and fathers and the strengths of each time parents arenting a child with a disability						
<b>3.12</b> Staff provide "just in time" parenting tips and discuss parenting issues with parents when:	issues arise (e.g., potty training, changes in eating or sleeping patterns, separation						
	difficulty relating to or communicating with						
the program provides opportunit  Prenatal and infant health at  The birth process and what  The needs of postnatal wom	ies for parents to learn about: nd development to expect						



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

					,	, ,	, ,	, ,
KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS How do programs encourage explore parenting issues and	65-	Strongly agr	Agree 3:	Aeither 25te	ijsagiee 1.	Strong Wilson		
								Comments
<b>3.14</b> Parents and staff work together to design and organize opportunities for parent	<b>3.14.1</b> Cultural/ethnic expectations and practices about parenting.							
led discussions (such as a Community Café or Parent	<b>3.14.2</b> Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	<b>3.14.4</b> How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	<b>3.14.5</b> Being especially supportive at the time that special needs are initially identified.							
	<b>3.14.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.							
	<b>3.14.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.							



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

6	Strongly as	ies vi	Weither age	e nor disagree	strongly dis	agies Applicab		/
						(	Commen	its

					Comments
<b>3.15</b> Staff recognize and support the parenting challenges experienced by	<b>3.15.1</b> Regularly checking in with parents about parenting issues.				
families with children who have special needs by:	<b>3.15.2</b> Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.				
	<b>3.15.3</b> Supporting parents in understanding appropriate developmental expectations for their children with special needs.				
	<b>3.15.4</b> Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.				
	<b>3.15.5</b> Being especially supportive at the time that special needs are initially identified.				
	<b>3.15.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.				
	<b>3.15.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.				



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

NOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: ELF-ASSESSMENT ITEMS low do programs address parenting issues from a trength-based perspective?			A; Age	s 3: Weither 2	7: headles 1:	strongly disco	Ege <sup>®</sup>	
		/ '3 /	<u> </u>	-5/			Comment	•
<b>3.16</b> Home visitors share their observations of children with parents to help the parents recognize:	<b>3.16.1</b> Their children's unique assets, temperament, personality, communication styles and behavioral cues.						Comment	.5
parents recognize.	<b>3.16.2</b> Their children's growth and development patterns.							
	<b>3.16.3</b> Their children's positive social skills and developmentally appropriate emotional behavior.							
	<b>3.16.4</b> Their children's independence and abilities.							
	<b>3.16.5</b> Activities families can use to enhance their children's skills and development.							
	<b>3.16.6</b> Signals that development may not be on track.							
<b>3.17</b> Staff reinforce positive parent-child interactions by:	<b>3.17.1</b> Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.							
	<b>3.17.2</b> Sharing something positive with parents about their children's behavior and development.							
<b>3.18</b> Staff proactively and respectfully address concerns about parenting techniques or behavior by	<b>3.18.1</b> Asking open-ended questions to understand the behavior from the parent's perspective.							
behavior by:	<b>3.18.2</b> Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.							
	<b>3.18.3</b> Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.							
	<b>3.18.4</b> Connecting parents to resources and supports that may help to address parenting issues.							



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CONCRETE SUPPORT IN TIMES OF NEED**

All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- · Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

#### 3. Neither agree furt lisagues 1. Strongly liesque Not Applicable **CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS** A: Agree How do programs respond immediately when families are in crisis? **Comments** 4.1 Parents are encouraged 4.1.1 The fact that staff listen, show conto turn to staff in the event of a cern and share their own personal challengcrisis through: es as appropriate in informal conversations and regular interactions. 4.1.2 Materials regularly provided to participating families. **4.1.3** Information on which staff members can help families with particular issues.



					,	,	,	, , ,
					Meither 22:	or disagr	* /	
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		24	88	agre	enu	die	agie
How do programs respond im are in crisis?	mediately when families	6.	Strongly age	Agree 3:	Weither as	disagree 1:	Strongly die	L. Andicate
								Comments
<b>4.2</b> Staff proactively respond to signs of parent or family distress by:	<b>4.2.1</b> Expressing concern and offering help in line with the program's philosophy and resources.							
	<b>4.2.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.2.3</b> Making space available for staff to meet with parents privately.							
	<b>4.2.4</b> Ensuring that parents can talk with staff members with whom they are the most comfortable.							
	<b>4.2.5</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.2.6</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).							
<b>4.3</b> When a family is experiencing extreme difficulties or crisis:	<b>4.3.1</b> At least one staff member with a close relationship with the family reaches out to the family proactively.							
	<b>4.3.2</b> If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.							
	<b>4.3.3</b> The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.							
	<b>4.3.4</b> The program has flexible hours of operation to accommodate families outside of regular business hours.							
	<b>4.3.5</b> If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.							
	<b>4.3.6</b> Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.							



						,	,	, , ,
CONCRETE SUPPORTS: SELF- How do programs provide inf services in the community?		ું. જ	A: A: A	agies 3.N	Reither age	jisagiee 1:	strongly die	age e
								Comments
<b>4.4</b> Staff proactively respond to signs of parent or family distress by:	<b>4.4.1</b> Expressing concern and offering help.							
distress by.	<b>4.4.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.4.3</b> Making themselves and/or other designated home visitors available to parents if parents need to talk.							
	<b>4.4.4</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.4.5</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).							
	<b>4.4.6</b> Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.							
	share information about community resources s, play lots, family activities), as well as more							
	e services dults and children)							



CONCRETE SUPPORTS: SELF-How do programs provide interesting services in the community?	-ASSESSMENT ITEMS formation and connections to	is; st	Milly affect	5. Weither affect of the state	es 1: Strong High High	a Comments
<b>4.6</b> The program actively builds collaborative links with other service providers by:	<ul><li>4.6.1 Bringing services on site, when possible.</li><li>4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.</li></ul>					
	<b>4.6.3</b> Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.					
	<b>4.6.4</b> Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.					
	<b>4.6.5</b> Using input from participating parents to identify and advocate to fill gaps in the services available to families.					



							,	, , ,
CONCRETE SUPPORTS: SELF-			34	88	Meither 22's	e not disagi	ee die	effe, We
identify their needs and conn	es to develop skills they need to ect to supports?	8	Strongly age	Agree 3	Meither 2:	disagles 1:	Strongly die	L. Applicable
								Comments
<b>4.7</b> Staff help parents to identify and mobilize their own resources to address their families' needs by:	<b>4.7.1</b> Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.							
	<b>4.7.2</b> Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.							
	<b>4.7.3</b> Encouraging parents to advocate for themselves and their child.							
	<b>4.7.4</b> Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.							
	<b>4.7.5</b> Connecting parents to peer-to-peer navigation support.							
<b>4.8</b> When staff make referrals to outside services, they support family leadership by.	<b>4.8.1</b> Brainstorming with families about what resources would be helpful.							
portioning loadest inp est	<b>4.8.2</b> Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.							
	<b>4.8.3</b> Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).							
	<b>4.8.4</b> Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).							
	<b>4.8.5</b> Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.							
	<b>4.8.6</b> Making a personal connection between families and service providers (if families have agreed to share information through written consent).							

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. Programs should:

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: **SELF-ASSESSMENT ITEMS**

SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs help parent emotional development?		45	Strongly agi	Person 3:	Meither age	e nut disagn	Strongly dis	Agge Comments
<b>5.1</b> The program introduces family members to social and emotional development by:	<b>5.1.1</b> Providing parents with information on the importance of supporting children's healthy social and emotional development—and its connection to success in school and life.							
	<b>5.1.2</b> Helping parents understand ageappropriate social and emotional skills and behaviors.							
	<b>5.1.3</b> Providing opportunities to discuss social and emotional issues within a racial and cultural context.							
	<b>5.1.4</b> Offering parents ideas on how to foster a child's social and emotional learning at home.							
	<b>5.1.5</b> Asking about parents' observations of their child's social and emotional development.							
parents and their children (e.g., p	pportunities to strengthen bonds between parent-child playgroups, playing together in ve, cooking, making an art project together).							
	edge and expertise about their children's as they share information about social and							



SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs model nurt	6	SHORE A SHORE	itee ?	. Heither age	disagles	es stoney disas	Lee Comments	
<b>5.4</b> Staff nurture children and model nurturing for parents	<b>5.4.1</b> Responding consistently to children in a warm, supportive manner.							
by:	<b>5.4.2</b> Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.							
	<b>5.4.3</b> Showing warmth through appropriate physical contact.							
	<b>5.4.4</b> Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).							
	<b>5.4.5</b> Responding sympathetically to help children who are upset, hurt or angry.							
	<b>5.4.6</b> Encouraging children to express their feelings through words, artwork and expressive play.							
	<b>5.4.7</b> Modeling empathy and appropriate emotional responsiveness.							



						,	, , ,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		285	,	agree	nd disagles	lieste alle
How do programs model nurt	uring care to children?	45.	Strongly agr	Agree 3:	Aeither 2: D	sagree 1: Strong!	Aut thicage
							Comments
<b>5.5</b> Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	<b>5.5.1</b> Fostering children's social and emotional development in the context of their culture and language.						
social emotional development, including:	<b>5.5.2</b> Recognizing behavioral/emotional problems or developmental delays.						
	<b>5.5.3</b> Understanding the impact of loss or trauma on children and how to respond appropriately.						
	<b>5.5.4</b> Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.						
	<b>5.5.5</b> Understanding gender differences in child rearing and its impact on social and emotional development.						
	<b>5.5.6</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.7</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.8</b> Understanding how mental health and wellness affects family relationships and the developmental process of young children.						
	<b>5.5.9</b> Recognizing and responding to the impact of child or parental trauma on parent-child relationships.						
<b>5.6</b> Families are invited to obser and/or staff in the program.	ve their children interacting with other children						



					, ,	. ,	,	, , ,
	Idren's social and emotional	45	Strongly age	Per 3.	Weither agrae	ing disagre	strongly dis	ages and a second
								Comments
<b>5.7</b> The program supports children's social and emotional development with intentional practices that include:	<b>5.7.1</b> Encouraging children to express their feelings in ways that are the most comfortable for them.							
practices that illicitude.	velopment activities in programming?  5.7. The program supports children's social and emotional development with intentional practices that include:  5.7.1 Encouraging children to express their feelings in ways that are the most comfortable for them.  5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.  5.7.3 Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).  5.7.4 Setting clear expectations and limits for behavior.  5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).							
	their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of							
	from actions (e.g., not reacting by hitting							
<b>5.8</b> Mental health consultants assist staff in integrating social emotional development into everyday work by:	<b>5.8.1</b> Providing coaching on how to support social and emotional learning for all children.							
overyddy work by.	<b>5.8.2</b> Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.							



				, ,	, , ,	, ,	,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS			A. Agee	aure	a puritables	Aicagles Andricale	
How do programs help children develop a positive cultural identity and learn to interact in a diverse society?			dingly A: Aglee	Weither	disagle Strong	Applit /	
	•	5	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	<b>%`/ %</b>	/ % /	Comments	
<b>5.9</b> The program welcomes and affirms the cultures of families it serves by:	<b>5.9.1</b> Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					Comments	
	<b>5.9.2</b> Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.						
	relevant activities, stories and discussions regarding cultural and linguistic differences.  5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.  5.9.3 Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.  5.10.1 How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.  5.10.2 The extent to which nonverbal communication is predominant across cultures.  5.10.3 Diverse cultural views success and appropriate child development.  5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.						
<b>5.10</b> Staff receive training on how cultural differences affect social and emotional development especially	as an individual and/or as part of a family or						
	clan in different cultures.  5.10.2 The extent to which nonverbal communication is predominant across cultures.  5.10.3 Diverse cultural views success and appropriate child development.  straged to 5.11.1 Being encouraged to share and						
<b>5.11</b> Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languag-	reflect on their own cultural background, including self-awareness of biases they may						
es and cultural expressions through:	<b>5.11.2</b> Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.						
	<b>5.11.3</b> Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.						
	tices support the preservation of home lan- ne languages and dialects of the children and						
	th consultant offers consultation that is ting behaviors and child behaviors that stem						
<b>5.14</b> Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.						



SOCIAL AND EMOTIONAL COI SELF-ASSESSMENT ITEMS How do programs respond premotional development need	roactively when social or	/ 4.	. Strongly ag	, kules	Heither age	isagee.	strongly di	Salte E. Comments	
<b>5.15</b> When staff are concerned about a child's social and emotional development, they respond by:	<b>5.15.1</b> Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.								
	<b>5.15.2</b> Arranging for appropriate screenings and assessments.								
	<b>5.15.3</b> Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).								
	<b>5.15.4</b> Helping parents develop strategies for addressing the issue at home.								
<b>5.16</b> Staff have access to a mental health consultant to help them:	<b>5.16.1</b> Identify and receive additional resources and/or training to work effectively with individual children and parents.								
	<b>5.16.2</b> Talk respectfully with parents about the child's development, needs or challenges.								

#### STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES

One responsibility of all child- and family-serving programs is to respond to possible child abuse and neglect when it is observed. Staff are mandatory reporters of child abuse and neglect in most states and should receive training every year on the state requirements on reporting. However, long before a report needs to be made, staff can also respond positively and supportively to early signs that have the potential to lead to maltreatment. The following items reflect best practices for programs in working effectively with child welfare officials.

HOW DO PROGRAMS RESPON OR NEGLECT?	D TO POSSIBLE CHILD ABUSE	/43	Strongly ag	Pares 3.	Weither all	e nordiesal	ee Strongly dis	Sagles Comments
<b>6.1</b> When children enter the program, staff discuss child abuse and neglect prevention	<b>6.1.1</b> The program's policies and practices that are designed to keep children safe from harm.							Comments
with all parents and caretak- ers. This discussion includes explanations of:	<b>6.1.2</b> Staff members' responsibility as mandatory child abuse and neglect reporters.							
	<b>6.1.3</b> How the state defines child abuse and neglect.							
	<b>6.1.4</b> The program's protocols regarding child abuse and neglect reports.							
<b>6.2</b> All staff members are trained abuse reporting laws.	d according to their state's mandatory child							
<b>6.3</b> Staff receive additional training on child abuse and neglect including:	<b>6.3.1</b> Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.							
	<b>6.3.2</b> Following the program's protocols for reporting child abuse and neglect.							
	<b>6.3.3</b> Understanding how cases are generally handled by the child protective services agency once a report is made.							
	<b>6.3.4</b> The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.							
	<b>6.3.5</b> Recognizing cultural practices that can trigger reporting of child abuse and neglect (e.g., the practice of coining to treat fevers, the use of corporal punishment for toilet training, leaving a young sibling in the care of an older sibling under the age of ten) and respectfully discussing ways that parents can prevent the likelihood of mandatory reporting.							

## HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?

, sage et	
5. Strongt agge 3. Heiter agge in disagge 1. Strongt disagge and Applicable	
5. Strongt ages 3. Heiter ages rot to 1. Strongt lisages after 5. Disages Strongt lisages	
5. Strong, W. Wies 3. Weither 5. Disage, 1. Strong, W. William	

					Comments
6.4 The program's protocols for reporting possible child abuse and neglect:  6.5 Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the child welfare agency and to families that include:	<b>6.4.1</b> Are consistent with state child welfare reporting guidelines.				
	<b>6.4.2</b> Are reviewed annually or anytime changes are made to state guidelines.				
trained that when a child abuse or neglect report needs to be filed, they have specific	<b>6.5.1</b> Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.				
child welfare agency and to	<b>6.5.2</b> Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.				
	<b>6.5.3</b> Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.				
	<b>6.5.4</b> Striving to be calm, caring and supportive of the family during the reporting process.				
	<b>6.5.5</b> Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.				
	<b>6.5.6</b> Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.				
<b>6.6</b> If a child is placed into child welfare custody, staff are trained to continue to support	<b>6.6.1</b> Maintaining contact with the child and family, if possible.				
the child and the family by:	<b>6.6.2</b> Advocating for the family with the Child Protective Services system, when possible.				
	<b>6.6.3</b> Helping parents connect with resources to help reunite them with their child.				



#### HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

								, , ,	, ,
IOW DO PROGRAMS RESPON OR NEGLECT?	ND TO POSSIBLE CHILD ABUSE	/«	5. Strongly 2	gges x. Agges	3. Weither of	glee landie	A. Strongly di	sale e sa	
								Comments	
<b>6.7</b> Program staff seek to collaborate with child welfare caseworkers and Child	<b>6.7.1</b> Helping to maintain stability for children involved in the system.								
Protective Services staff to promote the child's ongoing healthy development by:	<b>6.7.2</b> Engaging in co-case management practices, if possible.								
	<b>6.7.3</b> Conducting joint home visits.								
	<b>6.7.4</b> Attending Child Protective Services meetings to share information.								

#### Appendix B

# Electronic Version of Social and Emotional Competence of Children Questions of SFSA Tool



#### Social and Emotional Competence of Children-Self Assessment Items

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. **Programs should:** 

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- · Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Social and Emotional Competence of Children. You will be asked to identify (on a 5-point scale) your level of agreement with a series of statements associated with questions related to promoting social and emotional competence of children. A Not Applicable (N/A) option is also provided. If desired, a comments text box is provided for each question should you wish to provide additional thoughts, reflections, and/or clarifications regarding your response.

This tool/survey was developed by the Center for the Study of Social Policy as part of their Strengthening Families Protective Factors Framework initiative.

Thank you for participating in this process. Your feedback and participation as a Team member is important.

Wha	t best describes your role/perspective as a Team Member?
	Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community
	Administrative Staff and/or Program Director
	Direct Service Staff and/or Volunteer
	Community Collaborator/Partner that Works with Resource Center



How do programs help parents foster their child's social emotional development?

#### 5.1 The program introduces family members to social and emotional development by:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.1.1 Providing parents with information on the importance of supporting children's healthy social and emotional development and its connection to success in school and life.	0					0
Comments						
5.1.2 Helping parents understand age-appropriate social and emotional skills and behaviors.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
5.1.3 Providing opportunities to discuss social and emotional issues within a racial and cultural context.		$\bigcirc$			$\circ$	
Comments						
5.1.4 Offering parents ideas on how to foster a child's social and emotional learning at home.		$\bigcirc$	$\bigcirc$			$\bigcirc$
Comments						
5.1.5 Asking about parents' observations of their child's social and emotional development.						$\bigcirc$
Comments						

Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable  3 Staff respect families' knowledge and expertise about their children's unique strengths and hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	•	vities provide opportunities to strengthen bonds between parents and their child playgroups, playing together in cooperative games or make believe, cooking,
Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable  Omment  3 Staff respect families' knowledge and expertise about their children's unique strengths and hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable		
Not applicable  Staff respect families' knowledge and expertise about their children's unique strengths and hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable		
.3 Staff respect families' knowledge and expertise about their children's unique strengths and hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable		Agree Neither agree nor disagree Disagree Strongly disagree
.3 Staff respect families' knowledge and expertise about their children's unique strengths and hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	O Not applicable	
hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	Comment	
hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable		
hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	<u> </u>	
hallenges as they share information about social and emotional competence.  Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree  Not applicable	5.3 Staff respect	families' knowledge and expertise about their children's unique strengths and
Not applicable		
Not applicable	Strongly agree	Agree Neither agree nor disagree Disagree Strongly disagree
	Not applicable	
	Not applicable	
	Comment	



Competence of Children How do programs model nurturing care to children?

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.4.1 Responding consistently to children in a warm, supportive manner.						C
2.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.	0	0	0	0		C
5.4.3 Showing warmth through appropriate physical contact.  Comments		0		0	0	C
6.4.4 Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).		0	0	0		C
6.4.5 Responding sympathetically to help children who are upset, hurt or angry.  Comments	0	0	0	0	0	C
i.4.6 Encouraging children to express their feelings through words, artwork and expressive play.  Comments	0	0	0	0	0	C
6.4.7 Modeling empathy and appropriate emotional responsiveness.	0		0	0	0	

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.5.1 Fostering children's social and emotional development in the context of heir culture and language.		$\bigcirc$			$\bigcirc$	
Comments						
5.5.2 Recognizing behavioral/emotional problems or developmental delays.	$\bigcirc$			$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
5.5.3 Understanding the impact of loss or trauma on children and how to espond appropriately.		0				C
Comments						
5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\subset$
Comments						
5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.  Comments	0	0	0	0	0	С
5.5.6 Promoting positive relationships among children living in the same nousehold.		0				
Comments						
5.5.7 Understanding how mental health and wellness affects family elationships and the developmental process of young children.	0					C
Comments						
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.	0	$\circ$				
Comments						

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Not applicable				
Comment				



How do programs include children's social and emotional development activities in programming?

5.7 The program supports children's social and emotional development with intentional practices that include:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.7.1 Encouraging children to express their feelings in ways that are the most comfortable for them.	$\bigcirc$		$\bigcirc$			
Comments						
5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.					0	
Comments						
5.7.3 Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).		0		0	0	
Comments						
5.7.4 Setting clear expectations and limits for behavior.		0	0	0	0	
Comments						
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).			0	0		
Comments						

Neither agree Strongly nor agree Agree disagree Nosquee Nosque	Mental health consultants assist staff in integrating socia	ıl emotic	nal d	evelopn	nent into	everyo	lay
Strongly agree Agree disagree	k by:						
5.8.1 Providing coaching on how to support social and emotional learning for all children.  Comments  5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.				agree nor	Disagree		N/A
5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.	dren.						
around social and emotional issues, including challenging behaviors.	nments						
Comments	und social and emotional issues, including challenging behaviors.	0	0	0	0	0	
	nments						



How do programs help children develop a positive cultural identity and learn to interact in a diverse society?

#### 5.9 The program welcomes and affirms the cultures of families it serves by:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.9.1 Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					$\bigcirc$	0
Comments						
5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.	$\bigcirc$	$\bigcirc$			$\bigcirc$	
Comments						
5.9.3 Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.		0			$\bigcirc$	
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/
5.10.1 How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.	$\circ$			$\circ$	$\circ$	C
Comments						
5.10.2 The extent to which nonverbal communication is predominant across cultures.	0	0	0	0	0	
Comments						
5.10.3 Diverse cultural views of success and appropriate child development.		$\circ$		0	0	
Comments						
_	_				ent race	es,
_	<b>oressior</b> Stro	n <b>s thro</b>	ough: Neither		Strongly	
11 Staff are encouraged to enhance their own understan thnicities, sexual orientations, languages and cultural expositions. It is a second cultural exposition.  5.11.1 Being encouraged to share and reflect on their own cultural backgrouncluding self-awareness of biases they may hold.	Stro agi	n <b>s thro</b>	ough: Neither agree nor		Strongly	
chnicities, sexual orientations, languages and cultural exponentials, sexual orientations, languages and cultural exponentials.  5.11.1 Being encouraged to share and reflect on their own cultural backgrouncluding self-awareness of biases they may hold.	Stro agi	n <b>s thro</b>	ough: Neither agree nor		Strongly	
thnicities, sexual orientations, languages and cultural exp 5.11.1 Being encouraged to share and reflect on their own cultural backgrou	Stro agu	n <b>s thro</b>	ough: Neither agree nor		Strongly	
thnicities, sexual orientations, languages and cultural expensions.  5.11.1 Being encouraged to share and reflect on their own cultural backgrouncluding self-awareness of biases they may hold.  Comments  5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and	Stro agu	n <b>s thro</b>	ough: Neither agree nor		Strongly	
thnicities, sexual orientations, languages and cultural expensions.  5.11.1 Being encouraged to share and reflect on their own cultural backgrouncluding self-awareness of biases they may hold.  Comments  5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.	Stro agu	n <b>s thro</b>	ough: Neither agree nor		Strongly	
5.11.1 Being encouraged to share and reflect on their own cultural backgrouncluding self-awareness of biases they may hold.  Comments  5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.  Comments  5.11.3 Being trained in how to sensitively ask questions about each family's	Stro agu	n <b>s thro</b>	ough: Neither agree nor		Strongly	

		ects of the children and fa		Strongly disagree
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
				is respectful of differences
parenting behavio	rs and child	d behaviors that stem fron	n traditions and	l cultural roots.
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
5 14 Staff are train	ned in how	to address children exhib	ting verhal or r	nonverbal indicators of rac
intolerance.	ica iii iiow	to dudiess children exhibi	ang verbar or r	ionverbal maleators of rac
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
			_	O 0, 0
Not applicable				
Not applicable				
Not applicable Comment				



How do programs respond proactively when social or emotional development needs extra support?

5.15 When staff are concerned about a child's social and emotional development, they respond by:

Neither

	Strongly agree		agree nor disagree	Disagree	Strongly disagree	N/A
5.15.1 Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.			$\circ$		$\bigcirc$	
Comments						
5.15.2 Arranging for appropriate screenings and assessments.		$\bigcirc$			$\circ$	$\bigcirc$
Comments						
5.15.3 Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).		$\bigcirc$				0
Comments						
5.15.4 Helping parents develop strategies for addressing the issue at home.	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						

16 Staff have access to a mental health consultant to help	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.16.1 Identify and receive additional resources and/or training to work effectively with individual children and parents.			$\bigcirc$			$\bigcirc$
Comments						
5.16.2 Talk respectfully with parents about the child's development, needs or challenges.	$\circ$	0	0	0	0	
Comments						

#### **Appendix C**

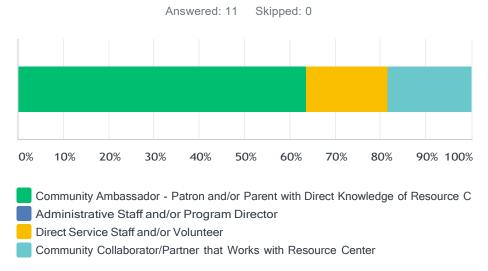
Cone Park Library Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs—

Social and Emotional Competence of Children Results

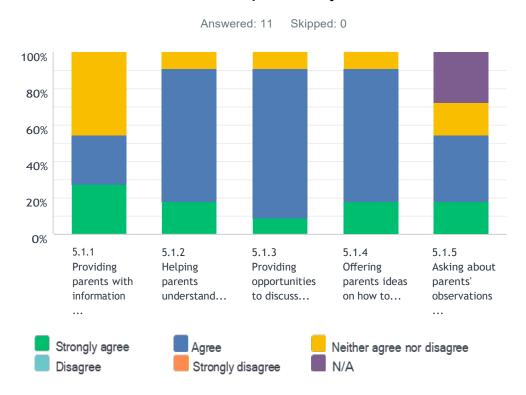
Updated/Revised (September 2021)

### Q1 What best describes your role/perspective as a Team Member?



ANSWER CHOICES	RESPON	SES
Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community	63.64%	7
Administrative Staff and/or Program Director	0.00%	0
Direct Service Staff and/or Volunteer	18.18%	2
Community Collaborator/Partner that Works with Resource Center	18.18%	2
TOTAL		11

# Q 5.1 The program introduces family members to social and emotional development by:

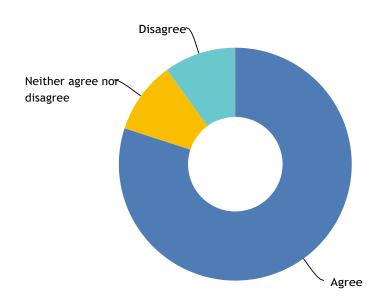


		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
with information importance children's hand emotion development	nt and its to success in	27.27% 3	27.27%	45.45% 5	0.00%	0.00%	0.00%	11	3.82
5.1.2 Helpi understand appropriate emotional s behaviors.	l age- e social and	18.18% 2	72.73% 8	9.09% 1	0.00%	0.00%	0.00%	11	4.09
social and e	es to discuss emotional iin a racial and	9.09% 1	81.82% 9	9.09% 1	0.00% 0	0.00% 0	0.00%	11	4.00
5.1.4 Offer ideas on ho child's social emotional le home.	ow to foster a al and	18.18% 2	72.73% 8	9.09%	0.00%	0.00%	0.00%	11	4.09
	a about	10.100/	26.260/	10.100/	0.000/	0.000/	07.070/	•	
their child's	servations of	18.18% 2	36.36% 4	18.18% 2	0.00%	0.00%	27.27% 3	11	4.00
parents' obs their child's	servations of social and development.  COMMENTS IMPORTANCE	2 FOR "5.1.1 PEE OF SUPPOR	4  ROVIDING F	2 PARENTS WITH DREN'S HEALT	0 H INFORMATIO	0 IN ON THE	3	11 DATE	4.00
parents' obs their child's emotional d	servations of social and development.  COMMENTS IMPORTANCE	FOR "5.1.1 PEE OF SUPPORENT AND ITS	4  ROVIDING F	2 PARENTS WITH DREN'S HEALT	0 H INFORMATIO	0 IN ON THE	3		
parents' obs their child's emotional d #	servations of social and development.  COMMENTS IMPORTANC DEVELOPMI	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it	4  ROVIDING F	2 PARENTS WITH DREN'S HEALT	0 H INFORMATIO	0 IN ON THE	3	DATE	:34 PM
parents' obs their child's emotional d #	servations of social and development.  COMMENTS IMPORTANC DEVELOPMI they're going	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it	4  ROVIDING F	2 PARENTS WITH DREN'S HEALT	0 H INFORMATIO	0 IN ON THE	3	<b>DATE</b> 8/2/2021 1	:34 PM 0:53 AM
parents' obs their child's emotional d # 1	COMMENTS they're going they're going COMMENTS COMMENTS They're going They're going They're going	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it to use it	A  ROVIDING F  RTING CHILI  CONNECTIO	PARENTS WITH DREN'S HEALT DN TO SUCCES	H INFORMATIO THY SOCIAL AI SS IN SCHOOL	N ON THE ND EMOTIONAI AND LIFE."	3	<b>DATE</b> 8/2/2021 1 8/2/2021 1	:34 PM 0:53 AM
parents' obstheir child's emotional d  #  1 2 3	COMMENTS they're going they're going COMMENTS COMMENTS They're going They're going They're going	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it to use it	A  ROVIDING F  RTING CHILI  CONNECTIO	PARENTS WITH DREN'S HEALT DIN TO SUCCES	H INFORMATIO THY SOCIAL AI SS IN SCHOOL	N ON THE ND EMOTIONAI AND LIFE."	3	<b>DATE</b> 8/2/2021 1  8/2/2021 1  8/2/2021 1	:34 PM 0:53 AM 0:36 AM
parents' obstheir child's emotional d  #  1 2 3 #	COMMENTS IMPORTANC DEVELOPMI they're going they're going COMMENTS SOCIAL ANI	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it to use it	A  ROVIDING F  RTING CHILI  CONNECTIO	PARENTS WITH DREN'S HEALT DIN TO SUCCES	H INFORMATIO THY SOCIAL AI SS IN SCHOOL	N ON THE ND EMOTIONAI AND LIFE."	3	B/2/2021 1 8/2/2021 1 8/2/2021 1 DATE	:34 PM 0:53 AM 0:36 AM :34 PM
parents' obstheir child's emotional d  #  1 2 3 # 1	COMMENTS IMPORTANCE DEVELOPMI they're going they're going COMMENTS SOCIAL AND it needed	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it to use it	A  ROVIDING F  RTING CHILI  CONNECTIO	PARENTS WITH DREN'S HEALT DIN TO SUCCES	H INFORMATIO THY SOCIAL AI SS IN SCHOOL	N ON THE ND EMOTIONAI AND LIFE."	3	B/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1	:34 PM 0:53 AM 0:36 AM :34 PM 0:53 AM
parents' obstheir child's emotional d  #  1 2 3 #  1	COMMENTS IMPORTANC DEVELOPMI they're going they're going COMMENTS SOCIAL ANI it needed it needed COMMENTS	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it TO EMOTIONAL	ROVIDING F RTING CHILI CONNECTION ELPING PAR SKILLS AN	PARENTS WITH DREN'S HEALT ON TO SUCCESS  RENTS UNDER ND BEHAVIORS	H INFORMATIO THY SOCIAL AI SS IN SCHOOL STAND AGE-A S."	N ON THE ND EMOTIONAL AND LIFE."  PPROPRIATE	3	B/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1 8/2/2021 1	:34 PM 0:53 AM 0:36 AM :34 PM 0:53 AM
parents' obstheir child's emotional d  #  1 2 3 #  1 2 3	COMMENTS IMPORTANC DEVELOPMI they're going they're going COMMENTS SOCIAL ANI it needed it needed COMMENTS	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it TO EMOTIONAL	ROVIDING F RTING CHILI CONNECTION ELPING PAR SKILLS AN	PARENTS WITH DREN'S HEALT ON TO SUCCESS  RENTS UNDER ND BEHAVIORS	H INFORMATIO THY SOCIAL AI SS IN SCHOOL STAND AGE-A S."	N ON THE ND EMOTIONAL AND LIFE."  PPROPRIATE	3	8/2/2021 1 8/2/2021 1 8/2/2021 1 <b>DATE</b> 8/2/2021 1 8/2/2021 1 8/2/2021 1	:34 PM 0:53 AM 0:36 AM :34 PM 0:53 AM 0:36 AM
parents' obstheir child's emotional d  #  1 2 3 #  1 2 3 #  1 2 3 #	COMMENTS IMPORTANCE DEVELOPMI they're going they're going they're going COMMENTS SOCIAL ANI it needed it needed it needed COMMENTS EMOTIONAL	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it TO EMOTIONAL	ROVIDING F RTING CHILI CONNECTION ELPING PAR SKILLS AN	PARENTS WITH DREN'S HEALT ON TO SUCCESS  RENTS UNDER ND BEHAVIORS	H INFORMATIO THY SOCIAL AI SS IN SCHOOL STAND AGE-A S."	N ON THE ND EMOTIONAL AND LIFE."  PPROPRIATE	3	8/2/2021 1 8/2/2021 1 8/2/2021 1  DATE  8/2/2021 1 8/2/2021 1 8/2/2021 1  DATE	:34 PM 0:53 AM 0:36 AM :34 PM 0:36 AM
parents' obstheir child's emotional d  #  1 2 3 #  1 2 3 #  1	COMMENTS IMPORTANCE DEVELOPMI they're going they're going they're going COMMENTS SOCIAL ANI it needed it needed it needed COMMENTS EMOTIONAL it's needed	FOR "5.1.1 PEE OF SUPPORENT AND ITS to use it to use it TO EMOTIONAL	ROVIDING F RTING CHILI CONNECTION ELPING PAR SKILLS AN	PARENTS WITH DREN'S HEALT ON TO SUCCESS  RENTS UNDER ND BEHAVIORS	H INFORMATIO THY SOCIAL AI SS IN SCHOOL STAND AGE-A S."	N ON THE ND EMOTIONAL AND LIFE."  PPROPRIATE	3	8/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1	:34 PM 0:53 AM 0:36 AM :34 PM 0:53 AM 0:36 AM
parents' obstheir child's emotional d  #  1 2 3 #  1 2 3 #  1 2 3	COMMENTS IMPORTANC DEVELOPMI they're going they're going they're going COMMENTS SOCIAL ANI it needed it needed it needed it needed it's needed it's needed it's needed COMMENTS	FOR "5.1.1 PIE OF SUPPORENT AND ITS to use it to use it TO EMOTIONAL FOR "5.1.2 HID EMOTIONAL FOR "5.1.3 PIE ISSUES WITH	ROVIDING F RTING CHILI CONNECTION ELPING PAF SKILLS AN	PARENTS WITH DREN'S HEALT DN TO SUCCESS  RENTS UNDER ND BEHAVIORS  DPPORTUNITIES AL AND CULTU	H INFORMATIO THY SOCIAL AI SS IN SCHOOL STAND AGE-A S."  ES TO DISCUSS JRAL CONTEX	N ON THE ND EMOTIONAL AND LIFE."  PPROPRIATE		B/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1 8/2/2021 1 8/2/2021 1 DATE 8/2/2021 1 8/2/2021 1	:34 PM 0:53 AM 0:36 AM :34 PM 0:53 AM 0:36 AM

#	COMMENTS FOR "5.1.5 ASKING ABOUT PARENTS' OBSERVATIONS OF THEIR CHILD'S SOCIAL AND EMOTIONAL DEVELOPMENT."	DATE
1	Sometime people are not open	8/2/2021 1:34 PM
2	Sometime people are not open	8/2/2021 10:53 AM
3	Sometime people are not open	8/2/2021 10:36 AM

Q3 5.2 Program activities provide opportunities to strengthen bonds between parents and their children (e.g., parent-child playgroups, playing together in cooperative games or make believe, cooking, making an art project together).

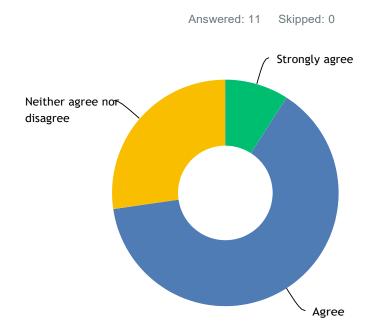
Answered: 10 Skipped: 1



ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	80.00%	8
Neither agree nor disagree	10.00%	1
Disagree	10.00%	1
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		10

#	COMMENT	DATE
1	unknown	8/6/2021 8:24 AM

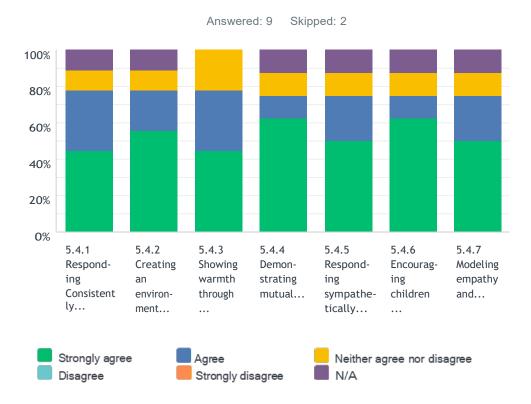
# Q4 5.3 Staff respect families' knowledge and expertise about their children's unique strengths and challenges as they share information about social and emotional competence.



ANSWER CHOICES	RESPONSES	
Strongly agree	9.09%	1
Agree	63.64%	7
Neither agree nor disagree	27.27%	3
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		11

#	COMMENT	DATE
1	Don't know.	7/31/2021 12:34 PM

### Q 5.4 Staff nurture children and model nurturing for parents by:

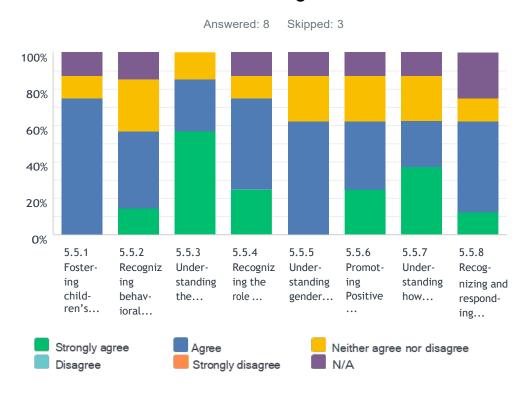


		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.4.1 Respon consistently to a warm, supp manner.	to children in	44.44% 4	33.33%	11.11% 1	0.00%	0.00%	11.11% 1	9	4.38
5.4.2 Creatir environment children feel comfortably e emotions with judgment.	in which safe to express their	55.56% 5	22.22%	11.11% 1	0.00%	0.00%	11.11% 1	9	4.50
5.4.3 Showing through appropriate physical confidence.	opriate	44.44% 4	33.33% 3	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.22
5.4.4 Demor mutual respe children and listening atter making eye of treating child	ct between adults (e.g., ntively, contact,	62.50% 5	12.50% 1	12.50% 1	0.00% 0	0.00% 0	12.50% 1	8	4.57
5.4.5 Responsympathetical children who hurt or angry.	ally to help are upset,	50.00% 4	25.00%	12.50% 1	0.00%	0.00%	12.50% 1	8	4.43
5.4.6 Encour children to ex feelings throu artwork and ex play.	rpress their ugh words,	62.50% 5	12.50% 1	12.50% 1	0.00%	0.00%	12.50% 1	8	4.57
5.4.7 Modeli and appropria emotional responsivene	ate	50.00% 4	25.00%	12.50% 1	0.00%	0.00%	12.50% 1	8	4.43
#		FOR "5.4.1 RE E MANNER."	SPONDING	CONSISTENT	LY TO CHILDF	REN IN A WARM	l,	DATE	
	There are no	responses.							
#		OMFORTABLY				CHILDREN FEE FEAR OF	L	DATE	
1	These things	are needed						8/2/2021 1	:42 PM
#	COMMENTS CONTACT."		OWING WA	RMTH THROU	IGH APPROPR	RIATE PHYSICA	L	DATE	
1	for the kid							8/2/2021 1	:42 PM
#		S (E.G., LISTE				TWEEN CHILD TACT, TREATIN		DATE	
1	to be positive	about themselv	/es					8/2/2021 1	:42 PM
#		FOR "5.4.5 RE , HURT OR AN		SYMPATHET	ICALLY TO HE	ELP CHILDREN	WHO	DATE	

There are no responses.

#	COMMENTS FOR "5.4.6 ENCOURAGING CHILDREN TO EXPRESS THEIR FEELINGS THROUGH WORDS, ARTWORK AND EXPRESSIVE PLAY."	DATE
	There are no responses.	
#	COMMENTS FOR "5.4.7 MODELING EMPATHY AND APPROPRIATE EMOTIONAL RESPONSIVENESS."	DATE

Q 5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's social emotional development, including:



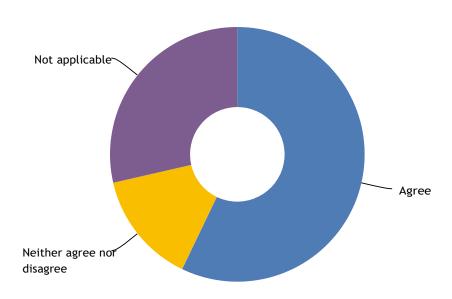
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.5.1 Fostering children's social and emotional development in the context of their culture and language.	0.00% 0	75.00% 6	12.50% 1	0.00%	0.00%	12.50% 1	8	3.86
5.5.2 Recognizing behavioral/emotional problems or developmental delays.	14.29% 1	42.86%	28.57% 2	0.00%	0.00%	14.29% 1	7	3.83
5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.	57.14% 4	28.57%	14.29% 1	0.00%	0.00%	0.00%	7	4.43
5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.	25.00% 2	50.00% 4	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.14
5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.	0.00%	62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71
5.5.6 Promoting positive relationships among children living in the same household.	25.00% 2	37.50%	25.00% 2	0.00%	0.00%	12.50% 1	8	4.00
5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.	37.50% 3	25.00%	25.00% 2	0.00%	0.00%	12.50% 1	8	4.14
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.	12.50% 1	50.00% 4	12.50% 1	0.00% 0	0.00% 0	25.00% 2	8	4.00

#	COMMENTS FOR "5.5.1 FOSTERING CHILDREN'S SOCIAL AND EMOTIONAL DEVELOPMENT IN THE CONTEXT OF THEIR CULTURE AND LANGUAGE."	DATE
1	If the kid confortable	8/2/2021 1:42 PM
#	COMMENTS FOR "5.5.2 RECOGNIZING BEHAVIORAL/EMOTIONAL PROBLEMS OR DEVELOPMENTAL DELAYS."	DATE
1	If paid close attention to child	8/2/2021 1:42 PM
#		
#	COMMENTS FOR "5.5.3 UNDERSTANDING THE IMPACT OF LOSS OR TRAUMA ON CHILDREN AND HOW TO RESPOND APPROPRIATELY."	DATE
1		8/2/2021 1:42 PM

#	COMMENTS FOR "5.5.4 RECOGNIZING THE ROLE OF SENSORY AWARENESS AND INTEGRATION IN SOCIAL EMOTIONAL DEVELOPMENT AND UNDERSTANDING HOW TO PROMOTE IT."	DATE
1	we need programs to nurture our children	8/2/2021 1:42 PM
#	COMMENTS FOR "5.5.5 UNDERSTANDING GENDER DIFFERENCES IN CHILD REARING AND ITS IMPACT ON SOCIAL AND EMOTIONAL DEVELOPMENT."	DATE
1	if there is a problem then do so	8/2/2021 1:42 PM
#	COMMENTS FOR "5.5.6 PROMOTING POSITIVE RELATIONSHIPS AMONG CHILDREN LIVING IN THE SAME HOUSEHOLD."	DATE
	There are no responses.	
#	COMMENTS FOR "5.5.7 UNDERSTANDING HOW MENTAL HEALTH AND WELLNESS AFFECTS FAMILY RELATIONSHIPS AND THE DEVELOPMENTAL PROCESS OF YOUNG CHILDREN."	DATE
1	yes	8/2/2021 1:42 PM
#	COMMENTS FOR "5.5.8 RECOGNIZING AND RESPONDING TO THE IMPACT OF CHILD OR PARENTAL TRAUMA ON PARENT-CHILD RELATIONSHIPS."	DATE
1	Im sure its hard respond to trauma need of a plan	8/2/2021 1:42 PM

# Q 5.6 Families are invited to observe their children interacting with other children and/or staff in the program.

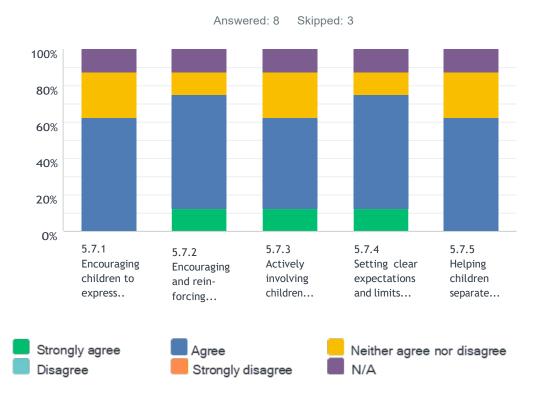
Answered: 7 Skipped: 4



ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	57.14%	4
Neither agree nor disagree	14.29%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	28.57%	2
TOTAL		7

#	COMMENT	DATE
1	unknown	8/6/2021 8:25 AM
2	this is a good plan to get parents involved	8/2/2021 1:42 PM
3	Don't know.	7/31/2021 12:36 PM

# Q 5.7 The program supports children's social and emotional development with intentional practices that include:

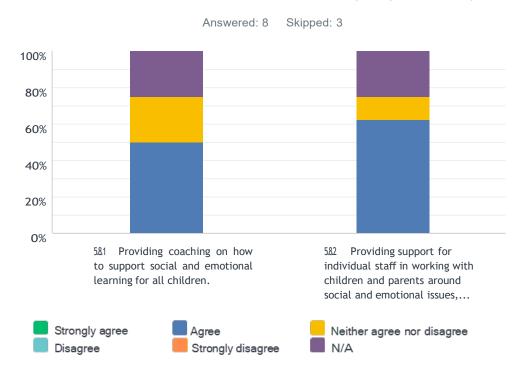


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.7.1 Encouraging children to express their feelings in ways that are the most comfortable for them.	0.00%	62.50% 5	25.00% 2	0.00%	0.00% 0	12.50% 1	8	3.71
5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.00
5.7.3 Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).	12.50% 1	50.00%	25.00% 2	0.00% 0	0.00% 0	12.50% 1	8	3.86
5.7.4 Setting clear expectations and limits for behavior.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.00
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when	0.00%	62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71

### angry).

#	COMMENTS FOR "5.7.1 ENCOURAGING CHILDREN TO EXPRESS THEIR FEELINGS IN WAYS THAT ARE THE MOST COMFORTABLE FOR THEM."	DATE
	There are no responses.	
#	COMMENTS FOR "5.7.2 ENCOURAGING AND REINFORCING SOCIAL SKILLS SUCH AS SHARING, TAKING TURNS AND COOPERATIVE PLAY."	DATE
	There are no responses.	
#	COMMENTS FOR "5.7.3 ACTIVELY INVOLVING CHILDREN IN SOLVING THEIR CONFLICTS AND PROBLEMS (E.G., HELPING CHILDREN TALK OUT PROBLEMS AND THINK OF SOLUTIONS; SENSITIZING CHILDREN TO FEELINGS OF OTHERS)."	DATE
1	each situation is different	8/2/2021 2:45 PM
#	COMMENTS FOR "5.7.4 SETTING CLEAR EXPECTATIONS AND LIMITS FOR BEHAVIOR."	DATE
	There are no responses.	
#	COMMENTS FOR "5.7.5 HELPING CHILDREN SEPARATE EMOTIONS FROM ACTIONS (E.G., NOT REACTING BY HITTING EVEN WHEN ANGRY)."	DATE
	There are no responses.	

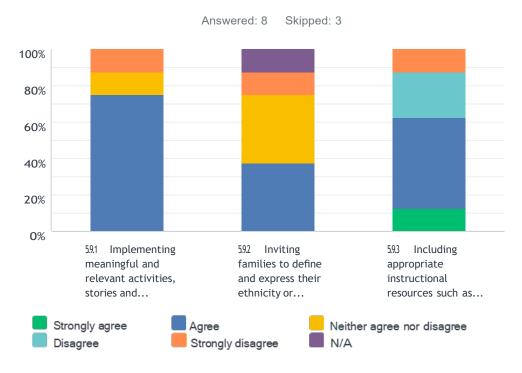
## Q 5.8 Mental health consultants assist staff in integrating social emotional development into everyday work by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.8.1 Providing coaching on how to support social and emotional learning for all children.	0.00%	50.00%	25.00% 2	0.00%	0.00% 0	25.00% 2	8	3.67
5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.	0.00% 0	62.50% 5	12.50% 1	0.00% 0	0.00% 0	25.00% 2	8	3.83

#	COMMENTS FOR "5.8.1 PROVIDING COACHING ON HOW TO SUPPORT SOCIAL AND EMOTIONAL LEARNING FOR ALL CHILDREN."	DATE
1	unknown	8/6/2021 8:26 AM
2	Don't know.	7/31/2021 12:42 PM
#	COMMENTS FOR "5.8.2 PROVIDING SUPPORT FOR INDIVIDUAL STAFF IN WORKING WITH CHILDREN AND PARENTS AROUND SOCIAL AND EMOTIONAL ISSUES, INCLUDING CHALLENGING BEHAVIORS."	DATE
1	unknown	8/6/2021 8:26 AM
2	This would help we children	8/2/2021 2:45 PM

# Q 5.9 The program welcomes and affirms the cultures of families it serves by:

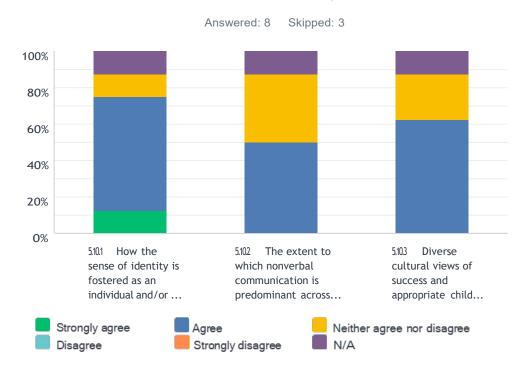


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.9.1 Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.	0.00%	75.00% 6	12.50% 1	0.00%	12.50% 1	0.00%	8	3.50
5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.	0.00%	37.50%	37.50% 3	0.00%	12.50% 1	12.50% 1	8	3.14
5.9.3 Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.	12.50% 1	50.00%	0.00% 0	25.00% 2	12.50% 1	0.00%	8	3.25

#	COMMENTS FOR "5.9.1 IMPLEMENTING MEANINGFUL AND RELEVANT ACTIVITIES, STORIES AND DISCUSSIONS REGARDING CULTURAL AND LINGUISTIC DIFFERENCES."	DATE
1	Don't know.	7/31/2021 12:44 PM
#	COMMENTS FOR "5.9.2 INVITING FAMILIES TO DEFINE AND EXPRESS THEIR	DATE

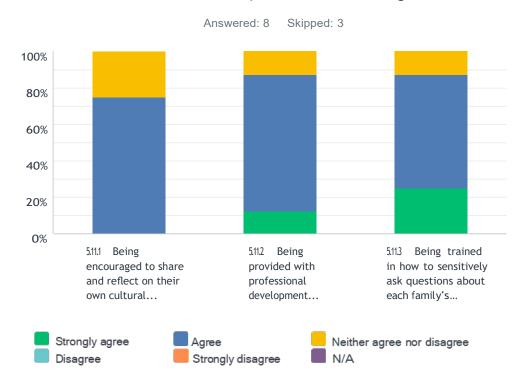
	ETHNICITY OR CULTURE, INCLUDING THE EXPERIENCES AND VALUES THEY HOLD TO BE MOST IMPORTANT."	
1	easier said than done	8/2/2021 2:47 PM
2	Don't know.	7/31/2021 12:44 PM
#	COMMENTS FOR "5.9.3 INCLUDING APPROPRIATE INSTRUCTIONAL RESOURCES SUCH AS BOOKS AND TOYS THAT EXPOSE CHILDREN TO ROLE MODELS FROM THEIR OWN AND OTHER CULTURAL BACKGROUNDS."	DATE
1	we need	8/2/2021 2:47 PM

## Q 5.10 Staff receive training on how cultural differences affect social and emotional development, especially differences in:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.10.1 How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.	12.50% 1	62.50% 5	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.00
5.10.2 The extent to which nonverbal communication is predominant across cultures.	0.00%	50.00%	37.50% 3	0.00%	0.00% 0	12.50% 1	8	3.57
5.10.3 Diverse cultural views of success and appropriate child development.	0.00%	62.50% 5	25.00% 2	0.00%	0.00%	12.50% 1	8	3.71

# Q 5.11 Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.	0.00%	75.00% 6	25.00% 2	0.00%	0.00% 0	0.00%	8	3.75
5.11.2 Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00%	0.00%	8	4.00
5.11.3 Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.	25.00% 2	62.50% 5	12.50% 1	0.00%	0.00% 0	0.00%	8	4.13

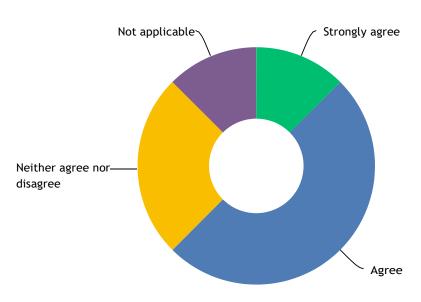
# COMMENTS FOR "5.11.1 BEING ENCOURAGED TO SHARE AND REFLECT ON THEIR OWN CULTURAL BACKGROUND, INCLUDING SELF-AWARENESS OF BIASES THEY MAY HOLD."

There are no responses.

#	COMMENTS FOR "5.11.2 BEING PROVIDED WITH PROFESSIONAL DEVELOPMENT OPPORTUNITIES THAT ALLOW THEM TO LEARN MORE ABOUT THE HISTORY AND EXPERIENCES OF DIFFERENT RACIAL AND CULTURAL GROUPS."	DATE
1	Don't know.	7/31/2021 12:44 PM
#	COMMENTS FOR "5.11.3 BEING TRAINED IN HOW TO SENSITIVELY ASK QUESTIONS ABOUT EACH FAMILY'S SPECIFIC EXPERIENCE AND CULTURAL PERSPECTIVES."	DATE
	There are no responses.	

# Q 5.12 Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.

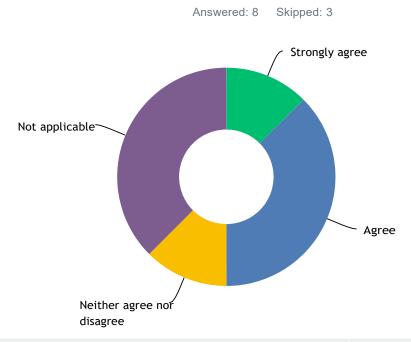




ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	50.00%	4
Neither agree nor disagree	25.00%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	12.50%	1
TOTAL		8

#	COMMENT	DATE
1	the plan is a good one	8/2/2021 2:47 PM
2	Don't know.	7/31/2021 12:44 PM

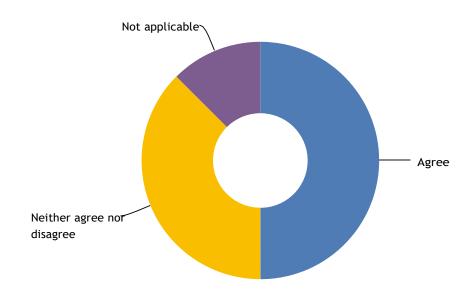
# Q 5.13 The program's mental health consultant offers consultation that is respectful of differences in parenting behaviors and child behaviors that stem from traditions and cultural roots.



ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	37.50%	3
Neither agree nor disagree	12.50%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	37.50%	3
TOTAL		8

## Q 5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.

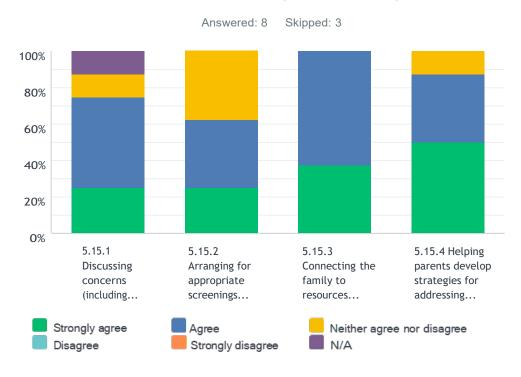
Answered: 8 Skipped: 3



ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	50.00%	4
Neither agree nor disagree	37.50%	3
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	12.50%	1
TOTAL		8

#	COMMENT	DATE
1	Don't know.	7/31/2021 12:44 PM

## Q 5.15 When staff are concerned about a child's social and emotional development, they respond by:

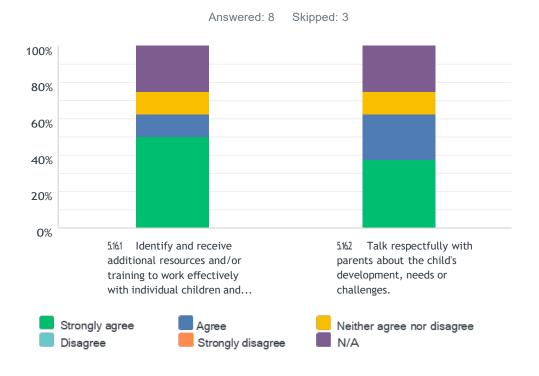


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.15.1 Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.	25.00% 2	50.00%	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.14
5.15.2 Arranging for appropriate screenings and assessments.	25.00% 2	37.50% 3	37.50% 3	0.00%	0.00%	0.00%	8	3.88
5.15.3 Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).	37.50% 3	62.50%	0.00%	0.00%	0.00%	0.00%	8	4.38
5.15.4 Helping parents develop strategies for addressing the issue at home.	50.00% 4	37.50%	12.50% 1	0.00%	0.00%	0.00%	8	4.38

# COMMENTS FOR "5.15.1 DISCUSSING CONCERNS (INCLUDING OBJECTIVE DESCRIPTIONS OF BEHAVIORS) WITH THE CHILD'S PARENTS WITHOUT CASTING BLAME ON THE PARENTS."	
--	--

1	not sure	8/2/2021 2:48 PM
#	COMMENTS FOR "5.15.2 ARRANGING FOR APPROPRIATE SCREENINGS AND ASSESSMENTS."	DATE
	There are no responses.	
#	COMMENTS FOR "5.15.3 CONNECTING THE FAMILY TO RESOURCES THAT CAN SUPPORT THE CHILD'S SOCIAL AND EMOTIONAL DEVELOPMENT (E.G., PLAY THERAPY, MENTAL HEALTH SERVICES, PARENTING CLASSES)."	DATE
	There are no responses.	
#	COMMENTS FOR "5.15.4 HELPING PARENTS DEVELOP STRATEGIES FOR ADDRESSING THE ISSUE AT HOME."	DATE
	There are no responses.	

### Q 5.16 Staff have access to a mental health consultant to help them:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.16.1 Identify and receive additional resources and/or training to work effectively with individual children and parents.	50.00% 4	12.50%	12.50% 1	0.00%	0.00% 0	25.00% 2	8	4.50
5.16.2 Talk respectfully with parents about the child's development, needs or challenges.	37.50% 3	25.00% 2	12.50% 1	0.00%	0.00%	25.00% 2	8	4.33

#	COMMENTS FOR "5.16.1 IDENTIFY AND RECEIVE ADDITIONAL RESOURCES AND/OR TRAINING TO WORK EFFECTIVELY WITH INDIVIDUAL CHILDREN AND PARENTS."	DATE
1	unknown	8/6/2021 8:27 AM
#	COMMENTS FOR "5.16.2 TALK RESPECTFULLY WITH PARENTS ABOUT THE CHILD'S DEVELOPMENT, NEEDS OR CHALLENGES."	DATE





The Cone Park Library Resource Center (CPLRC)
Strengthening Families Self-Assessment (SFSA) Team's
Findings and Recommendations/Action Items Associated with
Supporting Families by Promoting Social Connections

Robin Perry (Lead Evaluator), Christen Lancaster (Cone Park Library Resource Center Community Research Coordinator), Celia George, Ruth Goodman, Lovell Haughton, Lashon Jenkins, Diane Johnson, Artie McMillan, Erica Reed, Stephanie Seawright, and Toni Spoliansky (CP SFSA Team)

**Institute for Child and Family Services Research** 



This report was funded by the Children's Bureau; Administration on Children, Youth, and Families; Administration for Children and Families, U.S. Department of Health and Human Services, under grant # 90CA1868. The contents of this report are solely the responsibility of the authors and do not necessarily represent the official views of the Children's Bureau.

#### **Table of Contents**

	Page
Introduction	1
The CP Library Resource Center—Brief History	1
The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs	2
The Cone Park Strengthening Families Self-Assessment Team	5
Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/ Action Items Associated with Supporting Families by Promoting Social Connections	9
How Does Cone Park Library Resource Center Help Families Value, Build, Sustain and Use Social Connections?	9
How Does Cone Park Library Resource Center Create an Inclusive Environment?	14
How Does Cone Park Library Resource Center Facilitate Mutual Support?	17
Fidelity of Promoting Social Connections to CSSP Protective Factor	19
Appendix A: The Strengthening Families Self-Assessment Tool	21
Appendix B: Electronic Version of Social Connections Questions of SFSA Tool	63
Appendix C: SFSA Tool for Community-Based Programs—Social Connections Results	75

### Suggested Citation:

Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social Connections.* Tallahassee: Institute for Child and Family Services Research.

#### Introduction

This report summarizes the findings from, and the recommendations developed by the Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team utilizing a standardized process developed by the Center for the Study of Social Policy. This report focuses specifically upon findings generated from the utilization of the Strengthening Families Self-Assessment Tool for Community-Based Programs (and associated processes) by the CPLRC SFSA team with a specific focus on items/measures associated with supporting families by promoting **social connections**. Social Connections is one of five protective factors that serve as an organizing framework for the structure and delivery of supports and services to the neighborhood/community served by the Cone Park Library Resource Center. Specific strengths associated with promoting social connections have been identified along with discussions and recommended action items for enhancing/strengthening responsiveness to address this protective factor.

#### The Cone Park Library Resource Center—Brief History

Partnership for Strong Families (PSF), the lead community-based care agency under contract with the Florida Department of Children and Families (since 2003) to provide comprehensive child welfare services in 13 North Central Florida counties, has been leading innovative approaches to strengthen families and increase the presence of protective factors for more than a decade in North Central Florida. PSF's efforts began in 2007 to develop a network of Family Resource Centers (FRC) that emphasize a strengthening family approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

The PSF Resource Center model is built upon a multi-system collaborative, focusing on primary prevention that works toward strengthening families with the goal of preventing child maltreatment and reducing entries into foster care. One of the major strengths of the Resource Center Model utilized at the four existing sites (which includes the CP Library Resource Center) is its strong focus on community collaborations as a means of addressing identified needs in at-risk neighborhoods. There is a strong history of collaboration with each of the existing three Resource Centers in Gainesville. Over time, a network of over 75 community partners (across all sites) has been developed. These collaborative efforts have been well documented in select Resource Center (RC) reports (for each RC and PSF), website and social media posts, Resource Center pamphlets/infographics, news reports, and select publications. The services provided are free and are intended to be responsive to the needs of the surrounding community as identified by community partners/stakeholders and parents/household members (referred to as patrons) within the targeted areas. It is this multi-system collaborative, with representation from across the five sectors (public, business, philanthropy, community, and nonprofit), that has allowed a blending of funding, expansion of services to meet the needs of patrons and enhancement of the community's ability to leverage resources to benefit some of Gainesville's most at-risk populations.

The first FRC developed by PSF was the Library Partnership (developed in collaboration with the Alachua County Library District) which opened its doors to the community in July 2009. In 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, a historically under-served community. Due to the existing perceived success of the Library Partnership, along with the identified needs of the community, PSF was asked to partner with ACLD to open another resource center at the Cone Park Library. As southeast Gainesville was considered a "hotspot" of high rates of reported child maltreatment, PSF eagerly agreed to move forward with this new venture. Prior to opening the new Resource Center, PSF met with the community, assessed household needs, and

established collaborative partnerships. Through community meetings and assessments, several local needs were identified that the new Resource Center could help address. The following local needs were identified: GED services, concrete and educational supports for children and parents, meaningful engagement and empowerment of parents and access to healthcare in southeast Gainesville. The Cone Park Library Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Resource Center began operating full-time in May 2014.

All Gainesville Resource Centers are frequently described as "one-stop-shops" for local resources. Patrons may walk into the RCs for immediate access to available services or meet with professional RC staff to help determine needs and connect with local resources. Services provided through the RCs are voluntary and are free of charge to all community members as the result of community partnerships, various funding opportunities, and both monetary and in-kind donations.

The basis of PSF's RC Model is the Strengthening Families Approach and Protective Factors Framework (Center for the Study of Social Policy [CSSP], 2014). The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each RC. Although there may be some common services and supports across RCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each RC. The five protective factors include:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- Concrete Support in Times of Need
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the CP Library Resource Center at promoting social connections. This report represents one small element of a comprehensive process evaluation meant to advance knowledge regarding the functioning, responsiveness, and impact of PSF Family Resource Centers upon the communities they serve. Since supports and services at the CP Library Resource Center are structured in accordance with the CSSP Protective Factors Framework, the Strengthening Families Self-Assessment Tool for Community-Based Programs, and associated processes (see below) are being used to help determine the fidelity of specific implementation strategies (in accordance with the above noted framework) at promoting parental resilience and strengthening families. This process will help identify existing strengths of select supports and services and help identify areas for potential improvements.

#### The Strengthening Families Self-Assessment Tool and Process for Community-Based Programs

The Strengthening Families Self-Assessment Tool for Community-Based Programs and associated protocols were developed by the Center for the Study of Social Policy (CSSP). This is a comprehensive, research-informed approach (based on national studies) that will aid each in assessing the extent to which each of the RCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors<sup>1</sup>. The assessment criteria and protocol for self-assessment is standardized.

<sup>&</sup>lt;sup>1</sup> For more information regarding CSSP's Strengthening Families and Protective Factors Framework, please see: https://cssp.org/our-work/project/strengthening-families/ Additional information regarding the self-assessment

The criteria and indicators for fidelity assessment relate to the extent to which each Resource Center has implemented services/activities in alignment with core strategies for building each of the following protective factors (see above).

There are five main sections of the Strengthening Families Self-Assessment process (one for each Protective Factor). See Appendix A for a copy of the assessment tool and protocol. Protocols require the establishment and utilization of a Self-Assessment Team that includes at a minimum: Administrative Staff and/or Program Director, Direct Service Staff, and Parents who participated in the program/received services (or whose children participated in service activities). For this project, it was deemed important to also include collaborative partners and other stakeholders in the process (as informed parties/members). There is one team per project Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) two administrative and direct service staff, three community collaborators, and three parents who have been active participants in the program (or whose children participate in the program). The four parents/patrons initially selected to be members of each assessment team were chosen from a list of patrons that consented to be part of the broader study and who, after following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons), received services or participated in activities linked to protective factors. These processes were followed in the establishment of the CPLRC SFSA Team, although only two community collaborators were able to actively participate in the process. Composition (see below) includes two administrators and direct service staff (Lashon Jenkins and Erica Reed), two community collaborators (Diane Johnson and Stephanie Seawright), and four Community Ambassadors (Celia George, Ruth Goodman, Lovell Haughton, and Artie McMillan). The term "Community Ambassador" was chosen by the team to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) contributions to this process. Profiles of team members are denoted below.

As highlighted in **Appendix A**, there are a series of indicators and associated items linked with each Protective Factor. These indicators and items represent a series of actions/activities, program elements, protocols, and policies associated with implementation of services meant to enhance each Protective Factor according to best-practice/evidence-based standards. For services and supports focused on Social Connections there are 18 indicators with 43 associated items for which each team member is asked to individually rate their level of item statement agreement on a five-point Likert-type scale (Strongly Agree, Agree, Neither Agree nor Disagree, Disagree, Strongly Disagree) with an option for Not Applicable. This same scale is used for an assessment of all Protective Factor items/indicators. Collectively (for Social Connections), responses to these assessment items are meant to respond to the following questions:

How Does Cone Park Library Resource Center Help Families Value, Build, Sustain and Use Social Connections? (Items 2.1 through 2.7)

How Does Cone Park Library Resource Center Create an Inclusive Environment? (Items 2.8.1

model and associated methodology, tools, and recommended processes, see: <a href="https://cssp.org/our-work/projects/self-assessments-for-programs/">https://cssp.org/our-work/projects/self-assessments-for-programs/</a> and Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

through 2.10)

How Does Cone Park Library Resource Center Facilitate Mutual Support? (Items 2.11 through 2.18)

Team members received an orientation to the CSSP Protective Factors framework, its relationship to the CP Library Resource Center service model, and the Strengthening Families Self-Assessment Tool for Community-Based Programs and its associated protocol. Individual members had the choice of completing paper or electronic versions of the Strengthening Families Self-Assessment Tool. Since the completion of the tool requires an investment of time (60-90 minutes) and reflection, individual members could decide if they wanted to complete the tool at one time or in sections. To accommodate these preferences, electronic versions of the tool were stratified by section/protective factor. See Appendix B for a copy of the electronic version of the tool associated with Social Connections questions/items (the focus of this report). For the electronic versions, each team member was provided a unique (and secure) web link and QR code, providing them with two electronic link options for responding to the survey (a preference/option requested by team members) but informed to respond only once. Although the names of members/respondents were known to all team members and the evaluation team, only their role on the team was requested as identifying information and recorded in the database. If a team member completed a paper version of the tool, that tool was submitted to the Community Research Coordinator for data entry into a system that would combine that respondent's scores with any electronically submitted responses from other members. The Community Research Coordinator was available on site and via e-mail and the lead evaluator was available via phone and e-mail to field any questions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

After individual team members completed their scores, these data were shared via a written summary report (see Appendix C for the SFSA Tool for Community-Based Programs— Social Connections) highlighting the distribution of responses by team members for each item. Efforts were made through critical discussion and dialog to arrive at a consensus assessment for each item and indicator (if such was possible) so that a collective assessment could lead to a structured action plan to address any fidelity concerns and program needs. Although the specific process for moving toward consensus is not itemized in the tool protocols (it is left to the team), the lead evaluator suggested some processes and the team made initial decisions regarding how to proceed. Each question and associated items were reviewed collectively and then as individual items. For many items, established consensus and agreement was evident, especially for select items and questions identified as observed strengths of the CP Library Resource Center. These strengths were noted with expanded discussion (at times) highlighting examples of how strengths were manifested. Given the robustness of discussion and shared ideas, concentrated focus addressed those items where there was variation in the level and type of statement/item agreement (included by role of the respondent as a stratum) and /or if the weighted mean score for a select item was below 4.0 (the threshold of agreement). If an item was identified as an area(s) of difference/variation of assessment, open discussion ensued to clarify the source and reasons of these differences and a collective decision was made regarding whether an action item was needed or should be considered. The team engaged in facilitated brainstorming to identify potential recommendations for action items (if any). If any action items were identified (some more immediate than others) for select items/questions, any structured plan for action item implementation will follow the completion of all discussions related to self-assessment findings linked to each protective factor. However, if modifications

to select supports and services (i.e., recommended action items) were feasible and could be made concurrent with the SFSA process, such would happen and be reported on in subsequent meetings.

The initial meeting of the CPLRC SFSA Team took place on July 21, 2021. Following a review of the SFSA, associated process and expected deliverables, the team decided to meet monthly over an extended timeframe through the fall months instead of other proposed options, including multiple times over a more concentrated time frame. Communication with, between, and among individual team members could take place in-between meetings but all discussion and brainstorming activities would take place during in-person, web-based, or hybrid meetings. Due to variations in community spread of COVID-19 during this timeframe, the meeting format changed/varied in accordance with safety concerns and Partnership for Strong Families service and administrative pandemic protocols. Subsequent meetings that involved the discussion of Social Connections items took place on September 22 and October 20, 2021. The dates and times of meeting were in accordance with preferred times and schedules of all team members and attendees.

### The Cone Park Strengthening Families Self-Assessment Team

As denoted earlier, a team of dedicated community ambassadors, CPLRC staff, and collaborative partners worked together to engage in a comprehensive assessment of the supports and services provided by the CPLRC in accordance with the CSSP's protective factors framework. The biographies of these team members are detailed below.



Celia George has been a patron at CPLRC since 2015. She is a Florida native and has spent much of her life living in Gainesville, FL. She graduated from the Santa Fe College Police Academy and went on to work with the University of Florida Police Department. During her time as a police officer, she moved near Morningside Nature Center which is only a few miles from the present location of CPLRC. She has raised two daughters who have gone on to be college graduates, building upon her successes. When Celia retired, she turned her attention to her grandchildren and began using the Fred Cone Park Facilities with them. She has made sure they are included in CPLRC summer camps, family events and activities like Homework Help and Girl Scouts. One of her granddaughters currently participates in the Girl Scouts program at CPLRC. She frequently uses the track behind the Cone Park library and attends the food distribution programs. She has been an

encouragement to her twin grandchildren who have started using the track as well. She wanted to be a part of this SFSA Team because "I want to help make a difference". Celia loves Cone Park because "it serves so many different purposes and meets the needs for so many families in the community".



**Ruth Goodman** has been a patron at the CPLRC since 2019. During that time, she also utilized services at the SWAG Family Resource Center and the Library Partnership Library Resource Center. She was born and raised in the French West Indies but after visiting the United States as a young woman she decided to stay and make a life for herself in the US. She married at age 19 and has raised 4 children with her husband. After retiring as a lead teacher for 20 years, Ruth now focuses on assisting with her 10 grandchildren. One of the ways she does this is by reaching out to the Resource Centers. She is happy to be a part of the Cone Park Library Resource Center because "it's very helpful and informative for children and families and the community". Ruth wanted to be a member of our Strengthening Families Self-Assessment Team because she wants to be a part of any work that could potentially help keep families together.



**Lovell Haughton** has been a patron of the CPLRC since August 2020. She is a native of New York but has been in this community for 30 years. Lovell has experience working with community organizations, resources, and support services for those diagnosed with HIV. Her drive to care for others pushes her forward in everything that she does. She strives to maintain and build partnerships with families and be a support and liaison for them. She also acts as a support for her family and 7 grandchildren. Lovell has enjoyed working with the CPLRC because it's community and family oriented.



Lashon Antonia Jenkins first became involved with the CPLRC 10 years ago, as a patron to the CPL. Lashon is a Gainesville native, residing on the eastside of town, where the CPLRC is located. For the past 10 years, she has been an employee with Partnership for Strong Families in the adoptions department. She has worked directly with CPLRC as an intern this last year to satisfy requirements for her Master of Social Work degree. Currently, Lashon holds a Bachelor of Arts in Psychology and a Master of Human Services degree. Her parents also live in the community, and she makes time to visit them regularly between school, work, and an occasional rest. Lashon likes the way patrons are treated by the staff as they seek services that they do not have access to, like computer use or emergency food and clothing. She is glad to be a part of the SFSA Team because "when we know how to

grow, it will make it that much better."



**Diane Holt Johnson** was born in Newark, New Jersey and has worked in Gainesville, FL for six years. She graduated from the University of Pennsylvania with a BA in Sociology and the University of South Florida with a master's degree in Library & Information Science. Diane has a lifetime of experience volunteering in churches, non-profit and social service organizations (i.e., United Way, Take Stock in Children, Boys & Girls Club, Reading Pals, American Cancer Society, local Community Development Corporations, and grassroots neighborhood associations.) She and her husband of 42 years, Derryl, have raised six children, who are their proudest accomplishments. She loves the CPLRC because it values families and works to preserve them; emphasizes preventing and protecting families from disasters rather than correcting after the problem has festered; and provides programs to "help families help themselves" as much as possible. Diane has

been glad to be a part of the SFSA Team because it gives voice to the patrons, who historically have not been asked to have input into the programs and services designed for them.



Artie McMillan has been a patron at CPLRC since 2014. She has been a part of the local community for 14 years and frequented the Cone Park Library before the Resource Center opened. Artie has dedicated her life to serving others and has compassion for people who have fallen on hard times and are experiencing homelessness. She knows what it's like to struggle and wants to help people in need. Artie also has an entrepreneurial spirit and has managed her own restaurant, daycare, and prayer ministry in the past. Her dream would be to work on a Tiny House community that could serve as a one-stop center for people experiencing homelessness, offering practical help to stabilize them. She lives with her son and her two grandchildren that she has legal custody of through Partnership for Strong Families. In 2014, she began seeking regular services at CPLRC when the children came to live with her. Artie loves the care and compassion that is displayed at CPLRC and says, "you

can feel the good energy". She joined the SFSA Team because she trusted Erica's advice that she would be a good fit and because she wants to make a difference and have her voice heard, "not as a victim but as the victor".



**Erica Reed** has been the Resource Center Manager of the CPLRC since 2016. She has been in this community her entire life and many of her family members live in the community. Erica graduated from the University of Florida with a B.S. degree in Family, Youth and Community Sciences with minors in nonprofit organization, leadership, and human services. In addition to her education, she has experience working as a Guardian Ad-Litem, a case manager for high-risk cases and in licensing foster homes. Erica has been married for 23 years and lives at home with her husband, two boys and two girls. She has a genuine compassion for people and loves the CPLRC because it gives her the opportunity to help individuals and families in need. Erica is pleased with the SFSA Team process because it brought together a team with a common goal of wanting to make things better and because she wasn't alone in the process.



**Stephanie Seawright** has been a member of the Gainesville community since 1987 and has been working with the CPLRC since 2017. She helped developed the local A. Quinn Jones Museum and Cultural Center in Gainesville and works with her church and sorority to be of service to mankind. With a lifetime of experience serving others, Stephanie chooses to collaborate with CPLRC because she loves that the staff are helpful and care about the community they serve. As the Chief Operations Officer of the Central Florida Community Action Agency, she works to bring services like the "Fight for your Money" class to patrons of the Resource Center. Stephanie chooses to be a part of the Strengthening Family's Self-Assessment team because she is impressed with the work that the Resource Center does and wants to be a part of its success in any way.

Although not formally members of the CPLRC SFSA Team, Robin Perry (Lead Evaluator) and Christen Lancaster (Community Research Coordinator for the CP Library Resource Center) attended each of the CP SFSA Team meetings. They, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended the majority of the meetings served as key supports for team processes. Robin Perry provided initial training and overview of the Center for the Study of Social Policy's SFSA Tool for Community-Based Programs and associated processes for review of findings and development of an action plan and recommendations by the team. Robin Perry was the lead facilitator of select group meetings; summarizing findings generated from the self-assessment tool/survey, asking questions, and clarifying team members' views as they discussed survey results with the goal of moving toward a consensus of perspective related to select survey questions and recommended action items for the CP Library Resource Center. Christen Lancaster is the Community Research Coordinator for the CPLRC and a principal on-site contact for team members. Ms. Lancaster maintained regular contact with team members and distributed meeting materials; aided with facilitation of group processes, and (along with Robin Perry) took detailed notes of comments and discussion items. Toni Spoliansky served as an information support and assisted in answering any questions individual team members had about the funded project and the role, function, and support of Partnership for Strong Families for the CPLRC. It is important to note that the role of the above three individuals was seen as supportive in nature. An empowerment perspective was adopted, as a team they would decide the meeting schedule and facilitation process with all members assuming equal status as knowledge experts with respect to community needs and the role, value, functioning, and responsiveness of the CPLRC to community need related to supporting families through the promotion of knowledge of parenting and child development. There was no effort by those in supportive roles to censure conversation and discussion points, as feedback was regularly sought regarding facilitation processes and preferences of group members for these processes. All notes were converted into minutes that were distributed to team members for their review, edits, and approval. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (the team decided on monthly two-hour meetings) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings (which would then be discussed with all team members at the next in-person or virtual meeting).

### Strengthening Families Self-Assessment (SFSA) Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social Connections

The following represents a summary of key findings and recommendations by the team for questions and items associated with promoting knowledge of parenting and child development. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the *SFSA Tool for Community-Based Programs—Social Connections;* distributed to all team members as a starting point for discussion and brainstorming activities. For the purposes of the summary, findings are presented in accordance with the broader questions select items/sets of questions the tool was structured to answer. Each summary is followed by an itemization of select discussion points and any identified action items for which there was consensus among team members.

# How Does Cone Park Library Resource Center Help Families Value, Build, Sustain and Use Social Connections? (Items 2.1 through 2.7)

Table 1 (see below) provides a detailed summary of the individual items/questions associated with a measure of how the CP Library Resource Center (CPLRC) helps families value, build, sustain, and use social connections, and the average team score (weighted) associated with each. The following scores were associated with each rating of each item response, where Strongly Agree=5, Agree=4, Neither Agree nor Disagree=3, Disagree=2, Strongly Disagree=1. The weighted average score for each item reflects the average score across all team members, excluding any Not Applicable responses. There were no SFSA tool items for which the majority of team members thought were not applicable. At most, there was one team member who found select items represented in Table 1 to be not applicable. The Team Scores (weighted average) cells are color coded by where green represents team consensus of Strongly Agree and Agree, yellow represents scores in the Neither Agree nor Disagree range, and red represents a level of Disagreement (either Disagree or Strongly Disagree).

Findings in Table 1 highlight a team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 11 of the 21 items/indicators of how (CPLRC) helps families value, build, sustain, and use social connections; with 10 within the Neither Agree nor Disagree range. There were no item/indicators for which there was a consensus of disagreement. The team had an opportunity to discuss all item responses and brainstorm potential action items generating from open discussion of CPLRC's strengths and potential areas of improvement. Details regarding key discussion points can be found in meeting minutes for each team meeting. These minutes would be utilized in future team meetings and by CPLRC staff members when implementation tasks are itemized for each action item.

The collaborative relationship between CPLRC and the CP Library was identified as a major strength by team members. Although there are unique contributions by each agency/organization, Community Ambassadors acknowledge that within the community both are valued and sometimes perceived as a unified/aggregate support for families.

There was uniform consensus regarding opportunities and environments that reinforce informal connections among families and parents at the CPLRC and the CP Library (see Items 2.1 through 2.2.3). The collaborative relationship between CPLRC and the CP Library was identified as a major strength by team members. Although there are unique contributions by each agency/organization, Community Ambassadors acknowledge that within the community both are valued and sometimes perceived as a unified/aggregate support for families. Subsequently, some of the responses by team members (for all items reviewed in this report) reflect this perspective with consideration given to the combined resources, services, and supports provided by both. The number of full-time staff (there is one person) and physical space at the CPLRC may be limited in size; however, the CPLRC has use of, and collaborates with, the CP Library in the utilization of their space and supports. This space is comfortable and welcoming. Staff at both the CPLRC and CP Library are perceived as very friendly and effective in engaging one-on-one with parents (there is no formal parenting mentoring program/model) and providing opportunities for parents to interact with one another (and with staff, volunteers, and interns) in supportive ways. Staff report that they are cautious about any formal introductions of parents to one another with respect to specific issues that may be deemed confidential; however, informally there may be events and activities when parents are afforded the opportunity (more so pre-COVID-19) to informally get to know one another and develop personal connections. In any regard, the informal efforts of program staff to engage with families in a friendly, supportive, and helpful manner—including personally networking families to an array of collaborative partners and supports that can help strengthen family relationships—were well acknowledged and served as a source of consensus agreement on two additional items denoted in Table 1:

- 2.4 The program encourages positive relationships between families and staff members by planning informal social events where staff can interact with families.
- 2.5 The program offers or connects families to resources to strengthen relationships between adults (e.g., healthy marriage skills, communication skills, conflict resolution, co-parenting).

Staff at both the CPLRC and CP Library are perceived as very friendly and effective in engaging one-on-one with parents...and providing opportunities for parents to interact with one another (and with staff, volunteers, and interns) in supportive ways.

Among the eight items affiliated with 2.3 (see Table 1), there were three items for which there was consensus agreement in terms of opportunities (primarily pre-COVID-19) being provided for families to socialize and foster a sense of community by organizing/hosting. These included:

- 2.3.4 Field trips and community events.
- 2.3.6 Affordable family activities.
- 2.3.7 Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.

There were several items for which the consensus assessment/rating was neither agree nor disagree as there may have been isolated examples of these opportunities in the past (pre-COVID); however, they may not be a standard element of the service and support system. These items included:

- 2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.
- 2.3.2 Periodic events like coffee breaks and breakfasts.
- 2.3.3 Celebrations, graduations, and holidays.
- 2.3.5 Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.
- 2.3.8 Social media groups or web pages where parents can get program information and interact with one another.

The team agreed that all the above opportunities (resources permitting) would benefit families, especially those events/activities that focus on parent-child engagement (e.g., 2.3.1, 2.3.3, and 2.3.5); some of which could be led by a professional and be developmentally (for the child) specific/focused. Although there was no agreed upon action item associated with this assessment, CPLRC and CP Library staff highlighted an interest in exploring the possible development and start (or re-start in some instances) of some of the above listed items/supports/activities. With respect to parent-child activities and engagement, team members reiterated the value of a past program at the CP Library that engaged fathers with their children while promoting literacy called "FRED" (Fathers Reading Every Day). This program focused on dads reading with their children. The team reiterated comments and points denoted in their discussion on promoting Parental Resilience that resulted in an action item that demanded the exploration of options/possibilities to provide more father-focused programming at CPLRC; perhaps in collaboration with CP Library<sup>2</sup>. This action item was seen to have specific relevance for ratings associated with 2.3.1.

There were two items affiliated with 2.6 for which there was consensus agreement in how CPLRC encourages newcomers and isolated or marginalized families to participate in program activities. These include:

- 2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.
- 2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.

Consensus agreement on these items was guided by much of the same reflections and assessments that reinforced agreement ratings for Items 2.1 through 2.2.3, 2.4, and 2.5.

<sup>&</sup>lt;sup>2</sup> Please see the following report for more information on this discussion and associated Action Item: Perry, R., Lancaster, C., George, C., Goodman, R., Haughton, L., Jenkins, L., Johnson, D., McMillan, A., Reed, E., Seawright, S., & Spoliansky, T. (2021). *The Cone Park Library Resource Center (CPLRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience*. Tallahassee: Institute for Child and Family Services Research.

Table 1: How Does Cone Park Library Resource Center Help Families Value, Build, Sustain and Use Social Connections?	Team Score (Weighted Average)
2.1 Families have access to a comfortable space where they can meet informally.	4.30
2.2 The program provides opportunities for families with similar interests, children's ages and/or	
circumstances (such as those with twins, parents of infants, parents with special-needs children or	
parents who speak the same language) to connect with one another:	
2.2.1 Formally, through parent support groups (including those with both broad and narrow	
focuses).	4.25
2.2.2 Through parent mentoring and matching for one-on-one support.	4.00
2.2.3 Informally, by introducing parents to one another.	4.13
2.3 The program provides opportunities for families to socialize and foster a sense of community by	
organizing/hosting:	
2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.	3.71
2.3.2 Periodic events like coffee breaks and breakfasts.	3.57
2.3.3 Celebrations, graduations and holidays.	3.86
2.3.4 Field trips and community events.	4.71
2.3.5 Events celebrating cultural customs, potlucks, and other opportunities for parents to	3.75
share and learn about each other's home lives and cultural backgrounds.	5.75
2.3.6 Affordable family activities.	4.57
2.3.7 Special programs for dads, grandparents, teen moms, teen dads and other caregivers	4.29
who would enjoy activities directed at their unique needs and interests.	4.23
2.3.8 Social media groups or web pages where parents can get program information and	3.57
interact with one another.	5.57
2.4 The program encourages positive relationships between families and staff members by planning informal social events where staff can interact with families.	4.00
2.5 The program offers or connects families to resources to strengthen relationships between adults	
(e.g., healthy marriage skills, communication skills, conflict resolution, co-parenting).	4.13
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in	
program activities by:	
2.6.1 Calling, sending notes or making home visits inviting them to program activities.	3.43
2.6.2 Connecting with them on social media platforms through program pages or groups.	3.29
2.6.3 Offering support with transportation, child care or other barriers to participation.	3.71
2.6.4 Making special efforts to connect them with other families who share similar interests.	3.86
2.6.5 Connecting them with resources (including mental health consultation) that can help	4.20
them explore difficulties with forming social connections.	4.38
2.6.6 Matching families with staff or other families who can help them feel welcome and	4.00
valued in program activities.	4.00
2.7 Staff receive training on how isolation or reluctance to participate can be the result of social	
exclusion due to differences in race, language, culture, appearance, gender, sexual orientation,	3.14
ability, etc.	

There were, however, some items that stimulated an involved discussion, resulting in recommended Action Items. These included:

- 2.6.1 Calling, sending notes or making home visits inviting them to program activities.
- 2.6.2 Connecting with them on social media platforms through program pages or groups.
- 2.6.3 Offering support with transportation, childcare, or other barriers to participation.
- 2.6.4 Making special efforts to connect them with other families who share similar interests.

With respect to 2.6.1, although there is an interest and motivation of program staff to reach out to and engage with marginalized families (the "...passion is here, the commitment is here..." noted staff), these activities are impacted by the availability of staff and resources. The CPLRC is smaller than other RCs in Gainesville and heavily reliant (as is the library) on the use of volunteers and interns. Volunteers are helpful, but not always a reliable source to be used for some program or outreach activities. Outreach and engagement can and has shifted from face-to-face to social media/electronic opportunities, especially since COVID-19. The team agreed that it is important to have a presence and be able to connect and promote supportive connections with and between patrons using social media. The value of having weekly posts on social media regarding events and activities related to the CPLRC and CP Library was reinforced. The CP Library (CPL) has used eBranch software to monitor the use of the eLibrary that integrates with the patron's social media account. The CPL currently utilizes Instagram and Facebook as social media platforms, although expansion to include the use of platforms such as Tik Tok and Snapchat (more targeted toward younger audiences) may be considered, along with the integration and sharing of these resources across/between CPLRC and CPL.

Resources (especially staff) at the CPLRC are too limited at this time to engage in any additional supports or special efforts denoted in 2.6.3 and 2.6.4 to encourage and engage with isolated and marginalized families to participate in programs; however, staff are sensitive to these matters and personally reach out as best they can to any family in need of support. The team agreed that there should be some attention given to these items, but no action item was or would be recommended until more opportunities and resources (including staff) are available at CPLRC. In the end, the team made the following recommended Action Item:

**Action Item #1:** Explore social media utilization strategies for CPLRC (perhaps in collaboration with CPL) as a means of engaging/connecting with patrons and their families (including marginalized groups) and disseminating information regarding program and resource supports/opportunities.

The lack of a consensus agreement on Item 2.7 (related to specific training received by staff) resulted from uncertainty among team members regarding what training was available and provided to program staff (including volunteers and interns). Ms. Reed shared that staff do receive mental health training and shared that additional trainings on these topics (denoted in 2.7) and others would be welcomed. Subsequently, the following Action Item was recommended:

**Action Item #2:** Determine which trainings associated with diversity and other issues (including, but not limited to, mental health issues/topics) that staff receive and those that might have relevance for an expanded group of participants (including Community Ambassadors, other patrons, etc.).

# How Does Cone Park Library Resource Center Create an Inclusive Environment? (Items 2.8.1 through 2.10)

Table 2 highlights findings related to three broad indicators (and 13 associated items) meant to gauge the extent to which CPLRC has created an inclusive environment. No action items were recommended for any items associated with 2.8 and 2.9. Among these 12 items, there was consensus agreement on nine (69%) that CPLRC's programs and staff model positive social skills and community building (2.8), as well as help staff learn how to reduce stereotyping and bias (2.9) by:

- 2.8.1 Welcoming all families.
- 2.8.2 Inviting all families to program parties or social events.
- 2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.
- 2.8.4 Helping to resolve conflicts among participants.
- 2.8.5 Promoting families' understandings of different cultures and backgrounds.
- 2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.
- 2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).
- 2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences, establishing rules for fair treatment of others).
- 2.9.6 Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.

Noteworthy positive attention was focused on items 2.8.1 through 2.8.6 where all team members believed these statements to be true and a manifestation of "good work" being done by staff. These findings reinforce other findings discussed by the team with respect to other protective factors (see Parental Resilience report) regarding "...the overall positive impact and meaningful practices (through multiple formal, informal, and regular communication methods) that the CP Library Resource Center and its staff (including volunteers and interns) engage in that recognize and affirm the central role of parents in their children's lives; provide multiple avenues/means for regular communication with family members, and make all family members feel welcome" (Perry et al., 2021, p.7). Team members reiterated these sentiments and see staff as positive role models with good communication skills who authentically care about patrons and families. Although there were three (of six) items affiliated with 2.9 for which there was not consensus agreement, differences in individual ratings were more a function of limited knowledge select team members had about internal trainings and interactions between CPLRC staff. No action items were recommended for any of the above indicators and associated items.

Team members...see staff as positive role models with good communication skills who authentically care about patrons and families.

Table 2: How Does Cone Park Library Resource Center Create an Inclusive Environment?	Team Score (Weighted Average)
2.8 The program and its staff model positive social skills and community building by:	
2.8.1 Welcoming all families.	4.81
2.8.2 Inviting all families to program parties or social events.	4.75
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.	4.29
2.8.4 Helping to resolve conflicts among participants.	4.25
2.8.5 Promoting families' understandings of different cultures and backgrounds.	4.25
2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.	4.00
2.9 The program helps staff learn how to reduce stereotyping and bias by:	
2.9.1 Modeling inclusive behavior among the staff.	3.63
2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).	4.00
2.9.3 Providing training and support for helping families and children resolve conflicts effectively.	3.88
2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).	4.00
2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.	3.86
2.9.6 Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.	4.00
2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.	3.67

Item 2.10 (for which there was not consensus agreement) became a focus of discussion/attention of the team. This item (see Table 2) was:

2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.

Considerable conversation was had regarding the value and need of enhancing connections within the community and between/amongst individuals and families within the service area of CPLRC. It was thought that enhancing connections may lead to the development of "trusting" relationships between patrons that subsequently may enhance the likelihood of community services and peer/patron-based supports. For example, there was agreement (specific note was made by the Community Ambassadors) that a valuable resource for parents/caregivers would be trusted babysitters. Within the community, limited meaningful connections (between families) can adversely impact the likelihood of developing trusting relationships that could address fears and "safety concerns" that responsible parents have prior

to selecting a babysitter. While several of the patrons of CPLRC have seen each other, they are acquaintances, and may not be friends as it was noted: "...when we come together, we recognize each other but we don't know them, know them...". This level of connection (being an acquaintance), it was suggested, is not enough to truly know someone; time is needed to "...build relationships" and identify "...commonalities...". When it comes to the safety of children, responsible parents are cautious about who they trust, and trust doesn't come "...easily." The lack of connection that results from limited trusting relationships/connection among/between parents and families, it was held, can further the feeling of isolation among many patrons and families in the community. It is important to note that these comments were made within a context of positive feedback regarding the trusting relationship that patrons have with the CPLRC Manager referring to her as "the great Erica!" given her willingness to listen and provide helpful advice and supports. Although the CPLRC Manager and staff have been able to develop meaningful, supportive relationships with parents and families that are trustworthy in nature, the same quality/level of trust is not easily afforded/built between families, although it is ideally desired (if feasible). Brainstorming, the team identified several ways that patrons and families can get to "...know each other" better. Some of the ideas included the following:

- Informal community events as a possible "steppingstone to further connections." Ms. McMillian underlined the importance of meeting people more than once or twice as a necessity to building trust.
- Ms. George shared her experience meeting with the gardening group for the Cone Park Library community garden. People would show an interest in this activity and start up conversations.
   After a long break due to COVID-19 they recently reunited and resumed activities. Ms. George spent hours weeding the area in advance (a commitment to the group) so that when they all came together, they could get started with planting right away. Here, a shared interest/purpose served as an opportunity for "...relationships to start."
- Ms. Reed shared that she has seen people connect at the food distribution activities (a Concrete Supports activity); this was an informal opportunity to connect and build support networks. Patrons who didn't know each other in advance would find each other and strike up a conversation in the parking lot, get to know each other and share phone numbers and contact information. These opportunities were seen as occasions for connections to "...happen naturally." Increasing opportunities for informal connections between patrons and households may reinforce these "natural" connection processes.
- Opportunities may already exist as a starting point for engagements that can be built upon. Ms. Johnson suggested building in intentional time during scheduled events, providing opportunities for people to connect. Ms. Seawright shared that she has icebreaker sessions during her "Fight for your Money" (financial literacy) classes for this reason. The follow up meeting to the "Fight for your Money" class was very successful, and participants were able to rekindle the connections they had created in the first class. It was highlighted that for relationships to develop there needs to be some "patience" as comfort and trust development takes time. Further, it was noted that opportunities for engagement and connection (whether formal or informal) should be "respectful" of people's "...preferences for engagement..." with some importance tied to "...face-to-face opportunities"

Although the CPLRC Manager and staff have been able to develop meaningful, supportive relationships with parents and families that are trustworthy in nature, the same quality/level of trust is not easily afforded/built between families, although it is ideally desired (if feasible). Brainstorming, the team identified several ways that patrons and families can get to "...know each other" better.

Ms. Reed would like to see CPLRC be more sensitive to adding/expanding opportunities for patrons to connect while respecting participants privacy and autonomy. Many of the team members thought it to be very important to have events and to communicate face-to-face when building trust and friendships and that repeated opportunities need to exist for "fostering a continuum of relationships" and building relationships. During COVID-19, limitations have been placed on organizing face-to-face events. Ms. Lancaster suggested having small thematic social media groups on platforms like Facebook or Google + that allow for more one-on-one connections. This would be a group created based on shared hobbies or attending a group of common interests. Ms. Reed explained that CPLRC does not have its own social media page and there is no one who could manage a page like that to keep toxic people from disrupting processes and connections (a potential liability issue). These considerations led to the following Action Item:

**Action Item #3:** Explore how (structure and feasibility given benefits and concerns) social media groups can supplement existing CPLRC and CPL structured (face-to-face) activities and help foster meaningful connections among participants.

# How Does Cone Park Library Resource Center Facilitate Mutual Support? (Items 2.11 through 2.18)

Table 3 highlights findings related to level of consensus agreement with a series of statements examining the means and mechanisms by where the CPLRC helps facilitate mutual support among parents and patrons. These items include:

- 2.14 Administrators and staff seek opportunities to build good relations within the immediate neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood resources for special projects, building relationships with local schools).
- 2.15 The program encourages staff and families to participate together in community improvement or advocacy projects.
- 2.16 Staff are visibly engaged with issues of concern to the community and are actively involved with other community organizations.

- 2.17 The program provides and receives support from the local community (e.g., financial support, donated services, volunteer service, tangible gifts, discounted services, letters of support).
- 2.18 The program connects parents to local opportunities that promote family enrichment (e.g., reading hours at the library, parent-child book groups, cultural heritage events).

Discussions and points highlighted earlier in this report and other SFSA team reports, it was thought, reinforced the agreement that these are actions/activities where engagement exists. These agreements highlight important strengths of the CPLRC leadership, staff and volunteers and feature, in part, behaviors and practices that have contributed to the perspective that "…people generally do trust the resource center to be [there] for them."

There were four items for which there was a consensus rating of Neither Agree nor Disagree. These included 2.11 through 2.13.2. The team did not remark on Items 2.11 and 2.12; there was some discussion regarding related or parallel activities/actions earlier (see discussion related to Item 2.10, Action Item #1, and Action Item #3). However, there was notable discussion (but no recommended action item) for items related to 2.13; namely, parent-organized social/educational events and activities are encouraged and supported by:

- 2.13.1 Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs, or libraries).
- 2.13.2 Providing supports such as gathering space, childcare, and food so that parents can organize and participate in activities together.

Although select members supported the facilitation of some of these activities, the team sought information from Ms. Reed as to whether parents/patrons have approached her suggesting an interest (i.e., if there was an expressed need) in activities identified by these fidelity items/questions. Ms. Reed indicated that parents and patrons usually initiate contact with her for assistance with "...personal issues", not connection resources or supports highlighted by these items. However, CP Library staff have, on occasion, been approached by community members/groups about using their space for select activities. Ms. Johnson has been approached by mothers wanting to put together a breast-feeding group. She believes they approached her because they want to be able to use the library facilities as a gathering/meeting space. She has also had tutors that use the facilities to meet with students. The Cone Park Library has more space than CPLRC and can accommodate select groups; these requests have been honored. Within this team meeting, staff, and administrators from CP Library and CPLRC asserted their willingness to collaborate with one another to help facilitate any supports for community groups wanting to use their facilities (especially the CP Library) for meetings and events. Ms. Reed shared that many of the events they have done in the past were an initial response to situations in the community. The fall festival was initially created because patrons expressed fears of clowns (the Pennywise monster clown on social media scare some years ago) and fears about human trafficking. The fears about human trafficking (giving news/social media reports of concern about a white van associated with abductions in Gainesville in the past) led to the implementation of a self-defense class. The fall festival was structured as a celebratory and safe community event. Another example is the gun safety event, planned in response to recent shootings near the SWAG Family Resource Center. These planed events were responsive to community fears and anxieties and were meant to promote awareness, enhance

communication, and disseminate knowledge about timely issues impacting the community. These types of events are likely to continue, along with a receptiveness to encourage and respond to the need for more parent-organized social/educational events and activities.

Table 3: How Does Cone Park Library Resource Center Facilitate Mutual Support?	Team Score (Weighted Average)
2.11 The program encourages parents to set up mutual support mechanisms (e.g., phone trees,	Average
carpools, babysitting co-ops, play groups, social media groups or pages where parents can	3.40
communicate with one another).	
2.12 There is time built into program activities for parents to network and share with each other.	3.33
2.13 Parent-organized social/educational events and activities are encouraged and supported by:	
2.13.1 Providing information on outside activities for parents to attend together (for example,	3.63
gathering at playgrounds, fun fairs or libraries).	3.03
2.13.2 Providing supports such as gathering space, childcare and food so that parents can	3.38
organize and participate in activities together.	3.36
2.14 Administrators and staff seek opportunities to build good relations within the immediate	
neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood	3.88*
resources for special projects, building relationships with local schools).	
2.15 The program encourages staff and families to participate together in community improvement or	4.00
advocacy projects.	4.00
2.16 Staff are visibly engaged with issues of concern to the community and are actively involved with	4.43
other community organizations.	4.43
2.17 The program provides and receives support from the local community (e.g., financial support,	4.00
donated services, volunteer service, tangible gifts, discounted services, letters of support).	4.00
2.18 The program connects parents to local opportunities that promote family enrichment (e.g.,	4.13
reading hours at the library, parent-child book groups, cultural heritage events).	4.13
* Although the weighted average team score suggests a consensus Neither Agree nor Disagree assessme	ent discussion

<sup>\*</sup> Although the weighted average team score suggests a consensus Neither Agree nor Disagree assessment; discussion led to a consensus assessment of agreement for this item and subsequent color coding as green.

#### Fidelity of Social Connections Services and Supports to CSSP Protective Factor

As denoted earlier, the SFSA Team identified the weighted average team score as the consensus measure for each item associated with the Social Connections assessment questions. Following the development of a consensus rating, individual item scores were converted —in keeping with Harnar and Tarr, (n.d.) and Tarr, Harnar, & Ahsan (2014)³ method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree, Neither Agree nor Disagree, and Not Applicable. Within the Tables denoted in this report, any green shaded cells (Agree and Strongly Agree) reflect a score of 1 and any yellow (Neither Agree or Disagree), red (Disagree and Strongly

<sup>&</sup>lt;sup>3</sup> Harnar, M., & Tarr, J. (n.d.). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Washington, D.C.: Center for the Study of Social Policy's Strengthening Families & Mosaic. Available at: <a href="https://www.strengtheningfamiliesevaluation.com/national/">https://www.strengtheningfamiliesevaluation.com/national/</a>

Tarr, J., Harnar, M. A., & Ahsan, N. (2014). Strengthening Families: A look at national data on program strategies, staff capacity and the protective factors. Unpublished whitepaper presented at the National Association for the Education of Young Children's annual conference in Dallas, TX.

Disagree), or no shade (Not Applicable) reflects a score of 0 (zero). As observed, there were no red or no shade cells in each table. These scores were summed for the Social Connections Protective Factor where scores <50% of the total score possible represent low fidelity, 50-74% represent moderate fidelity, and >75% possible scores represent high fidelity. The aggregate fidelity score from all tabled findings is 25 (of a possible score of 43) or 58%, suggesting that the services and supports associated with the Social Connections were implemented with moderate fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

The aggregate fidelity score from all tabled findings is 25 (of a possible score of 43) or 58%, suggesting that the services and supports associated with the Social Connections were implemented with moderate fidelity to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

# Appendix A

# STRENGTHENING FAMILIES SELF-ASSESSMENT TOOL FOR COMMUNITY-BASED PROGRAMS



# STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### ABOUT THE SELF-ASSESSMENT

The Program Self-Assessment helps programs determine how well they are implementing strategies to strengthen families. The Self-Assessment is based on findings from a national study that identified exemplary programs across the country. It allows all programs to compare their practices with those of the exemplary programs and identify areas for improvement. The Self-Assessment outlines how the protective factors can be supported through small but significant changes in program practice. It is written for programs committed to working with and supporting the families they serve. Versions of the Self-Assessment are available for:

- · Center-based early care and education programs
- · Family child care settings
- Home visiting programs
- Community-based programs such as family resource centers

While there is significant overlap across these different versions, each also contains unique strategies specific to each setting.

The Program Self-Assessment materials in this document are applicable to community-based programs serving children and families. The concrete actions described in the self-assessment can be carried out in a variety of settings such as family support and parenting education programs, health care settings, community centers and others. The strategies described can be implemented without creating new staff positions, making significant changes to existing facilities or raising additional financial resources.

#### **ORGANIZATION**

The Self-Assessment outlines practices used by exemplary programs to support families, organized around five protective factors:

- Parental Resilience
- Social Connections
- Knowledge of Parenting and Child Development
- · Concrete Support in Times of Need
- Social and Emotional Competence of Children

Each section starts with a brief description of the protective factor and core strategies for building that protective factor. Self-Assessment items are organized under each of these core strategies. In this version of the Self-Assessment there

is also a special section about <u>Responding to Possible Child</u> <u>Abuse or Neglect</u>.

#### **COMPLETING THE SELF-ASSESSMENT**

While the Self-Assessment forms may appear long at first glance, most sections have fewer than ten items. To make the process easier, the forms address specific practices; thus, multiple practice examples often appear under a single strategy. While the time it takes to complete the Self-Assessment will vary from program to program and from form to form, on average, each form can be completed in approximately 90 minutes.

CSSP strongly recommends that programs create a Self-Assessment team that represents a number of different perspectives at your program, including:

- Administrative staff and/or program director
- · Direct service staff
- Parents who participate in the program (or whose children participate in the program)

Including a diverse group of participants in the Self-Assessment evaluation process allows programs to benefit from a large variety of viewpoints and perspectives. Once a team has been identified, the process begins by following the steps outlined below.

First, each member of the team should fill out the Self-Assessment forms individually.

Next, the team should convene to share and compare assessments. Teams should use this time to discuss rating results that differ among various team members, giving each person an opportunity to describe why they rated the practice the way they did and—if appropriate—to provide an example. Once everyone has had a chance to speak, all team members should be given an opportunity to re-rate the practice. It is not necessary for the entire team to come to consensus on every practice, but it is important that all team members come to understand each other's perspectives and that a final decision is made on how to rate the item based on broad input.

The consensus version of the Self-Assessment can be entered online at <a href="www.mosaic-network.com/gemslive/cssp/">www.mosaic-network.com/gemslive/cssp/</a>. Completing the Self-Assessment online allows the program to print reports showing strengths and areas to focus on improvement, as well as to link to parent and staff surveys.



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CREATING AN ACTION PLAN**

Once all team members have re-rated the practices, the team should identify areas where the program scored highly. Next, the team should create a sustainability plan to keep these areas strong. In developing a sustainability plan for each successful area, teams should be sure to specify:

- · Key reasons for success in the area
- What needs to be done to ensure continued strength in the area
- Who will be responsible for maintaining successful outcomes in the area

Next, the team should highlight practice areas that a majority of the team rated poorly. While we encourage programs to work on each of these areas eventually, the team can begin by deciding whether each poorly rated practice should be addressed (1) immediately, (2) over time, or (3) not at all. Again, teams should allow time for discussion and

reevaluation if/when team members disagree on practice ratings. When a majority of team members identify items that should be addressed immediately, teams should brainstorm plans to improve associated area outcomes. Teams should be sure to specify:

- The expected results
- All required resources (including staff hour costs)
- · A timeline for achieving the desired results
- · Who is responsible for each action step
- Check-in points for monitoring implementation progress
- How and when longer term action steps will be addressed/implemented

#### PARENTAL RESILIENCE

Being a parent can be a very rewarding and joyful experience. But being a parent can also come with its share of stress. Parental resilience is the process of calling forth one's inner strength to proactively manage stress, meet personal/family challenges and be able to function well. Parental resilience includes the ability to provide nurturing and supportive care to one's child, even when faced with challenges, adversity or trauma. Programs can provide a variety of resources for families to help build and support parental resilience—all with low or no-cost to the program. For example, programs can:

- Demonstrate in multiple ways that parents are valued
- Honor each family's race, ethnicity, language, culture, history and approach to parenting
- Encourage parents to manage stress effectively
- Support parents as decision-makers and help build parents' decision-making and leadership skills
- Help parents understand how to buffer their child during stressful times

visits are unexpected.

When supported by program policies, staff can employ these concrete Everyday Actions to help families reduce personal/ parental stress and gain confidence in their ability to overcome challenges.

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		45.	Strongly agi	Wifes 3.	Meither age	ge not disaftee	jee Stangh di	sages Comments
	d affirm the central role of parents in their teraction with families including policies, ication.							
1.2 The program has multiple avenues for regular communication with families.	1.2.1 The program provides an orientation for families about the program philosophy, goals and objectives.							
	1.2.2 Staff use a variety of methods (e.g., new family orientations, small group meetings, individual conversations, and written questionnaires) to provide information and gather input from families about activities throughout the year.							
	1.2.3 Staff regularly ask parents about their observations of their child.							
1.3 All family members are made to feel welcome:	1.3.1 Someone is available to greet families when they come in.							
	1.3.2 Staff are respectful even when family							



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?  5: Strong As Selection of Strong As Selection (Strong As Selection As Selection As Selection As Selection As Selection (Strong As Selection As Selection As Selection As Selection As Selection (Strong As Selection As Selection (Strong As Selection As Selection As Selection (Strong As Selection As Selection (Strong As Selection As Selection (Strong As Selecti											
		49.	, K	'5	'''		, A	Comments			
1.4 Staff develop mutually respectful relationships with all family members by:	1.4.1 Taking time to get to know family members individually, by name.										
	1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.										
	1.4.3 Regularly inquiring about what is happening in their lives.										
	1.4.4 Providing emotional support and encouragement.										
	1.4.5 Sharing appropriate information about themselves.										
	1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.										
	1.4.7 Taking time to understand the complex needs of individual parents, such as navigating child custody or the child support system, playing dual roles in a single-parent household or having children with different partners.										
	1.4.8 Using intake forms, applications and surveys that are gender-neutral.										



PARENTAL RESILIENCE: SELF How do programs demonstra		45	Strongly agget	es 3: Heiner	gee Indiscote	es strongly disagn	ce Comments
1.5 Staff show that they value fathers and are sensitive to their unique	1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.						
needs by:	1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.						
	1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.						
	1.5.4 Providing peer activities or services that are man-to-man, father-to-father.						
	<b>1.5.5</b> Engaging male participants to greet other men at program activities.						
	<b>1.5.6</b> Establishing ongoing partnerships with community resources that provide services to fathers.						
	1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.						
	1.5.8 Being aware of barriers that limit father involvement, such as a difficult relationship with the child's mother, lack of information or a non-custodial relationship with child.						
	<b>1.5.9</b> Encouraging fathers and male family members to engage in all aspects of the program, not only activities for fathers, including leadership roles.						



PARENTAL RESILIENCE: SELF-How do programs honor each culture, history and approach	ı family's race, language,	5; Stan	A. Here 3. N	teither agree Inchieses	gee Met Application	
1.6 Program staff ensure that all families, regardless of family structure; socio-economic, racial, religious, and cultural backgrounds; sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	1.6.1 Staff are trained to be knowledgeable about the parenting practices and approaches to family decision-making of different cultural and ethnic groups.  1.6.2 The program regularly gathers information about family interests, beliefs and expectations, including those relating to the child's culture and language development, and seeks to partner with families in incorporating those features into program activities and structure.  1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.  1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.  1.6.5 The program displays diverse families and family structures in books, posters and program materials.					Comments
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.  1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and linguistically accessible to all families in the program.  1.7.3 Designed or selected to reflect the culture(s) of the community served.					



					Meither agri	or disagr	, &	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		Strongly ag	See /	, agr	e ne	Strongly die	a thicaite
How do programs demonstrat	e that parents are valued?	6	Strong!	Agree 3	Heither O.	Disagit.	Strong!	A Applie
		,,						Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportunities to develop skills and knowledge to work effectively with diverse families. Staff development may include:	<b>1.8.1</b> Inviting partner organizations to provide workshops for staff on working with diverse families.							
	<b>1.8.2</b> Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.							
	1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.							
1.9 The program seeks to reflect the community and families it serves by:	<b>1.9.1</b> Building a staff that reflects the community and families served.							
	<b>1.9.2</b> Intentionally recruiting and employing staff members who are skilled at working with the diversity of the families in the program.							
	1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.							
	1.9.4 Seeking to hire staff members that provide families and children with connections to the diversity that exists in society—even if the program's community is mono-lingual, mono-ethnic or mono-cultural.							
1.10 The program supports participating immigrant and refugee families by:	1.10.1 Ensuring that staff are knowledge- able about immigrant and refugee families' unique challenges and can help address them in a respectful manner.							
	1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.							



	en common signs of stress occur, program staff reach out to families y and supportively. Some commons signs of stress include: ts' acknowledgement of stress or problems ual parental behavior ated unexplained absences ated tardiness or missed appointments exe, separation, military deployment, family dissolution, job loss or family crises ges or fluctuations in a child's emotional state, acting out, distress, enging behavior, fearful behavior, inappropriate language/behavior as sexual acting out), signs of abuse or neglect (such as bruises) or unexplained changes in child behavior  program provides program provides protruities for prelieve stress  1.12.1 Linking parents to organized support groups.  1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.  1.12.3 Organizing spa days, exercise classes or other parent-only social activities.  1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.  1.12.5 Providing occasional child care so parents can take a "night out," go shopping	ingly disa	gree haricalite				
						Comment	s
proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, militar other family crises Changes or fluctuations in a challenging behavior, fearfu (such as sexual acting out),	ome commons signs of stress include: of stress or problems ences ed appointments y deployment, family dissolution, job loss or a child's emotional state, acting out, distress, il behavior, inappropriate language/behavior signs of abuse or neglect (such as bruises) or						
1.12 The program provides regular opportunities for parents to relieve stress	1						
through:	parents to gather, talk and participate in						
	for parents to talk to individually about						



PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	5; Strut	N. Hee	Meither 2gr	dieaglee	stangy dist	Lage Comments
1.13 Staff know how to respond appropriately to family crises that come to their attention. Staff receive training and support from other staff members on:	1.13.1 Understanding the impact of family crises and/or loss on all family members— especially children—and how to respond appropriately.						
	1.13.2 Supporting families' immediate and long-term plans.						
	1.13.3 Talking to families about difficult issues and helping them access additional help.						
	1.13.4 Maintaining confidentiality.						
	1.13.5 Recognizing domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.						
	1.13.6 Understanding trauma and its impact on children and how staff can help.						
	1.13.7 Other community agencies providing specialized services to families and children.						



PARENTAL RESILIENCE: SELF- How do programs support par build decision-making and le	rents as decision-makers and help	્રિક ક	Strongly at	ikules 3:	Meither 25's	disagles	strongly dis	adde the comments
1.14 Staff receive program support when working with families under stress through:	<b>1.14.1</b> Acknowledgement and support for their efforts from supervisors and administrators.							
	<b>1.14.2</b> Opportunities to process their own emotional reactions with appropriate support.							
	1.14.3 Access to a mental health consultant.							
	1.14.4 Time off if needed.							

#### PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs support pa build decision-making and le	rents as decision-makers and help	45	Strongly as	White 3.	Meither agre	disagles 1:	z trongly dis	a Agua de Comments
1.15 Staff reinforce parental authority by:	1.15.1 Respecting parents' directions and/ or decisions about their children.							
	1.15.2 Learning about parents' expectations and limits for their children.							
	1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.							
	1.15.4 Understanding the parenting and child behavior norms of the parent's culture.							
	1.15.5 Being careful not to contradict a parent in front of his or her child or other children.							



					,		,	, , ,
	rents as decision-makers and help	/	itingh agi	88	Meither agr	ee nordisali	Strongly dis	gage e
build decision-making and le	adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Still A:	Values 3.	Mer 2	Dist 1.	Still	AR
								Comments
1.16 Parents are engaged as partners in developmental screenings or assessments of their child:	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							
	<b>1.16.2</b> Parents are informed about the confidentiality policy and what it means to them.							
	<b>1.16.3</b> Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.							
	1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.							
	1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.							
	<b>1.16.6</b> All plans for the child that result from assessments are fully discussed with parents and documented in the children's files, and parents are provided copies of the plan.							
	1.16.7 The program assists parents in finding and connecting to specialists (e.g., a physician, physical therapist or child study team) for further evaluation when their children are identified in the screening process as having possible special needs.							
1.17 Parents and staff develop family plans together that:	1.17.1 Identify the family's assets, interests, skills, needs and goals for themselves and their children.							
	<b>1.17.2</b> Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.							
	1.17.3 Identify other community resources and opportunities that may help families achieve their goals, continue their learning and/or provide other avenues for involvement and leadership.							
	1.17.4 Are updated regularly.							



					, ,	,	, ,	
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS			,	Weither 325	e nordisagi	88	agles .
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	5	Strongly age	Agiee 3:	Weither age	disagree 1.	Strongly die	L. Andricate
								Comments
1.18 The program supports a parent's personal education and career goals by:	1.18.1 Referring families to educational and career resources (e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting skills, job training, job preparation skills).							
	1.18.2 Forming partnerships with nearby educational resources, including higher education institutions, to support families' learning interests and educational goals.							
	1.18.3 Linking families with community resources for internships, volunteer and leadership activities and other experiences that expand parents' knowledge and skills and build on their career interests.							
	<b>1.18.4</b> Inviting past program parents and community volunteers to share their educational and career experiences with families.							
	1.18.5 Providing formal and/or informal parent mentoring opportunities (potentially with staff, alumni parents/families, elders and/or professionals in the community) to serve as a resource and support for parent leadership development.							
1.19 The program provides opportunities and support for families to serve as leaders	<b>1.19.1</b> Providing opportunities for families to volunteer and contribute to the program.							
and decision-makers by:	<b>1.19.2</b> Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles.							
	1.19.3 Asking families for regular input on programmatic decisions.							
	<b>1.19.4</b> Asking families for input into staff hiring and training.							
	<b>1.19.5</b> Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).							



					,	,	,	, , ,
PARENTAL RESILIENCE: SELF-	ASSESSMENT ITEMS		di	*	, are	disagles 1.	8º /	and the state of t
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Strongly agi	Majee 3:	Meither as	disaglee	Strongly dis	A Philicipe
								Comments
<b>1.20</b> The program promotes participation in activities by:	<b>1.20.1</b> Addressing topics, issues and skills that families identify as important to them.							
	<b>1.20.2</b> Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).							
	<b>1.20.3</b> Providing child care during trainings or workshops.							
	1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.							
1.21 The program helps to support the continued development of parent leaders by supporting:	<b>1.21.1</b> Personal growth—such as attending conferences or special events and collecting and sharing information of interest to other parents.							
	1.21.2 Leadership development trainings and mentoring activities.							
	<b>1.21.3</b> Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).							
1.22 The program helps to support parents' opportunities for leadership in community change by:	<b>1.22.1</b> Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.							
comments change by	1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.							
	1.22.3 Ensuring that local, state and federal policy information is discussed at staff meetings/advisory council meetings and relevant information is shared with families.							
	<b>1.22.4</b> Connecting parents to groups that inform and shape policy at the local, state or national level.							



How do programs help parents understand how to buffer their child during stressful times?

lisatie	/
attee attend a lisagee one	/
5: Stringth agges 3: Meither agges not lie agges 1: Stringth his agges 3: Meither agges 1: Stringth his agges 1	
Comm	16

				Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.				
<ul> <li>1.24 Parents and staff receive ongoing training and up-to-date information on dealing with stress and trauma including:</li> <li>How stress impacts the child's brain, behavior and development</li> <li>Recognizing the signs of stress in children</li> <li>How stress may impact the child's behavior and how to shape adult responses to the child's behavior accordingly</li> <li>The important role that parents and caring adults play in buffering children during stressful times</li> </ul>				
1.25 Parents and staff have access to a mental health consultant who can help them proactively address the needs of children and other family members during stressful times.				



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **SOCIAL CONNECTIONS**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- · Help families value, build, sustain and use social connections
- · Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

#### 3. Neither agree furthisagles 1. Strongly disagree 5: Stringly agree SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS Not Applicable How do programs help families value, build, sustain and use A: Agree social connections? Comments 2.1 Families have access to a comfortable space where they can meet informally **2.2** The program provides 2.2.1 Formally, through parent support groups (including those with both broad and opportunities for families with similar interests, chilnarrow focuses). dren's ages and/or circumstances (such as those with 2.2.2 Through parent mentoring and twins, parents of infants, matching for one-on-one support. parents with special-needs children or parents who 2.2.3 Informally, by introducing parents to speak the same language) to one another. connect with one another:



				,	, ,	,	, ,
SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS  How do programs help families value, build, sustain and use social connections?			Hillight affect	3. Neither 285	e nat disable e	ng Angli	alle
							Comments
2.3 The program provides opportunities for families to socialize and foster a sense	2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.						
of community by organizing/ hosting:	2.3.2 Periodic events like coffee breaks and breakfasts.						
	2.3.3 Celebrations, graduations and holidays.						
	2.3.4 Field trips and community events.						
	<b>2.3.5</b> Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.						
	2.3.6 Affordable family activities.						
	<b>2.3.7</b> Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.						
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.						
	ositive relationships between families and nal social events where staff can interact with						
	ects families to resources to strengthen ., healthy marriage skills, communication skills,						



					/ /		
SOCIAL CONNECTIONS: SELF- How do programs help famili use social connections?		\s.	A: Agre	e 3: Weither 2	7. headee	s Strangy disagn	e k
							Comments
2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:	<b>2.6.1</b> Calling, sending notes or making home visits inviting them to program activities.						
ipate iii program activities by.	<b>2.6.2</b> Connecting with them on social media platforms through program pages or groups.						
	<b>2.6.3</b> Offering support with transportation, child care or other barriers to participation.						
	<b>2.6.4</b> Making special efforts to connect them with other families who share similar interests.						
	2.6.5 Connecting them with resources (including mental health consultation) that can help them explore difficulties with forming social connections.						
	2.6.6 Matching families with staff or other families who can help them feel welcome and valued in program activities.						
	v isolation or reluctance to participate can due to differences in race, language, culture, ntation, ability, etc.						



						nor disagi	, & /	, , , , , , , , , , , , , , , , , , ,
SOCIAL CONNECTIONS: SELF- How do programs create an i		ر ن	Strongly at	gee 3:	Meither 25:	disaglee	Strongly dis	r kulicule
								Comments
<b>2.8</b> The program and its staff model positive social skills and	2.8.1 Welcoming all families.							
community building by:	<b>2.8.2</b> Inviting all families to program parties or social events.							
	<b>2.8.3</b> Encouraging newcomers and reluctant families to participate through special outreach efforts.							
	2.8.4 Helping to resolve conflicts among participants.							
	2.8.5 Promoting families' understandings of different cultures and backgrounds.							
	<b>2.8.6</b> Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.							
<b>2.9</b> The program helps staff learn how to reduce stereotyping and bias by:	<b>2.9.1</b> Modeling inclusive behavior among the staff.							
stereotyping and bias by:	2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).							
	2.9.3 Providing training and support for helping families and children resolve conflicts effectively.							
	<b>2.9.4</b> Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).							
	2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.							
	<b>2.9.6</b> Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.							
	o reach out and engage other families, includ- d members, in the program community.							



						,	,	
SOCIAL CONNECTIONS: SELF- How do programs facilitate m		\rightarrow \right	Strongly agree	Se Si	Heither agre	isaglee	es Strongly dis	agies Anticalis
								Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms ysitting co-ops, play groups, social media an communicate with one another).							
<b>2.12</b> There is time built in to proshare with each other.	gram activities for parents to network and							
2.13 Parent-organized social/educational events and activities are encouraged and supported by:	<b>2.13.1</b> Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).							
	<b>2.13.2</b> Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.							
the immediate neighborhood or lo	ek opportunities to build good relations within ocal community (e.g., inviting neighbors to d resources for special projects, building rela-							
2.15 The program encourages s community improvement or advo	taff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged wi actively involved with other comm	th issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, oport).							
	ents to local opportunities that promote family at the library, parent-child book groups, cultural							

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Mounting scientific evidence points to the critical importance of early childhood as the period in which children's foundations for cognitive, language, social, emotional and moral development are established. While no parent knows everything about children, all parents can benefit from increasing their knowledge of parenting best practices. Gaining a deeper understanding of child development—including early brain development—helps parents know what to expect from their child. Knowledge of parenting and child development can also help parents understand what children need during each developmental phase. Programs can help parents increase their knowledge of parenting and child development. Programs should:

- · Model developmentally appropriate interactions with children
- · Provide information and resources on parenting and child development
- Encourage parents to observe, ask questions, explore parenting issues and try out new strategies
- Address parenting issues from a strength-based perspective

Program staff can help parents gain a high level of expertise about child development and parenting. It is crucial that staff provide information in multiple ways and at times that parents really need it and will put it into practice.

#### 3. Neither agree for libraries 1. Strongly lie agree KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: 5. Strongly agree Not Applicable **SELF-ASSESSMENT ITEMS** A. Agree How do programs model developmentally appropriate interactions with children? **Comments** 3.1 Staff demonstrate a 3.1.1 Staff model developmentally strong understanding of child appropriate responses to children's behavior, development: interests, temperaments and need for exploration and learning. 3.1.2 Staff understand and can explain the development arc for young children. 3.1.3 Staff can explain to parents how various activities and interactions support their child's development. **3.1.4** Staff participate in regular training that updates their knowledge on advances in understanding child development. 3.2 Staff work collaboratively **3.2.1** Staff develop an ongoing partnership with parents to coordinate with parents to ensure regular communication, common understanding of the support for children's development: child's development and coordinated action to provide each child with the appropriate experiences for their developmental stage. 3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development. 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs model developmentally appropriate interactions with children?				Strongly as	Jee Sinding	Meither agre	disages	ee Strongly dis	sage to the sage of the sage o	
									Comments	
	<b>3.4</b> When staff talk with parents about discipline, they:	<b>3.4.1</b> Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.								
		<b>3.4.2</b> Provide information on ageappropriate positive discipline techniques and reasonable expectations.								
		<b>3.4.3</b> Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.								
		<b>3.4.4</b> Encourage parents to discuss behavior challenges they may have at home.								
		<b>3.4.5</b> Connect parents to other parents who can share or model positive parenting approaches.								
		<b>3.4.6</b> Recognize different parental and cultural approaches to discipline and discuss them with parents.								
		<b>3.4.7</b> Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.								



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A			u ag	es /	Meither agre	e nor disage	Strongly dis	aggee in the
How do programs provide inf parenting and child develop		89.	Strongly age	Agree 3:	Meither 2:	disagree 1.	Strongly	L. Andicate
								Comments
	s are offered as one among several strategies for f parenting and child development.							
<b>3.6</b> Parenting education classes are offered in a way that reflects best practices in the field, including:	<b>3.6.1</b> Parents go through a series of classes as a group – with other forms of contact between classes to maintain their engagement.							
	<b>3.6.2</b> Course content is focused on parenting information and developmental information for a particular age group or targeted population, such as children with special needs.							
	<b>3.6.3</b> Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	<b>3.6.4</b> Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).							
	<b>3.6.5</b> Classes and programs are delivered by staff with appropriate training and credentials for the program.							
	<b>3.6.6</b> Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	<b>3.6.7</b> Child care is offered while parents are in classes.							
	<b>3.6.8</b> Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	<b>3.6.9</b> If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
<b>3.7</b> Information is provided to p to expect of their children at eac	arents on stages of child development and what h stage.							



## KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	ormation and resources	(s, 5)	Jonelly Self	Prince 3:	Meither agre	a not disagle	Strongly die		//
<b>3.8</b> Parenting information and materials used by the	3.8.1 Are available in the language spoken by program families.							Comm	ents
program are culturally and linguistically appropriate, and:	3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.								
	<b>3.8.3</b> Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.								
<b>3.9</b> Parenting and child development information is	<b>3.9.1</b> Books and videos in a resource library.								
provided through multiple avenues to meet diverse learning styles, including:	3.9.2 Parenting classes.								
syles, moderng.	3.9.3 Support groups.								
	<b>3.9.4</b> Regular postings on bulletin boards in public spaces.								
	3.9.5 Opportunities for parents with similar concerns to come together and share specific information on such issues as accident prevention, toilet training, routine preventative health care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.								
	<b>3.9.6</b> Posting of information and links on a program website and/or social media pages accessed by participants.								
<b>3.10</b> Parents are connected to a variety of resources	<b>3.10.1</b> Parent education groups (including fatherhood groups).								
that can help them explore different ways of parenting, such as:	3.10.2 Counseling.								
	3.10.3 Support groups.								
	3.10.4 Mentors/coaches.								
	<b>3.10.5</b> Parenting groups and organizations that promote social inclusion and host groups that correspond to different ethnic, cultural and linguistic groups represented the community.								



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

• Planning for the child's needs after birth (e.g, car seats, cribs).

SELF-ASSESSMENT ITEMS How do programs provide inf	programs provide information and resources nting and child development?  Contains and child development?  Distribution and child development issues with  Distribution and child development issues with		A Applicable				
						Comments	
to the needs of parents in differe  Different parenting styles of  Needs and concerns of first  Needs of parents who are parents  Noncustodial parents	ent circumstances. For example: mothers and fathers and the strengths of each time parents arenting a child with a disability						
<b>3.12</b> Staff provide "just in time" parenting tips and discuss parenting issues with parents when:	issues arise (e.g., potty training, changes in eating or sleeping patterns, separation						
	difficulty relating to or communicating with						
the program provides opportunit  Prenatal and infant health at  The birth process and what  The needs of postnatal wom	ies for parents to learn about: nd development to expect						



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

					,	, ,	, ,	, ,
KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS How do programs encourage explore parenting issues and	65-	Strongly agr	Agree 3:	Heither 25te	jisagiee 1.	Strong Wilson		
								Comments
<b>3.14</b> Parents and staff work together to design and organize opportunities for parent	<b>3.14.1</b> Cultural/ethnic expectations and practices about parenting.							
led discussions (such as a Community Café or Parent	<b>3.14.2</b> Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	<b>3.14.4</b> How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	<b>3.14.5</b> Being especially supportive at the time that special needs are initially identified.							
	<b>3.14.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.							
	<b>3.14.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.							



# KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs encourage parents to observe, ask questions, explore parenting issues and try out new strategies?

8	Strongly ar	ies vi	Weither age	e nor disagree	strongly dis	agies Applicab		/
						(	Commen	its

					Comments
<b>3.15</b> Staff recognize and support the parenting challenges experienced by	<b>3.15.1</b> Regularly checking in with parents about parenting issues.				
families with children who have special needs by:	<b>3.15.2</b> Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.				
	<b>3.15.3</b> Supporting parents in understanding appropriate developmental expectations for their children with special needs.				
	<b>3.15.4</b> Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.				
	<b>3.15.5</b> Being especially supportive at the time that special needs are initially identified.				
	<b>3.15.6</b> Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.				
	<b>3.15.7</b> Ensuring that program parent-child activities are appropriate for families with children with special needs.				



#### KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: **SELF-ASSESSMENT ITEMS**

NOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: ELF-ASSESSMENT ITEMS low do programs address parenting issues from a trength-based perspective?			A; Age	s 3: Weither 2	7: headles 1:	strongly disco	Ege <sup>®</sup>	
		/ '3 /	<u> </u>	-5/			Comment	•
<b>3.16</b> Home visitors share their observations of children with parents to help the parents recognize:	<b>3.16.1</b> Their children's unique assets, temperament, personality, communication styles and behavioral cues.						Comment	.5
parents recognize.	<b>3.16.2</b> Their children's growth and development patterns.							
	<b>3.16.3</b> Their children's positive social skills and developmentally appropriate emotional behavior.							
	<b>3.16.4</b> Their children's independence and abilities.							
	<b>3.16.5</b> Activities families can use to enhance their children's skills and development.							
	<b>3.16.6</b> Signals that development may not be on track.							
<b>3.17</b> Staff reinforce positive parent-child interactions by:	<b>3.17.1</b> Noticing and acknowledging when parents are attuned to their children's needs or are communicating effectively with their children.							
	<b>3.17.2</b> Sharing something positive with parents about their children's behavior and development.							
<b>3.18</b> Staff proactively and respectfully address concerns about parenting techniques or behavior by	<b>3.18.1</b> Asking open-ended questions to understand the behavior from the parent's perspective.							
behavior by:	<b>3.18.2</b> Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.							
	<b>3.18.3</b> Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.							
	<b>3.18.4</b> Connecting parents to resources and supports that may help to address parenting issues.							



#### STRENGTHENING FAMILIES™ SELF-ASSESSMENT TOOL FOR **COMMUNITY-BASED** PROGRAMS

#### **CONCRETE SUPPORT IN TIMES OF NEED**

All parents need help sometimes. When parents are faced with very challenging situations, such as losing a job or not being able to feed their family, they need access to resources and services that address their needs and minimize their stress. This type of support helps to ensure that families receive the basic necessities that everyone deserves in order to grow. Providing concrete support also ensures that families have access to any specialized medical, mental health, social, educational or legal services they may need.

Programs can help parents to identify, find and receive concrete support in times of need. Programs should:

- Respond immediately when families are in crisis
- · Provide information and connections to services in the community
- Help families to develop skills and tools they need to identify their needs and connect to supports

Even though community-based programs are not always equipped to provide all the services and supports families may need, they can still play a vital role in helping families access concrete supports in times of crisis. Programs can also play a critical role in helping families develop their own proactive strategies for meeting needs in the future.

#### 3. Neither agree furt lisagues 1. Strongly liesque Not Applicable **CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS** A: Agree How do programs respond immediately when families are in crisis? **Comments** 4.1 Parents are encouraged 4.1.1 The fact that staff listen, show conto turn to staff in the event of a cern and share their own personal challengcrisis through: es as appropriate in informal conversations and regular interactions. 4.1.2 Materials regularly provided to participating families. **4.1.3** Information on which staff members can help families with particular issues.



					,	,	,	, , ,
					Meither 22:	or disagr	* /	
CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		24	88	agre	enu	die	agie
How do programs respond im are in crisis?	mediately when families	6.	Strongly age	Agree 3:	Weither as	disagree 1:	Strongly die	L. Andicate
								Comments
<b>4.2</b> Staff proactively respond to signs of parent or family distress by:	<b>4.2.1</b> Expressing concern and offering help in line with the program's philosophy and resources.							
	<b>4.2.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.2.3</b> Making space available for staff to meet with parents privately.							
	<b>4.2.4</b> Ensuring that parents can talk with staff members with whom they are the most comfortable.							
	<b>4.2.5</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.2.6</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is made).							
<b>4.3</b> When a family is experiencing extreme difficulties or crisis:	<b>4.3.1</b> At least one staff member with a close relationship with the family reaches out to the family proactively.							
	<b>4.3.2</b> If the family wants assistance, staff members, including supervisors or a staff team, work with the family to help them manage the crisis.							
	<b>4.3.3</b> The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.							
	<b>4.3.4</b> The program has flexible hours of operation to accommodate families outside of regular business hours.							
	<b>4.3.5</b> If the family agrees, staff connect the family to resources outside the program that can help them, such as medical or mental health specialists, or services such as respite care or emergency crisis services.							
	<b>4.3.6</b> Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.							



						,	,	, , ,
CONCRETE SUPPORTS: SELF- How do programs provide inf services in the community?		ું. જ	A: A: A	agies 3.N	Reither age	jisagiee 1:	strongly die	age e
								Comments
<b>4.4</b> Staff proactively respond to signs of parent or family distress by:	<b>4.4.1</b> Expressing concern and offering help.							
distress by.	<b>4.4.2</b> Offering to connect families to resources, including help lines, community resources or public agencies.							
	<b>4.4.3</b> Making themselves and/or other designated home visitors available to parents if parents need to talk.							
	<b>4.4.4</b> Being sensitive and responsive to the impact of family stress on children.							
	<b>4.4.5</b> Keeping family issues confidential unless given explicit permission to share information (except when potential abuse or neglect is at issue and a report is mandated).							
	<b>4.4.6</b> Helping families to identify short-term supports and prepare long-term strategies so they are better able to sustain themselves and endure hardships.							
	share information about community resources s, play lots, family activities), as well as more							
	e services dults and children)							



CONCRETE SUPPORTS: SELF-How do programs provide interesting the community?	-ASSESSMENT ITEMS formation and connections to	is; st	Milly affect	5. Weither affect of the state	es 1: Strong High High	a Comments
<b>4.6</b> The program actively builds collaborative links with other service providers by:	<ul><li>4.6.1 Bringing services on site, when possible.</li><li>4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.</li></ul>					
	<b>4.6.3</b> Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.					
	<b>4.6.4</b> Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.					
	<b>4.6.5</b> Using input from participating parents to identify and advocate to fill gaps in the services available to families.					



							,	, , ,
CONCRETE SUPPORTS: SELF-			34	88	Meither 22's	e not disagi	ee die	effe, We
identify their needs and conn	es to develop skills they need to ect to supports?	8	Strongly age	Agree 3	Meither 2:	disagles 1:	Strongly die	L. Applicable
								Comments
<b>4.7</b> Staff help parents to identify and mobilize their own resources to address their families' needs by:	<b>4.7.1</b> Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.							
	<b>4.7.2</b> Communicating to families that seeking help is not an indicator of weakness or failure as a parent, but rather is a step toward building resilience.							
	<b>4.7.3</b> Encouraging parents to advocate for themselves and their child.							
	<b>4.7.4</b> Providing information and guidance to families so that they understand their rights in accessing services, gain knowledge of relevant services and learn how to navigate through service systems.							
	<b>4.7.5</b> Connecting parents to peer-to-peer navigation support.							
<b>4.8</b> When staff make referrals to outside services, they support family leadership by.	<b>4.8.1</b> Brainstorming with families about what resources would be helpful.							
portioning loadest inp est	<b>4.8.2</b> Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or identify other resources.							
	<b>4.8.3</b> Helping parents learn how to address barriers to utilizing services (e.g., lack of transportation or childcare, fees, language barriers, lack of translation services, lack of cultural sensitivity and inclusiveness).							
	<b>4.8.4</b> Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).							
	<b>4.8.5</b> Following up with families on referrals to ensure that they were satisfied with the services they received, and providing help in advocating for themselves if they were not satisfied.							
	<b>4.8.6</b> Making a personal connection between families and service providers (if families have agreed to share information through written consent).							

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN

Early childhood experiences set the stage for later health, well-being and learning. A growing body of research has shown the relationship between young children's social and emotional competence and their cognitive development, language skills, mental health and school success. The development of social and emotional competence—that is, characteristics such as self-regulation, self-confidence and social skills—depends on the quality of nurturing care, communication and stimulation that a child experiences. Programs can help to promote the social and emotional competence of children. Programs should:

- · Help parents foster their child's social emotional development
- Model nurturing care to children
- Include children's social and emotional development activities in programming
- Help children develop a positive cultural identity and interact in a diverse society
- Respond proactively when social or emotional development needs extra support

Whether working primarily with parents or with young children themselves, program staff should receive training on the importance of social and emotional development – and can play a significant role in helping parents to both enjoy and facilitate children's growing competencies in this area.

#### SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: **SELF-ASSESSMENT ITEMS**

SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs help parent emotional development?		45	Strongly agi	Person 3:	Meither age	e nut disagn	Strongly dis	Aggree Comments
<b>5.1</b> The program introduces family members to social and emotional development by:	<b>5.1.1</b> Providing parents with information on the importance of supporting children's healthy social and emotional development—and its connection to success in school and life.							
	<b>5.1.2</b> Helping parents understand ageappropriate social and emotional skills and behaviors.							
	<b>5.1.3</b> Providing opportunities to discuss social and emotional issues within a racial and cultural context.							
	<b>5.1.4</b> Offering parents ideas on how to foster a child's social and emotional learning at home.							
	<b>5.1.5</b> Asking about parents' observations of their child's social and emotional development.							
parents and their children (e.g., p	pportunities to strengthen bonds between parent-child playgroups, playing together in ve, cooking, making an art project together).							
	edge and expertise about their children's as they share information about social and							



SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs model nurt	6	SHORE A SHORE	itee ?	. Heither age	disagles	es stoney disas	Lee Comments	
<b>5.4</b> Staff nurture children and model nurturing for parents	<b>5.4.1</b> Responding consistently to children in a warm, supportive manner.							
by:	<b>5.4.2</b> Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.							
	<b>5.4.3</b> Showing warmth through appropriate physical contact.							
	<b>5.4.4</b> Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).							
	<b>5.4.5</b> Responding sympathetically to help children who are upset, hurt or angry.							
	<b>5.4.6</b> Encouraging children to express their feelings through words, artwork and expressive play.							
	<b>5.4.7</b> Modeling empathy and appropriate emotional responsiveness.							



						,	, , ,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		285	,	agree	nd disagles	lieste alle
How do programs model nurt	uring care to children?	45.	Strongly agr	Agree 3:	Aeither 2: D	sagree 1: Strong!	Aut thicage
							Comments
<b>5.5</b> Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	<b>5.5.1</b> Fostering children's social and emotional development in the context of their culture and language.						
social emotional development, including:	<b>5.5.2</b> Recognizing behavioral/emotional problems or developmental delays.						
	<b>5.5.3</b> Understanding the impact of loss or trauma on children and how to respond appropriately.						
	<b>5.5.4</b> Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.						
	<b>5.5.5</b> Understanding gender differences in child rearing and its impact on social and emotional development.						
	<b>5.5.6</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.7</b> Promoting positive relationships among children living in the same household.						
	<b>5.5.8</b> Understanding how mental health and wellness affects family relationships and the developmental process of young children.						
	<b>5.5.9</b> Recognizing and responding to the impact of child or parental trauma on parent-child relationships.						
<b>5.6</b> Families are invited to obser and/or staff in the program.	ve their children interacting with other children						



					, ,	. ,	,	, , ,
SOCIAL AND EMOTIONAL COM SELF-ASSESSMENT ITEMS How do programs include chi development activities in prog	Idren's social and emotional	ধ্য	Standy all	Per 3.	Meither agree	ing disagre	strongly dis	ages and a second
								Comments
<b>5.7</b> The program supports children's social and emotional development with intentional practices that include:	<b>5.7.1</b> Encouraging children to express their feelings in ways that are the most comfortable for them.							
practices that illicitude.	<b>5.7.2</b> Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.							
	<b>5.7.3</b> Actively involving children in solving their conflicts and problems (e.g., helping children talk out problems and think of solutions; sensitizing children to feelings of others).							
	<b>5.7.4</b> Setting clear expectations and limits for behavior.							
	<b>5.7.5</b> Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).							
<b>5.8</b> Mental health consultants assist staff in integrating social emotional development into	<b>5.8.1</b> Providing coaching on how to support social and emotional learning for all children.							
everyday work by:	<b>5.8.2</b> Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.							



				, ,	, ,	, ,	,
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS			A. Agee	aure	a puritables	Aicagles Andricale	
identity and learn to interact	en develop a positive cultural in a diverse society?	g <sup>x</sup>	dingly A: Aglee	Weither	disagle strong	Applit /	
	•	5	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	<b>%`/ %</b>	/ % /	Comments	
<b>5.9</b> The program welcomes and affirms the cultures of families it serves by:	<b>5.9.1</b> Implementing meaningful and relevant activities, stories and discussions regarding cultural and linguistic differences.					Comments	
	<b>5.9.2</b> Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.						
	<b>5.9.3</b> Including appropriate instructional resources such as books and toys that expose children to role models from their own and other cultural backgrounds.						
<b>5.10</b> Staff receive training on how cultural differences affect social and emotional development, especially	<b>5.10.1</b> How the sense of identity is fostered as an individual and/or as part of a family or clan in different cultures.						
differences in:	<b>5.10.2</b> The extent to which nonverbal communication is predominant across cultures.						
	<b>5.10.3</b> Diverse cultural views success and appropriate child development.						
<b>5.11</b> Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languag-	<b>5.11.1</b> Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.						
es and cultural expressions through:	<b>5.11.2</b> Being provided with professional development opportunities that allow them to learn more about the history and experiences of different racial and cultural groups.						
	<b>5.11.3</b> Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.						
<b>5.12</b> Program policies and practices support the preservation of home languages by building upon the home languages and dialects of the children and families they serve.							
	th consultant offers consultation that is ting behaviors and child behaviors that stem						
<b>5.14</b> Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.						



SOCIAL AND EMOTIONAL COI SELF-ASSESSMENT ITEMS How do programs respond premotional development need	roactively when social or	/ 4.	. Strongly ag	, kules	Heither age	isagee.	strongly di	Salte E. Comments	
<b>5.15</b> When staff are concerned about a child's social and emotional development, they respond by:	<b>5.15.1</b> Discussing concerns (including objective descriptions of behaviors) with the child's parents without casting blame on the parents.								
	<b>5.15.2</b> Arranging for appropriate screenings and assessments.								
	<b>5.15.3</b> Connecting the family to resources that can support the child's social and emotional development (e.g., play therapy, mental health services, parenting classes).								
	<b>5.15.4</b> Helping parents develop strategies for addressing the issue at home.								
<b>5.16</b> Staff have access to a mental health consultant to help them:	<b>5.16.1</b> Identify and receive additional resources and/or training to work effectively with individual children and parents.								
	<b>5.16.2</b> Talk respectfully with parents about the child's development, needs or challenges.								

#### STRENGTHENING FAMILIES IN SPECIAL CIRCUMSTANCES

One responsibility of all child- and family-serving programs is to respond to possible child abuse and neglect when it is observed. Staff are mandatory reporters of child abuse and neglect in most states and should receive training every year on the state requirements on reporting. However, long before a report needs to be made, staff can also respond positively and supportively to early signs that have the potential to lead to maltreatment. The following items reflect best practices for programs in working effectively with child welfare officials.

HOW DO PROGRAMS RESPON OR NEGLECT?	D TO POSSIBLE CHILD ABUSE	/43	Strongly ag	Pares 3.	Weither all	e nordiesal	ee Strongly dis	Sable E Comments
<b>6.1</b> When children enter the program, staff discuss child abuse and neglect prevention	<b>6.1.1</b> The program's policies and practices that are designed to keep children safe from harm.							Comments
with all parents and caretak- ers. This discussion includes explanations of:	<b>6.1.2</b> Staff members' responsibility as mandatory child abuse and neglect reporters.							
	<b>6.1.3</b> How the state defines child abuse and neglect.							
	<b>6.1.4</b> The program's protocols regarding child abuse and neglect reports.							
child abuse and neglect reports.  6.2 All staff members are trained according to their state's mandatory child abuse reporting laws.								
	<b>6.3.1</b> Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.							
	<b>6.3.2</b> Following the program's protocols for reporting child abuse and neglect.							
	<b>6.3.3</b> Understanding how cases are generally handled by the child protective services agency once a report is made.							
	<b>6.3.4</b> The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.							
	<b>6.3.5</b> Recognizing cultural practices that can trigger reporting of child abuse and neglect (e.g., the practice of coining to treat fevers, the use of corporal punishment for toilet training, leaving a young sibling in the care of an older sibling under the age of ten) and respectfully discussing ways that parents can prevent the likelihood of mandatory reporting.							

# HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?

, sage et	
5. Strongt agge 3. Heiter agge in disagge 1. Strongt disagge and Applicable	
5. Strongt ages 3. Heiter ages rot to 1. Strongt listages	
5. Strong, W. Wies 3. Weither 5. Disage, 1. Strong, W. William	

					Comments
<b>6.4</b> The program's protocols for reporting possible child abuse and neglect:	<b>6.4.1</b> Are consistent with state child welfare reporting guidelines.				
	<b>6.4.2</b> Are reviewed annually or anytime changes are made to state guidelines.				
6.5 Staff members are trained that when a child abuse or neglect report needs to be filed, they have specific responsibilities to both the child welfare agency and to families that include:	<b>6.5.1</b> Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.				
	<b>6.5.2</b> Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.				
	<b>6.5.3</b> Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.				
	<b>6.5.4</b> Striving to be calm, caring and supportive of the family during the reporting process.				
	<b>6.5.5</b> Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.				
	<b>6.5.6</b> Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.				
<b>6.6</b> If a child is placed into child welfare custody, staff are trained to continue to support	<b>6.6.1</b> Maintaining contact with the child and family, if possible.				
the child and the family by:	<b>6.6.2</b> Advocating for the family with the Child Protective Services system, when possible.				
	<b>6.6.3</b> Helping parents connect with resources to help reunite them with their child.				



#### HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

						/		, , ,	,
IOW DO PROGRAMS RESPON OR NEGLECT?	ND TO POSSIBLE CHILD ABUSE	/«	5. Strongly 2	gges x. Agges	3. Weither of	glee landie	A. Strongly di	sale e sa	
								Comments	
	<b>6.7.1</b> Helping to maintain stability for children involved in the system.								
	<b>6.7.2</b> Engaging in co-case management practices, if possible.								
	<b>6.7.3</b> Conducting joint home visits.								
	<b>6.7.4</b> Attending Child Protective Services meetings to share information.								

### Appendix B

**Electronic Version of Social Connections Questions of SFSA Tool** 



Cone Park Library - Strengthening Families Self-Assessment - Social Connections

#### **Social Connections-Self Assessment Items**

People need people. Parents need people who care about them and their children; who can be good listeners; who they can turn to for well-informed advice, hope and encouragement; and who they can call on for help in solving problems. Parents' supportive social connections—that is, high quality relationships with family members, friends, neighbors, co-workers, community members and service providers—help buffer parents from stressors. Good social connections also support nurturing parenting behaviors that promote secure attachments in young children. Programs can provide opportunities for parents to create and strengthen positive social connections. Programs should:

- Help families value, build, sustain and use social connections
- Create an inclusive environment
- Facilitate mutual support
- Promote engagement in the community and participation in community activities

Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Social Connections. You will be asked to identify (on a 5-point scale) your level of agreement with a series of statements associated with questions related to promoting social connections. A Not Applicable (N/A) option is also provided. If desired, a comments text box is provided for each question should you wish to provide additional thoughts, reflections, and/or clarifications regarding your response.

This tool/survey was developed by the Center for the Study of Social Policy as part of their Strengthening Families Protective Factors Framework initiative.

Thank you for participating in this process. Your feedback and participation as a Team member is important.

Wha	t best describes your role/perspective as a Team Member?
$\bigcirc$	Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community
$\bigcirc$	Administrative Staff and/or Program Director
$\bigcirc$	Direct Service Staff and/or Volunteer
$\bigcirc$	Community Collaborator/Partner that Works with Resource Center



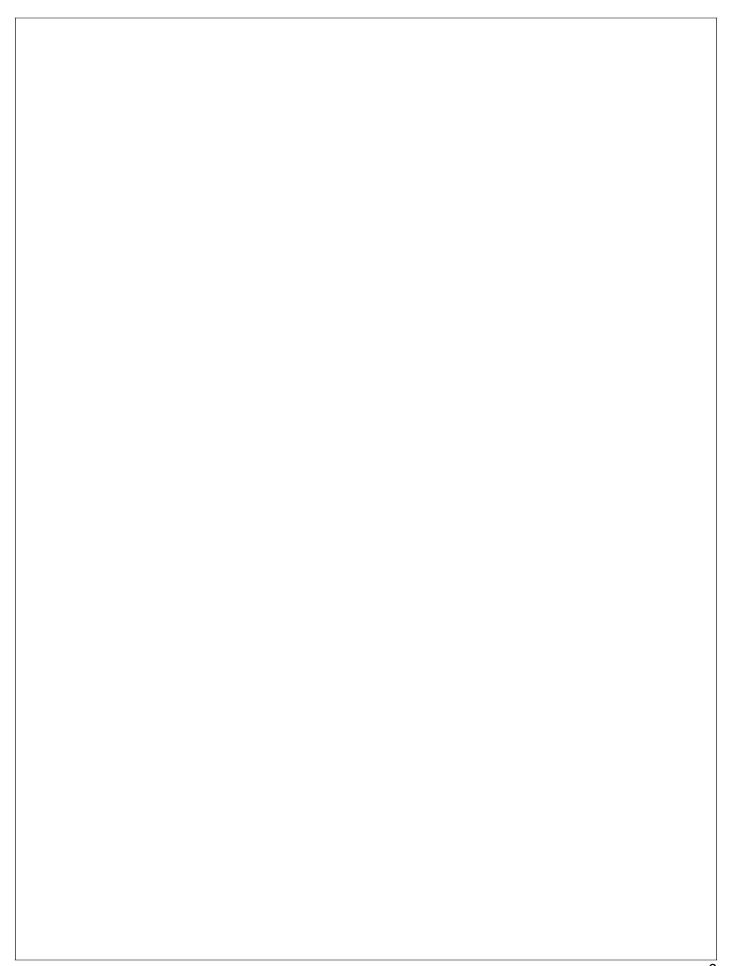
Cone Park Library - Strengthening Families Self-Assessment - Social Connections How do programs help families value, build, sustain and use social connections? 2.1 Families have access to a comfortable space where they can meet informally Agree Strongly agree Neither agree nor disagree Disagree Strongly disagree Not applicable Comment 2.2 The program provides opportunities for families with similar interests, children's ages and/or circumstances (such as those with twins, parents of infants, parents with special-needs children or parents who speak the same language) to connect with one another: Strongly Neither agree Strongly agree Agree nor disagree Disagree disagree N/A 2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses). Comments 2.2.2 Through parent mentoring and matching for one-on-one support. Comments 2.2.3 Informally, by introducing parents to one another. Comments

2.3 The program provides opportunities for families to socialize and foster a sense of community by organizing/ hosting:

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.  Comments	0	0		0		
2.3.2 Periodic events like coffee breaks and breakfasts.  Comments	0	0	0	0	0	C
2.3.3 Celebrations, graduations and holidays.  Comments		0		0	0	C
2.3.4 Field trips and community events.  Comments		0	0	0		C
2.3.5 Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural packgrounds.  Comments	0	0	0		0	C
2.3.6 Affordable family activities.  Comments	0	0	0	0	0	
2.3.7 Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and nterests.  Comments	0	0			0	C
2.3.8 Social media groups or web pages where parents can get program nformation and interact with one another.	0	0	0	0	0	C
Comments						

Strongly agree	Agree	Neither a	gree nor disagree	Disagree	Strongly disagree
Not applicable					
Comment					
2 F. The management	- <b>H</b> -uu	mmaata famili			an valationahina hatusan a
e.g., healthy mar				_	en relationships between a n. co-parenting).
Strongly agree	Agree		gree nor disagree		Strongly disagree
Not applicable	O 1.9.55		g		
Not applicable					
Comment					

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
.6.1 Calling, sending notes or making home visits inviting them to program ctivities.	$\circ$	$\bigcirc$	$\bigcirc$			
Comments						
.6.2 Connecting with them on social media platforms through program ages or groups.	0	0	0	0		
Comments						
.6.3 Offering support with transportation, child care or other barriers to articipation.	0	0	0	0	0	
Comments						
.6.4 Making special efforts to connect them with other families who share imilar interests.	0			0	0	С
.6.5 Connecting them with resources (including mental health consultation) nat can help them explore difficulties with orming social connections.	0	0	0	0	0	С
Comments						
.6.6 Matching families with staff or other families who can help them feel relcome and valued in program activities.		0	0	0	0	
Comments						
2.7 Staff receive training on how isolation or reluctance exclusion due to differences in race, language, culture, a etc.	-	-				
Strongly agree Agree Neither agree nor disagree  Not applicable	Dis	agree	Stron	igly disagre	ee	
Comment						





#### Cone Park Library - Strengthening Families Self-Assessment - Social Connections

How do programs create an inclusive environment?

#### 2.8 The program and its staff model positive social skills and community building by:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.8.1 Welcoming all families.		$\bigcirc$				$\bigcirc$
Comments						_
2.8.2 Inviting all families to program parties or social events.				$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.						$\bigcirc$
Comments						
2.8.4 Helping to resolve conflicts among participants.	$\bigcirc$	$\bigcirc$		$\bigcirc$	$\bigcirc$	$\bigcirc$
Comments						
2.8.5 Promoting families' understandings of different cultures and backgrounds.						$\bigcirc$
Comments						
2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.	0	0	0		0	$\bigcirc$
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.9.1 Modeling inclusive behavior among the staff.						
Comments						
2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).	0	0	0	0	0	
Comments						
2.9.3 Providing training and support for helping families and children resolve conflicts effectively.		0			0	С
Comments						
2.9.4 Intervening appropriately to counter act prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).	0		0	0	0	C
Comments						
2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.		$\circ$				C
Comments						
2.9.6 Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.	0	0	0	0	0	C
Comments						

		e program comr			including newcome	
Strongly	y agree A	agree Neithe	r agree nor disagree	Disagree	Strongly disagree	
O Not app	licable					
Comment						



Cone Park Library - Strengthening Families Self-Assessment - Social Connections

ow do programs facilitate mutual support?						
2.11 The program encourages parents to set up mutual su pools, babysitting co-ops, play groups, social media group communicate with one another).			-	•		s, ca
Strongly agree Agree Neither agree nor disagree	Disag	ree	Stron	ıgly disagr	ee	
Not applicable						
Comment						
Strongly agree Agree Neither agree nor disagree  Not applicable  Comment  13 Parent-organized social/educational events and activities	Disag			d suppo		
	Strongly agree		nor disagree	Disagree	Strongly disagree	N/A
2.13.1 Providing information on outside activities for parents to attend together for example, gathering at playgrounds, fun fairs or libraries).						
Comments						
2.13.2 Providing supports such as gathering space, childcare and food so hat parents can organize and participate in activities together.	$\bigcirc$	$\bigcirc$			$\bigcirc$	$\bigcirc$
Comments						

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
2.15 The progran	_	es staff and families to parti	cipate togethe	er in community improveme
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
2.16 Staff are vision other community			the communit	ty and are actively involved
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	Agree	Neurici agree noi disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
2.17 The program	provides a	nd receives support from th	ne local comm	unity (e.g., financial suppor
. •	•	service, tangible gifts, disco		, , , , , , , , , , , , , , , , , , , ,
Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
O Not applicable				
Comment				
				te family enrichment (e.g.
	-	parents to local opportuniti	-	, , ,
reading hours at t	the library, p	parent-child book groups, c	ultural heritag	e events).
reading hours at the Strongly agree	-	• •	-	, , ,
reading hours at t	the library, p	parent-child book groups, c	ultural heritag	e events).

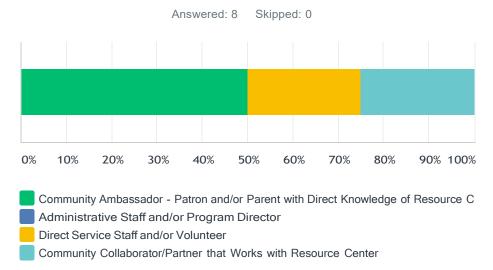
### **Appendix C**

Cone Park Library Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— Social Connections Results

Updated/Revised (September 2021)

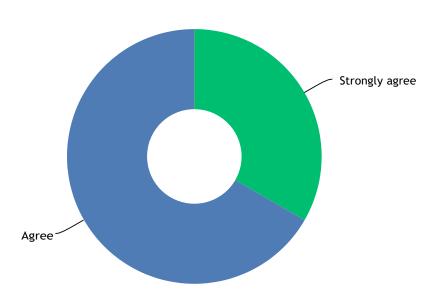
## Q1 What best describes your role/perspective as a Team Member?



ANSWER CHOICES	RESPONS	SES
Community Ambassador - Patron and/or Parent with Direct Knowledge of Resource Center and the Neighborhood/Community	50.00%	4
Administrative Staff and/or Program Director	0.00%	0
Direct Service Staff and/or Volunteer	25.00%	2
Community Collaborator/Partner that Works with Resource Center	25.00%	2
TOTAL		8

# Q 2.1 Families have access to a comfortable space where they can meet informally

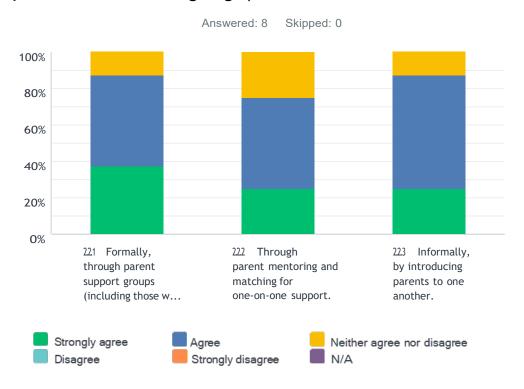




ANSWER CHOICES	RESPONSES	
Strongly agree	33.33%	2
Agree	66.67%	4
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		6
# COMMENT	DATE	

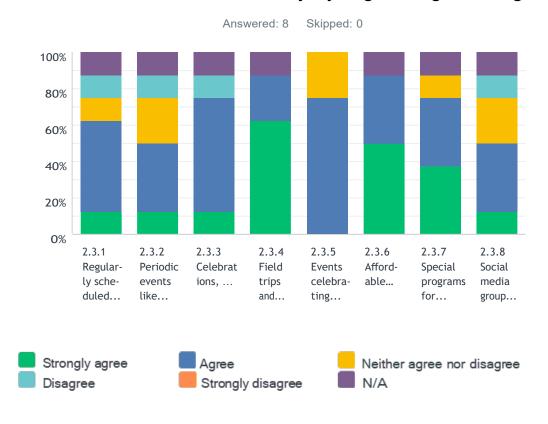
#	COMMENT	DATE
	There are no responses.	

Q 2.2 The program provides opportunities for families with similar interests, children's ages and/or circumstances (such as those with twins, parents of infants, parents with special-needs children or parents who speak the same language) to connect with one another:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses).	37.50% 3	50.00%	12.50% 1	0.00%	0.00% 0	0.00%	8	4.25
2.2.2 Through parent mentoring and matching for one-on-one support.	25.00% 2	50.00%	25.00% 2	0.00%	0.00%	0.00%	8	4.00
2.2.3 Informally, by introducing parents to one another.	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00%	0.00%	8	4.13

# Q 2.3 The program provides opportunities for families to socialize and foster a sense of community by organizing/ hosting:

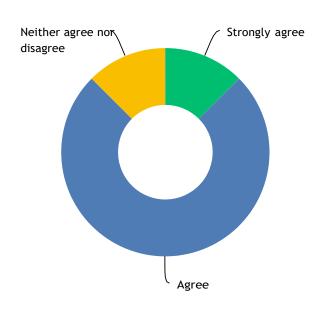


#### Cone Park Library - Strengthening Families Self-Assessment - Social Connections

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.	12.50% 1	50.00%	12.50% 1	12.50% 1	0.00%	12.50% 1	8	3.71
2.3.2 Periodic events like coffee breaks and breakfasts.	12.50% 1	37.50% 3	25.00% 2	12.50% 1	0.00%	12.50% 1	8	3.57
2.3.3 Celebrations, graduations and holidays.	12.50% 1	62.50% 5	0.00%	12.50% 1	0.00%	12.50% 1	8	3.86
2.3.4 Field trips and community events.	62.50% 5	25.00% 2	0.00%	0.00%	0.00%	12.50% 1	8	4.71
2.3.5 Events celebrating cultural customs, potlucks, and other opportunities for parents to share and learn about each other's home lives and cultural backgrounds.	0.00%	75.00% 6	25.00%	0.00%	0.00%	0.00%	8	3.75
2.3.6 Affordable family activities.	50.00% 4	37.50% 3	0.00%	0.00%	0.00%	12.50% 1	8	4.57
2.3.7 Special programs for dads, grandparents, teen moms, teen dads and other caregivers who would enjoy activities directed at their unique needs and interests.	37.50% 3	37.50% 3	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.29
2.3.8 Social media groups or web pages where parents can get program information and interact with one another.	12.50% 1	37.50% 3	25.00% 2	12.50% 1	0.00%	12.50% 1	8	3.57

### Q 2.4 The program encourages positive relationships between families and staff members by planning informal social events where staff can interact with families.

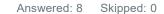


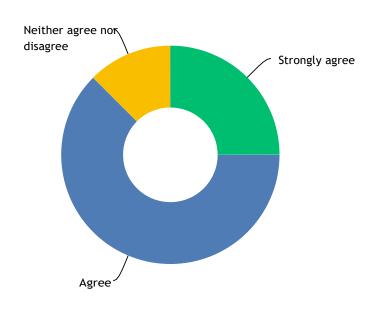


ANSWER	CHOICES	RESPONSES	
Strongly a	gree	12.50%	1
Agree		75.00%	6
Neither ag	ree nor disagree	12.50%	1
Disagree		0.00%	0
Strongly d	isagree	0.00%	0
Not applic	able	0.00%	0
TOTAL			8
#	COMMENT	DATE	
	There are no necessaria.		

There are no responses.

## Q 2.5 The program offers or connects families to resources to strengthen relationships between adults (e.g., healthy marriage skills, communication skills, conflict resolution, co-parenting).

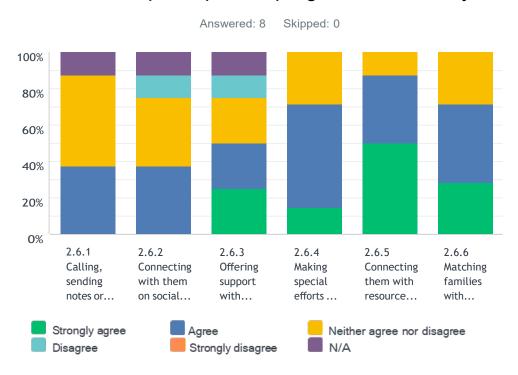




ANSWER	CHOICES	RESPONSES		
Strongly a	угее	25.00%		2
Agree		62.50%		5
Neither ag	ee nor disagree	12.50%		1
Disagree		0.00%		0
Strongly di	sagree	0.00%		0
Not applica	ble	0.00%		0
TOTAL				8
#	COMMENT		DATE	
	T1			

There are no responses.

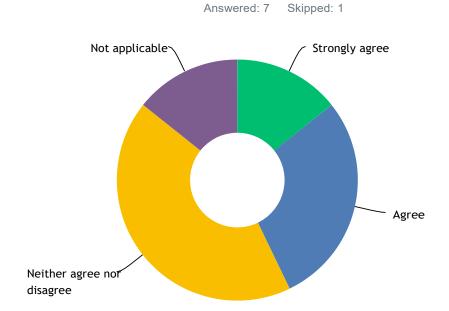
# Q 2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:



### Cone Park Library - Strengthening Families Self-Assessment - Social Connections

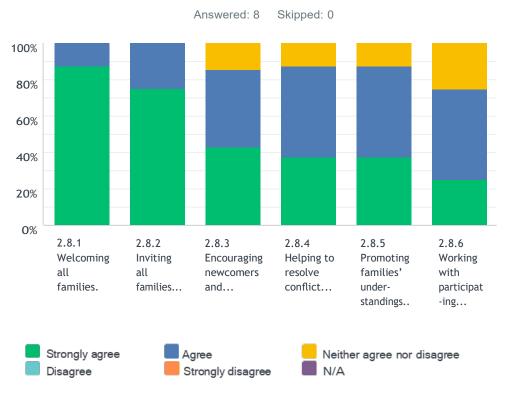
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.6.1 Calling notes or mak visits inviting program activ	ing home them to	0.00%	37.50% 3	50.00% 4	0.00%	0.00%	12.50% 1	8	3.43
2.6.2 Conne them on soci platforms thro program page	al media ough	0.00%	37.50%	37.50% 3	12.50% 1	0.00%	12.50% 1	8	3.29
2.6.3 Offerin with transpor care or other participation.	tation, child	25.00% 2	25.00%	25.00% 2	12.50% 1	0.00% 0	12.50% 1	8	3.71
2.6.4 Making efforts to con with other far share similar	nect them nilies who	14.29% 1	57.14% 4	28.57% 2	0.00%	0.00%	0.00%	7	3.86
2.6.5 Conne with resource mental health consultation) help them ex difficulties wi social connect	es (including n that can plore th forming	50.00% 4	37.50% 3	12.50% 1	0.00%	0.00%	0.00%	8	4.38
2.6.6 Matchir with staff or of families who them feel we valued in projectivities.	other can help lcome and	28.57% 2	42.86% 3	28.57% 2	0.00% 0	0.00%	0.00%	7	4.00
#		FOR "2.6.1 CAI EM TO PROGR	*		OR MAKING H	OME VISITS		DATE	
1	if they are doi		, ,					8/2/2021 9:	:59 AM
#		ROGRAM PAG			ON SOCIAL MED	DIA PLATFORM	S	DATE	
#	COMMENTS	•			TRANSPORTAT	ON, CHILD CA	RE	DATE	
1	if this get impleted 8/2/2021 9:59 AM							59 AM	
#	COMMENTS FOR "2.6.4 MAKING SPECIAL EFFORTS TO CONNECT THEM WITH OTHER FAMILIES WHO SHARE SIMILAR INTERESTS."						THER	DATE	
1	unknown							8/6/2021 8	:15 AM
2	would be nice							8/2/2021 9	:59 AM
#	COMMENTS FOR "2.6.5 CONNECTING THEM WITH RESOURCES (INCLUDING MENTAL HEALTH CONSULTATION) THAT CAN HELP THEM EXPLORE DIFFICULTIES WITH FORMING SOCIAL CONNECTIONS."								
	There are no	responses.							
#		FOR "2.6.6 MA" HEM FEEL WE				IER FAMILIES V TIVITIES."	VHO	DATE	

Q 2.7 Staff receive training on how isolation or reluctance to participate can be the result of social exclusion due to differences in race, language, culture, appearance, gender, sexual orientation, ability, etc.



ANSWER CHOICES		RESPONSES		
Strongly agree		14.29%		1
Agree		28.57%		2
Neither agre	ee nor disagree	42.86%		3
Disagree		0.00%		0
Strongly dis	agree	0.00%		0
Not applical	ole	14.29%		1
TOTAL				7
#	COMMENT		DATE	
π	There are no responses.		DAIL	

# Q 2.8 The program and its staff model positive social skills and community building by:

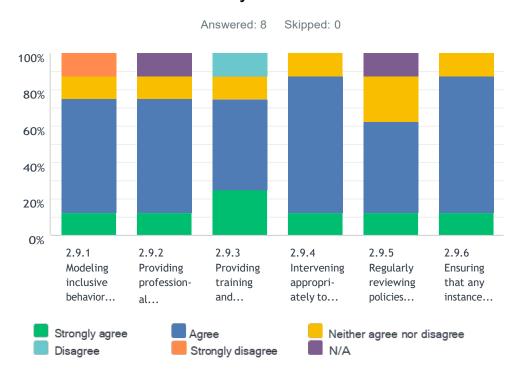


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.8.1 Welcoming all families.	87.50% 7	12.50% 1	0.00%	0.00%	0.00%	0.00% 0	8	4.88
2.8.2 Inviting all families to program parties or social events.	75.00% 6	25.00% 2	0.00%	0.00%	0.00%	0.00%	8	4.75
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.	42.86% 3	42.86% 3	14.29% 1	0.00%	0.00% 0	0.00%	7	4.29
2.8.4 Helping to resolve conflicts among participants.	37.50% 3	50.00% 4	12.50% 1	0.00%	0.00%	0.00%	8	4.25
2.8.5 Promoting families' understandings of different cultures and backgrounds.	37.50% 3	50.00%	12.50% 1	0.00%	0.00%	0.00%	8	4.25
2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.	25.00% 2	50.00%	25.00% 2	0.00%	0.00%	0.00%	8	4.00

### Cone Park Library - Strengthening Families Self-Assessment - Social Connections

#	COMMENTS FOR "2.8.1 WELCOMING ALL FAMILIES."	DATE
	There are no responses.	
#	COMMENTS FOR "2.8.2 INVITING ALL FAMILIES TO PROGRAM PARTIES OR SOCIAL EVENTS."	DATE
1	This could be helpful	8/2/2021 10:01 AM
#	COMMENTS FOR "2.8.3 ENCOURAGING NEWCOMERS AND RELUCTANT FAMILIES TO PARTICIPATE THROUGH SPECIAL OUTREACH EFFORTS."	DATE
	There are no responses.	
#	COMMENTS FOR "2.8.4 HELPING TO RESOLVE CONFLICTS AMONG PARTICIPANTS."	DATE
	There are no responses.	
#	COMMENTS FOR "2.8.5 PROMOTING FAMILIES' UNDERSTANDINGS OF DIFFERENT CULTURES AND BACKGROUNDS."	DATE
1	open minded	8/2/2021 10:01 AM
#	COMMENTS FOR "2.8.6 WORKING WITH PARTICIPATING PARENTS TO ESTABLISH GROUND RULES FOR PROGRAMS AND ACTIVITIES THAT ENSURE INCLUSIVENESS."	DATE
1	but it could not cause then to not	8/2/2021 10:01 AM

# Q 2.9 The program helps staff learn how to reduce stereotyping and bias by:

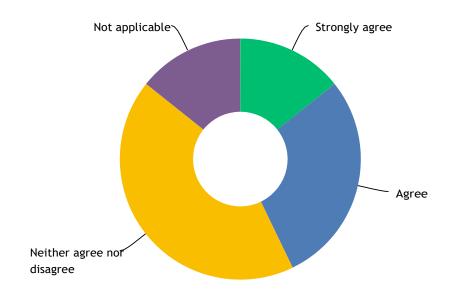


### Cone Park Library - Strengthening Families Self-Assessment - Social Connections

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.9.1 Modeling inclusive behavior among the staff.	12.50% 1	62.50% 5	12.50% 1	0.00%	12.50% 1	0.00%	8	3.63
2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).	12.50% 1	62.50%	12.50% 1	0.00%	0.00% 0	12.50% 1	8	4.00
2.9.3 Providing training and support for helping families and children resolve conflicts effectively.	25.00% 2	50.00%	12.50% 1	12.50% 1	0.00%	0.00%	8	3.88
2.9.4 Intervening appropriately to counter act prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing rules for fair treatment of others).	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00% 0	0.00%	8	4.00
2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families.	12.50% 1	50.00%	25.00% 2	0.00%	0.00%	12.50% 1	8	3.86
2.9.6 Ensuring that any instances of prejudice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.	12.50% 1	75.00% 6	12.50% 1	0.00%	0.00% 0	0.00%	8	4.00

# Q 2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.

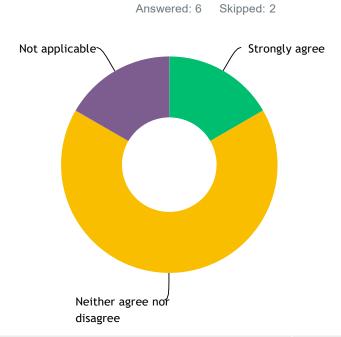
Answered: 7 Skipped: 1



ANSWER CHOICES	RESPONSES	
Strongly agree	14.29%	1
Agree	28.57%	2
Neither agree nor disagree	42.86%	3
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	14.29%	1
TOTAL		7

#	COMMENT	DATE
1	unknown	8/6/2021 8:15 AM

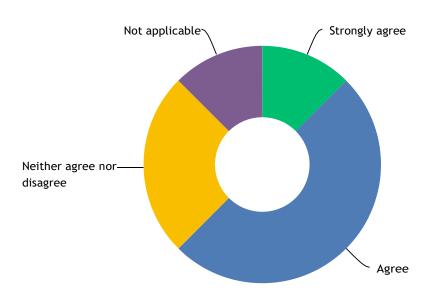
# Q 2.11 The program encourages parents to set up mutual support mechanisms (e.g., phone trees, carpools, babysitting co-ops, play groups, social media groups or pages where parents can communicate with one another).



ANSWER CHOICES	RESPONSES		
Strongly agree	16.67%		1
Agree	0.00%		0
Neither agree nor disagree	66.67%		4
Disagree	0.00%		0
Strongly disagree	0.00%		0
Not applicable	16.67%		1
TOTAL			6
# COMMENT		DATE	
1 unknown		8/6/2021 8:16 AM	

## Q 2.12 There is time built into program activities for parents to network and share with each other.

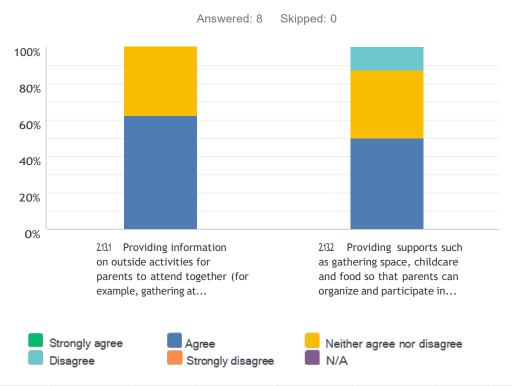




ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	50.00%	4
Neither agree nor disagree	25.00%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	12.50%	1
TOTAL		8

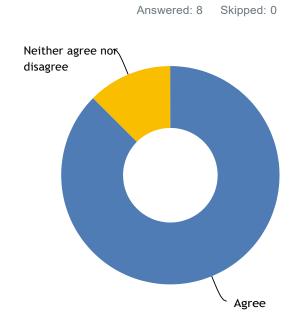
#	COMMENT	DATE
1	this could help	8/2/2021 10:03 AM

# Q 2.13 Parent-organized social/educational events and activities are encouraged and supported by:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.13.1 Providing information on outside activities for parents to attend together (for example, gathering at playgrounds, fun fairs or libraries).	0.00%	62.50% 5	37.50% 3	0.00%	0.00% 0	0.00%	8	3.63
2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.	0.00%	50.00%	37.50% 3	12.50% 1	0.00%	0.00%	8	3.38

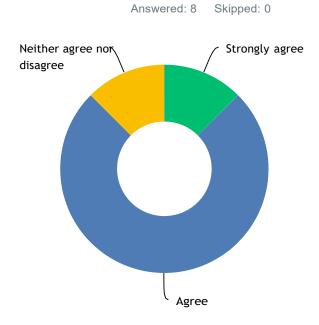
Q 2.14 Administrators and staff seek opportunities to build good relations within the immediate neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood resources for special projects, building relationships with local schools).



ANSWER CHOICES	RESPONSES	
Strongly agree	0.00%	0
Agree	87.50%	7
Neither agree nor disagree	12.50%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		8

#	COMMENT	DATE
	There are no responses.	

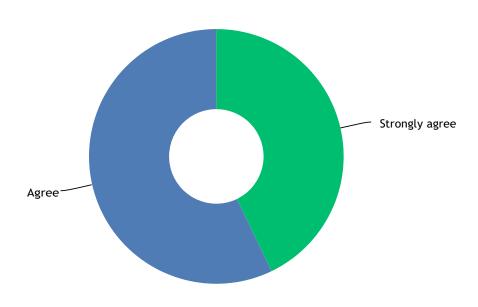
# Q 2.15 The program encourages staff and families to participate together in community improvement or advocacy projects.



ANSWER CHOICES		RESPONSES	
Strongly agree		12.50%	1
Agree		75.00%	6
Neither agree nor disagree		12.50%	1
Disagree		0.00%	0
Strongly disagree		0.00%	0
Not applicable		0.00%	0
TOTAL			8
ш	COMMENT	DATE	
#	COMMENT	DATE	
	There are no responses.		

# Q 2.16 Staff are visibly engaged with issues of concern to the community and are actively involved with other community organizations.

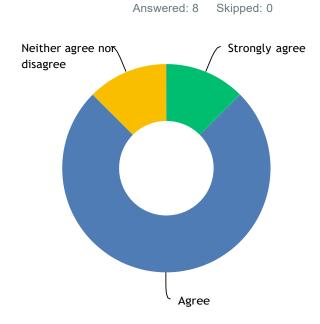




ANSWER CHOICES	RESPONSES	
Strongly agree	42.86%	3
Agree	57.14%	4
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		7

#	COMMENT	DATE
	There are no responses.	

### Q 2.17 The program provides and receives support from the local community (e.g., financial support, donated services, volunteer service, tangible gifts, discounted services, letters of support).

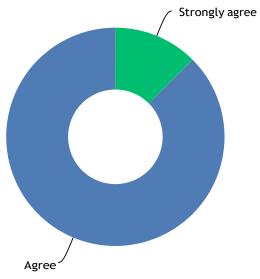


ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	75.00%	6
Neither agree nor disagree	12.50%	1
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL	8	8
# COMMENT	DATE	
	57112	

#	COMMENT	DATE
1	some services	8/2/2021 10:03 AM

## Q 2.18 The program connects parents to local opportunities that promote family enrichment (e.g., reading hours at the library, parent-child book groups, cultural heritage events).





ANSWER CHOICES	RESPONSES	
Strongly agree	12.50%	1
Agree	87.50%	7
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		8
# COMMENT	DATE	
	DATE	

There are no responses.