

The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Providing Concrete Support in Times of Need

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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.

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Suggested Citation:

Perry, R., Lancaster, C., Evans, K., Harden, S., Jones, K., Mobley, P., O'Neal, B., Pope, A., Smith, N., Perry, P. & Spoliansky, T. (2022). *The NorthStar Family Resource Center (NSFRC) 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 NorthStar Family Resource Center (NSFRC) 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 NSFRC SFSA team with a specific focus on items/measures associated with supporting families by providing concrete support when needed most. 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 NorthStar Family 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 NorthStar Family Resource Center—History

Partnership for Strong Families (PSF) is 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. PSF 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 Families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

PSF's Family 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 safely reducing entries into foster care. One of the major strengths of the Family Resource Center Model utilized at the five existing sites (which includes the NorthStar Family Resource Center) is its focus on community collaborations as a means of addressing identified needs in the communities being served. There is a strong history of collaboration with each of the existing three Family 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 Family Resource Center reports (for each FRC and PSF), website and social media posts, Family 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 focus 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 Gainesville and Lake City communities who have historically had limited access to family support services.

The first Family Resource Center (FRC) developed by Partnership for Strong Families was the Library Partnership RC (developed in collaboration with the Alachua County Library District, DCF, and Casey Family Programs), which opened its doors to the community in July 2009. Seeking to build upon the perceived success of PSF's first Family Resource Center, partnerships were established to open a second FRC. The Southwest Advocacy Group (SWAG) was an established entity in the community which works to improve the lives of residents in southwest Gainesville by advocating (to public and private organizations) to increase residents' access to resources, based upon community needs. In collaboration with the Southwest Advocacy Group (SWAG) and Alachua County, the SWAG FRC opened its doors to the community in June 2012 and since then has been providing continuous supports and services to individuals and families. Additionally, in 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, another community with historically limited access to resources. PSF was asked to partner with ACLD to open another co-located site 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. The Cone Park Library Family Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Family Resource Center began operating full-time in May 2014. Though not a part of this evaluation, Tri-County Community Family Resource Center opened its doors in March 2015.

PSF had long known that Columbia County, the area directly north of Alachua County, could benefit from an increased level of intervention to combat a rising number of shelters and incidents of child maltreatment. While the population of the county is relatively low, progressively escalating maltreatment counts in Columbia County started rivaling Alachua's over the past 10 years. PSF perceived a need for the development of a Family Resource Center in Lake City, utilizing their FRC Model and developing a service array specific to the needs of the Lake City community. With the assistance of funding from the Children's Bureau Community Collaborations to Strengthen and Preserve Families grant, Partnership for Strong Families opened their newest Family Resource Center serving the Greater Lake City area in March 2021. Prior to opening, PSF staff, community partners, and community volunteers spent months conducting a community needs assessment to ensure the services and supports offered were what was most needed in the community. A visioning session with community leaders was also conducted in late 2020 to help in the better understanding of the community's needs.

NorthStar Family Resource Center (NSFRC) is co-located on the campus of the Richardson Community Center in the Fergusson Building. This location provides a central location with plenty of space for community events, programs, and family activities. NSFRC is staffed with a Family Resource Center Manager and a part-time Administrative Assistant, along with the support of community volunteers and commitment of a local Resource Center Advisory Council. The NSFRC offers a variety of no-cost services and supports such as a clothing closet, food distributions, afterschool homework help, community-wide events (e.g., May Day Festivals, Back to School events, Covid-19 Vaccination Drives, Community Health Summits, etc.), job search assistance, and referrals to community partners.

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

The basis of PSF's FRC model is the Strengthening Families Approach and Protective Factors Framework developed by the Center for the Study of Social Policy (Browne, 2014)¹. 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 FRC. Although there may be some common services and supports across FRCs,

¹ Please see: Browne, C.H. (2014). The Strengthening Families Approach and Protective Factors Framework: Branching Out and Reaching Deeper. Washington, D.C.: The Center for the Study of Social Policy.

there can be variation in the service array based on variation in the target population needs within the geospatial target area for each FRC. 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 NorthStar Family Resource Center to provide patrons and families with 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 NorthStar Family 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 FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.)². The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family 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 Family Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons who

² See: CSSP (n.d.) Strengthening Families Self-Assessment Tool for Community-Based Programs. Washington. D.C.: Center for the Study of Social Policy. Available at: <u>https://cssp.org/wp-content/uploads/2018/10/COMMUNITY-BASED-PROGRAM-SELF-ASSESSMENT.pdf</u>

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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

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 following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons) with confirmation that they received services or participated in activities linked to protective factor and following consultation with NSFRC staff regarding those active in their participation. Unfortunately, one patron was unable to be a member of the team due to personal and parental constraints.

These processes were followed in the establishment of the NSFRC SFSA Team. Composition (see below) includes three direct service staff/volunteers (Philip Mobley, Patricia Perry and Narrie Smith), two community collaborators (Katrina Evans and Stephanie Harden) and three community ambassadors (Keaven Jones, Bonnie O'Neal, and Allen Pope). There is a great deal of overlap in roles throughout the team. Ms. Smith and Ms. Harden have also received services as patrons and Mr. Pope and Mr. Jones have also volunteered at the NSFRC. The term "Community Ambassador" was decided by earlier SFSA Teams (affiliated with the Gainesville FRCs) to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) and 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:

How Does NorthStar Family Resource Center Respond Immediately When Families are in Crisis? (Items 4.1.1 through 4.3.6)

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

How Does NorthStar Family 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 NorthStar Family 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 NorthStar Family 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 orientation meeting of the NSFRC SFSA Team took place on October 6, 2022. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet for two half-day sessions in November, however a third day was added to cover the material. 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. Meetings that involved the discussion of Concrete Support items took place on November 7, 2022. The dates and times of meetings were in accordance with preferred times and schedules of all team members and attendees.

The NSFRC Strengthening Families Self-Assessment Team

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



Allen Pope Sr. has visited NorthStar 183 times since first coming in September 2021; much of this time includes regular attendance for the community walk. Allen has also helped with several community events hosted by NorthStar. He has lived in Columbia County since 1973 and graduated from Columbia High before joining the Army. Allen was in the service for three years as a Cannon Crewman then worked at Carlon PVC Pipe Co. He has experience with General Electric as a military policeman in Ocala, FL and as a correctional officer. Allen has been a volunteer coach in Columbia County for 18 years and volunteers at his church, New Bethel AME, in several capacities. Allen is a husband of 22 years to Beverly Pope and father of four biological children and three adopted children. The Popes have fostered over 15 children and provided respite care to other foster families. Mr. Pope shares that he loves the caring and inviting

atmosphere at NorthStar. He is glad that the SFSA team has identified many issues that are lacking in the community and the need for them to be addressed.



Bonnie O'Neal has been coming to NorthStar Family Resource Center since August 2021 as a patron to access services for herself and her family. She was raised in Kissimmee, FL and eventually moved to Lake City, FL in 2019 from Ocala, FL. Bonnie received her Associate of Science degree at Florida Metropolitan University and started schooling to become a medical assistant. Unfortunately, she had to leave the program early to be a caretaker for sick family members. Bonnie is a wife of 28 years to her husband Byron, is a mom to a son and daughter, and loves spending time with her family. She loves everything about NorthStar and was happy to join the SFSA team to be involved and share her experiences.



Keaven Jones is originally from White Springs, FL but has been a part of the Lake City community for 39 years and first started to connect with NorthStar Family Resource Center in May of 2021 as a patron. Keaven works for Career Source Florida Crown as a Workforce Innovation and Opportunity Act (WIOA) supervisor. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market. WIOA also matches employers with the skilled workers they need to compete in the global economy. While he and his two boys are not helping with his mother's yard beautification projects, he is spending time with them and his nieces and nephews at local parks and playgrounds. Keaven loves opportunities that Northstar provides and the support they provide to all cultures. He shares that he "was inspired by the staff and volunteers that I have encountered while attending the

community center" and that "kids that I have met while visiting help to remind me why the future looks so bright."



Dr. Philip Mobley is the NorthStar Family Resource Center Manager and the Senior Minister of the Northside Church of Christ, located in Lake City, FL. He was raised in Lake City but lived for many years in Jacksonville, FL developing his personal and professional skills. Phil received his Doctoral Degree in Education Leadership from the University of North Florida in 2019, his MBA from Jacksonville University in 2002, and a Bachelor's degree from the University of North Florida in 1975. Dr. Mobley served as a Board Member of the Suwanee Valley United Way and the Community Advisory Board for the Columbia/Hamilton County Health Department. He is currently a member of the Richardson Community Center Advisory Board. Phil is a husband of over 48 years to Lotonia (Toni). They have two children, seven grandsons, and two granddaughters. Phil loves that NorthStar provides services and resources to families to help prevent or resolve crises and develop strategies to strengthen families. Dr. Mobley

shared that he enjoyed hearing everyone's perspective through the Strengthening Families Self-Assessment meetings.



Narragansett "Narrie" Smith, sister of Phil Mobley, has been a longtime patron, supporter, and volunteer of the NorthStar Family Resource Center. She has lived all her life in Lake City, FL. Narrie has a bachelor's degree in Business Administration from the University of North Florida and a master's degree in Educational Leadership from Nova University. After 23 years as a teacher, Narrie became the Principal of Niblack Elementary school, raising their school score from an F to an A. Narrie has served as the Assistant Superintendent of the Columbia County School District and currently sits on the Columbia County School Board. She is a minister and director of Christian Education at New Bethel Missionary Baptist Church. She spends her time volunteering at NorthStar, with Columbia County Schools, and being with family. Narrie is a wife of 47 years to Johnny Smith, mother to two daughters, and proud grandmother of 6. She loves working with

children and models her life around serving God and His people. Narrie was glad to be a part of the SFSA team because it identified areas to grow and improve as a Family Resource Center.



Ms. Patricia A. Perry has been the Administrative Assistant at NorthStar Family Resource Center since before the doors opened to the public in March 2021. She was born and raised in Lake City, FL and has spent much of her life there. Patricia graduated from Columbia High School in 1974 and attended Florida A&M University in Tallahassee and Seattle Central College in Seattle, WA. Starting as a file clerk and working her way up through the Columbia County Clerk of Courts for 30 years, she retired as the Chief Deputy Clerk. Patricia is a wife of 35 years to Nathan Perry Jr. and mother to Joshua Perry. Her church family is a major part of her life, she has been a member of New Bethel Missionary Baptist Church since 1969. Patricia loves that NorthStar makes efforts to help the community in any way possible. She hopes her varied experience and familiarity with the people of Lake City will be a benefit to the community.



Katrina P. Evans, Director of the Columbia County Public Library, has supported the NorthStar Family Resource Center and been a member of the Lake City Resource Center Advisory Council since its inception. She grew up in Lake Placid, FL but has lived in Lake City for more than 25 years. Ms. Evans has a master's degree in Library and Information Studies from Florida State University and a bachelor's degree in literature and history from the University of North Florida. She began her career at the historic Walton-DeFuniak Library and was later hired at Columbia County Public library in 1997. After 19 years of service as Outreach and Youth Services Librarian and Assistant Director, Ms. Evans became the library director in 2016. She has served on the Board of the Northeast Florida Library Information Network and has volunteered in various capacities with the Florida Library Association and Edward Rutledge Chapter, NSDAR. Ms.

Evans has served on local school advisory committees and volunteers with her church. Her husband, Kevin, is a school media specialist at a local elementary school and they have two sons, Drew and Rhys. Katrina joined the SFSA team to learn about local resources that she can take back and share with library staff and patrons. She loves that NorthStar is providing a "one-stop-shop" to our community where people can get assistance with a variety of needs. She shares, "I love that this need is now being met so compassionately by NorthStar Family Resource Center and its amazing staff."



Stephanie Harden began to connect with NorthStar Family Resource Center in January of 2021. Stephanie is a native of Philadelphia, PA, but she has lived in Florida for the last thirteen years, she began working in Lake City last year through a promotion to Hope Navigator II with the Department of Children and Families. Stephanie is working on her master's degree in Strategic Business from Northcentral University and plans to get her doctorate in Theology. She has 30 years of teaching background and over 20 years of customer service experience, along with over 20 years of Ministerial Leadership and Counseling, that she applies to assisting families in need. Stephanie is the business owner/CEO of Loving Arms Services and serves on several boards including the Partnership for Strong Families Children's Partnership Counsel. Stephanie is a wife of 20 years to Pastor Troy Harden, mother of 10 children (blended family), and a grandmother of

17 beautiful grandchildren. In addition to spending time with her family, she reads, loves to thrift store shop, and is completing her first book. Stephanie loves that NorthStar is in a central part of Lake City that needs resources and is working to create a service provision agreement to open a Hope Florida Navigator satellite station at the Family Resource Center. Stephanie was glad to be a part of the SFSA team because there were several wonderful action items to work on. With years of experience in various resource centers Stephanie appreciates the compassion and family atmosphere shown at NorthStar.

Although not formally members of the NSFRC SFSA Team, Dr. Robin Perry (Lead Evaluator) and Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator) attended each of the NSFRC SFSA Team meetings. They, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended these meetings as well, 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 NSFRC. Christen Lancaster is the Community Research Coordinator for the NSFRC, 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 NSFRC. 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 NSFRC to community needs related to supporting families through the provision of concrete supports in times of need. 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. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (over three days) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in between meetings.

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.

How Does NorthStar Family 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 NSFRC 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. In fact, no item was deemed not applicable by any respondent. This may not be surprising given the significance for which the provision of concrete supports serves as a primary service/support provided by NSFRC. In 2021, 58.7% of all service requests at NSFRC focused on concrete supports (Perry, Lancaster, Mobley, Merritt, Spoliansky, & Edelman, 2022). 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 15 of the 15 items/indicators of how (NSFRC) responds immediately when families are in crisis. There were no items/indicators for which there was a consensus of disagreement.

> ...NorthStar FRC is (as noted by one member and agreed to by others) "...a caring place to be...people here truly care..." Additionally, supports and services are distributed without stigma, and staff are proactive in responding to patron and family needs in a confidential manner.

There was uniform consensus in the assessment that staff at NSFRC are caring, engaged and responsive to parents and families in times of distress and crisis. Need for concrete supports is reportedly high within the neighborhoods served by NSFRC and, subsequently, any effort to address these needs, it is thought, aid with a reduction in stress experienced within patron households. There are a variety of concrete supports provided at NSFRC. These were highlighted in the meeting and elsewhere (see Perry et al., 2022) and include (but are not limited to): School Supplies, Computer/Printer/Copier Use, Clothing Assistance, Health Events, Fax Use, Housing/Rent Assistance, and (on Tuesdays) Panera bread.

Although these are direct/tangible supports provided on site, it was noted that the staff (one full-time and one part-time employee) spend a notable amount of time engaged in connecting patrons to existing community services, collaborative partners, and other resources. Although existing supports are regularly utilized (and appreciated), NSFRC's resources are limited in contrast to identified community need. This is particularly the case with respect to food insecurity needs of patrons and, sometimes, clothing and diaper needs for the abundance of single parents in the neighborhoods served. When resources at the NSFRC are limited, referrals and connections are made with other collaborative

partners (for example, Catholic Charities, etc.) and/or efforts are made to secure select resources directly or through the PSF. For example, NSFRC was awarded a grant from the United Way of Suwannee Valley to provide emergency financial support for rent and utilities to qualifying individuals/families. Rent and utility support can also be provided through PSF's Columbia County Children's Partnership Council for up to \$200 per household (where there is a child in the home). Individual donations have also been solicited and received for temporary housing in hotels/motels and for gift cards for food (e.g., Publix, etc.). Regardless, as the NSFRC Manager noted, it is "heartbreaking when you have to turn [families] away" because "...we don't have exactly what they need."

When the needs of select patrons and their family members are medical or mental health related, referrals are typically made. NSFRC has held an annual health fair which brings medical and mental health providers to the neighborhood, providing information sessions and materials. There have been occasions (not a regular practice) when a representative from Meridian Behavioral Healthcare³ has come on site to provide an evaluation of a patron in need that was struggling with mental health issues. When a crisis presents itself onsite, the FRC Manager has worked with Meridian and Wekiva Springs Center⁴ (based in Jacksonville Florida) to provide same-day assistance. Regardless, a major barrier for patrons receiving adequate medical and mental health care is transportation. Though Meridian does have a mobile response support team that will come on site to stabilize a situation (which NorthStar has used once), there is no public transportation system in Lake City. For those with cars, the cost (including gas costs) of using their car may be prohibitive. However, many people don't have cars or cannot afford them. There has generally been reluctance to provide gas station gift cards among service agencies in the area (including NSFRC) as these cards can be used for other items at the gas station, including alcohol. Alcohol and substance abuse are continued issues of concern within the communities served by NSFRC. One SFSA team member—that serves as a School Board member—highlighted that a large number of students and their families are struggling with a combination of substance abuse and mental health, especially those attending Columbia High School. Although engaged with collaborative partners, many of these needs are not addressed directly by NSFRC but are a source of stress and strain for families served.

Program staff (Dr. Mobley and Ms. Perry) and their families have an established presence and history within the community as residents, leaders, stakeholders, civil servants, and advocates for change. Their knowledge of community resources, level of personal attention to patrons, and caring disposition were highlighted as assets by community ambassadors and collaborative partners on the SFSA Team. Staff are reported as welcoming, engaged, knowledgeable, and responsive in a personable and professional manner to patrons. These attributes reinforce that NorthStar FRC is (as noted by one member and agreed to by others) "...a caring place to be...people here truly care..." Additionally, supports and services are distributed without stigma, and staff are proactive in responding to patron and family needs in a confidential manner. If existing resources at NSFRC cannot address the immediate expressed needs of a visiting patron, staff use knowledge and existing working relationships with representatives of other community organizations to advocate for a patron (and/or their family) and ensure there is a "warm handoff" to that resource. Although booklets and written information regarding other community resources exist, the importance of staff being proactive, responsive, and developing a friendly, supportive relationship with patrons to best assess their needs and refer to the appropriate resource

³ For more information regarding Meridian Behavioral Healthcare, Inc., please see: <u>https://www.mbhci.org/</u>

⁴ For more information regarding Wekiva Springs Center, see: <u>https://wekivacenter.com/</u>

was emphasized as a strength at NSFRC. Following a "warm handoff," patrons are encouraged to reconnect with staff with a report on the outcome of any referral. Further, active efforts to follow up with patrons following a referral are commonly made by staff, as well as reaching out to select families (already known to staff) in the community when word-of-mouth suggests they are in need or in crisis.

...staff use knowledge and existing working relationships with representatives of other community organizations to advocate for a patron (and/or their family) and ensure there is a "warm handoff" to that resource...the importance of staff being proactive, responsive, and developing a friendly, supportive relationship with patrons to best assess their needs and refer to the appropriate resource was emphasized as a strength at NSFRC.

Collaborative partners on the SFSA team corroborated the quality of "warm handoffs" and relationships built by and with NSFRC staff. One member, a Hope Navigator from the Florida Department of Children and Families, spoke of how the quality of the collaborative relationship with staff and the identification of need of neighborhood families has led to an exploration of efforts to set up a satellite office at NSFRC as (it was noted) "...this is where the action is, right here." Such an endeavor would allow NSFRC to provide immediate/timely resources and supports to families in crisis with emergency needs, with Hope Florida⁵ working to provide more long-term planning to aid families.

The characterization of the NSFRC as a "caring" and "safe" place to be, was reinforced by statements of one community ambassador that spoke affectionately (at one point with tears in her eyes) of how helpful the resources and staff have been for her and her family, including her son with special needs. The community ambassador noted that should she meet another person in the neighborhood or broader community that is in a position like her, she "gives them the contact information for NorthStar." Here, the friendliness and empathetic disposition of staff are seen as foundations to the development of relationships that are supportive of families.

Given the above observations by the SFSA team, consensus exists that support and activities are implemented with clear fidelity to the CSSP model as such relates to how: parents are encouraged to

⁵ Hope Florida — A Pathway to Prosperity is a recent program developed by the Florida Department of Children and Families meant to provide individualized assistance (via advocacy, strategic planning, and goal-focused initiatives/action) to individuals and families in need in an effort to promote a "...path to prosperity, economic self-sufficiency and hope by focusing on community collaboration between the private sector, faith-based community, nonprofits and government entities to break down traditional community silos, in an effort to maximize resources and uncover opportunities." See https://www.myflfamilies.com/APathwaytoProsperity/ for more details.

turn to staff in the event of a crisis, staff proactively respond to signs of parent or family distress, and staff and the program support families experiencing extreme difficulties or crises.

...consensus exists that support 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 staff and the program support 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 NSFRC:

- 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 program has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.
- 4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.

- 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.

Table 1: How Does NorthStar Family Resource Center Respond Immediately When Families are in Crisis?	Team Score (Weighted Average)
1.1 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.	4.38
4.1.2 Materials regularly provided to participating families.	4.38
4.1.3 Information on which staff members can help families with particular issues.	4.25
1.2 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.	4.38
4.2.2 Offering to connect families to resources, including help lines, community resources or public agencies.	4.38
4.2.3 Making space available for staff to meet with parents privately.	4.38
4.2.4 Ensuring that parents can talk with staff members with whom they are the most comfortable.	4.43
4.2.5 Being sensitive and responsive to the impact of family stress on children.	4.43
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).	4.43
1.3 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.	4.50
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.	4.50
4.3.3 The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.	4.25
4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.	4.00
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.	4.38
4.3.6 Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.	4.57

How Does NorthStar Family Resource Center Provide Information and Connections to Services in the Community?

Table 2 highlights a series of items associated with NSFRC 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 on all items 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.
- 4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.
- 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.

Collectively, the team agreed that staff at NSFRC are proactive in responding to patrons and their families in times of stress and resourceful in their efforts to connect patrons to other community supports that can provide specific services (as highlighted in Item 4.5). This assessment led to a broader discussion of ongoing community needs and the impact of available resources regarding NSFRC's ability to directly respond to select needs.

Food insecurity has reportedly been, and continues to be, an issue of concern for many families within the neighborhoods served by NSFRC. Although NSFRC has made efforts to address this need (see below) with collaborative partners, they do not yet have, but are wanting to install a food pantry. Food requests are common among patrons, especially following the peak impact of COVID-19 upon the community. By way of explanation, it was reported that the availability of COVID-19 relief funds allowed several groups (including local churches, etc.) to provide food distribution to needy families. With the reduction of relief funds, these organizations have ceased food assistance efforts.

> Food insecurity reportedly has been, and continues to be, an issue of concern for many families within the neighborhoods served by NSFRC.

With limited resources to address these needs, NSFRC has made efforts to partner with other community resources to address food insecurity. In 2021 food was not a prominent concrete support, serving only 13 individuals directly because food supports relied on sporadic donations. In February 2022 NSFRC secured support from Panera Bread (a restaurant) that provides day old bread and pastries every Tuesday to patrons. Since the start of this program, there have been 2071 uses of this service. Further, the NSFRC Manager has engaged in discussions with Catholic Charites and Farm Share⁶ about setting up a regular distribution of food to families through NSFRC. However, Farm Share does not travel to Lake City, so food would need to be picked up in Jacksonville (approximately 60 miles away) and delivered to NSFRC in Lake City. The food bank used by the three Gainesville FRCs (in Alachua County)

⁶ Farm Share is a food bank based in Jacksonville (approximately 60 miles from Lake City in Duval County) that works with Florida farms to distribute fresh and non-perishable food to individuals and families in need. For more information regarding Farm Share, see: <u>https://www.farmshare.org/</u>

does not serve Lake City (Columbia County). The Manager has also reached out to local farmers that have allowed NorthStar staff, volunteers, and local youth (engaged with NSFRCs Youth Advisory Council activities) to visit their farms to collect (for distribution to local households) residual food/produce not sold/used by the farm. One major barrier impacting the likelihood of formal food distribution activities is the lack of space to store food, including no refrigerator to hold select perishable items The Richardson Community Center (located physically next to NSFRC) has a refrigerator and a cafeteria area but NSFRC doesn't use this area because Richardson Community Center rents out the space for events and it could cause confusion with those who paid to use the space. The Northside Church of Christ (a local congregation located less than a mile from NSFRC) has indicated a willingness to share refrigerator space for NSFRC functions/events. If food distribution is not feasible as a daily support, the FRC Manager thinks (and team members agree) having select food distribution days is important for families served by NSFRC. Should efforts at NSFRC mirror existing food distribution activities at the Gainesville FRCs, a partnership with a food bank needs to be established, food is delivered to each FRC on pre-determined days, patrons sign up in advance (knowing the scheduled distribution days) to receive food at a designated day and time, a large number of volunteers is needed to separate, organize, and pack food (a 3 to 4 hour task) for distribution to patrons and their families. The above noted discussion led to the development of this recommended action item:

> Action Item #1: Continue efforts at securing an on-site food pantry at NSFRC and explore the feasibility of facilitating regular food distribution to families while ensuring there is support (community, food, volunteers, etc.) to implement food distribution in an efficient manner.

Table 2: How Does NorthStar Family 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.	4.50
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.	4.38
4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.	4.00
4.4.4 Being sensitive and responsive to the impact of family stress on children.	4.25
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.	4.29
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.	4.50
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	4.50
4.6 The program actively builds collaborative links with other service providers by:	
4.6.1 Bringing services on site, when possible.	4.25
4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.	4.25
4.6.3 Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.	4.25
4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.	4.25
4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.	4.43

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

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.

4.5 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.
- 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.

Information regarding access to concrete supports in the community is frequently requested of NSFRC staff and of its collaborative partners. These supports are augmented by efforts of the Office of Economic Self-Sufficiency (with the Florida Department of Children and Families), where the local representative (and member of the SFSA team), Ms. Stephanie Harden, is working on the development of an expanded list of services—and networking with individuals and organizations to enhance these services—including concrete supports like food and transportation.

An expanded discussion is needed centered on housing and shelter needs for individuals and families in the neighborhoods served by NSFRC and broader Lake City and Columbia County. Unlike larger regional cities (e.g., Jacksonville and Gainesville) Lake City doesn't have any shelters despite current housing and homeless population needs. One team member noted "...Columbia County doesn't want homeless shelters here..." highlighting a historical perspective within the community that frowns upon the establishment of a permanent homeless/housing shelter for individuals and families. There are select financial supports for obtaining low-income and/or emergency temporary shelter (in rental apartments/properties and at hotels/motels) provided by (for example) the United Way of Suwannee Valley and the Partnership for Strong Families (for families with children only). These supports were praised by the team but are not seen as having a sustained/lasting impact as housing and rent prices have become excessively high for those with limited to no income. A member highlighted knowledge of local apartments exceeding \$1,500 a month, with requirements for first and last month payment and security deposits amounting to almost \$6,000 in costs prior to moving in. Sharp increases in rent are a by-product, in part, of limited to no rent control provisions. Another member noted that "...Columbia [County] is a very political place and there is a network of people trying to minimize these things as a problem." Yet, there are families that "have been thrown in the street because of things that are outside of their control. Their rent went from \$800 to \$1700. That's a problem."

The current rental market is not affordable for many working and low-income families that "...are just trying to make ends meet." With limited low-income housing options, no homeless shelters, and up to a two-year waitlist for low-income housing, housing circumstances are a major source of stress for families in the area served by NSFRC. Circumstances are dire for some homeless families; increasing their risk of being separated. The NSFRC Manager recounted a grandmother (that he was attempting to support through NSFRC) that was the primary caregiver of her grandchildren eventually placed her grandchildren in care while she remained homeless and slept outside. Sometimes homeless parents with children in care, it was reported, may be receiving differential treatment from local community programs and supports due to different definitions of homelessness embraced by separate organizations. For example, the difficulties of a pregnant young mother of two children (in care) were highlighted as short-term emergency housing, and housing deposit supports from select programs were difficult to obtain because she was temporarily residing in a hotel/motel and not considered homeless by select organizations from which concrete supports were being solicited. NorthStar staff worked with local faith organizations to close the gap and provide emergency financial assistance while she was waiting to get into a housing program. She was able to maintain her housing in the hotel and has since moved into a stable rent situation. One member, Mr. Pope, used to work in a local detention center. He recounted how select homeless individuals would intentionally get arrested so they could get in shelter and have food. Although on select cold nights, Lake City has a "cold night shelter," it continues to resist funding a permanent shelter and has taken efforts to clear out any encampments, especially those within public view or near public and/or shopping areas.

> With limited low-income housing options, no homeless shelters, and up to a two-year waitlist for low-income housing, housing circumstances are a major source of stress for families in the area served by NSFRC. Circumstances are dire for some homeless families; increasing their risk of being separated.

The staff at NSFRC have connected patrons to community resources and advocated on their behalf for many of the above identified needs (including housing, etc.). Should patrons have children, these efforts are complimented by a collaborative relationship (as denoted above) with representatives from the DCF Office of Economic Self-Sufficiency. As suggested above, these efforts may not always result in an adequate provision of resources to address select concrete support needs. The lack of community supports can be tragic for some, especially homeless populations dealing with other issues. For example, staff report how NSFRC was a daily refuge for a young woman that was homeless. She visited NSFRC (and the Richardson Community Center on the same property) multiple times a week, would rest in a chair or computer station and request snacks and food during the day, but reportedly slept outside in the evenings due to the lack of a local shelter. Sadly, she died one evening of a reported drug overdose while outdoors near the NSFRC. This death, and stress brought on to others due to housing and homelessness problems, are seen as preventable. Team members highlighted that there are many vacant buildings and properties that could be repurposed for low-income and homeless families and/or

a shelter. Some team members have investigated these options with community leaders and officials with limited success; although one member has recently explored with local clergy the idea of buying vacant land for the location of tiny houses to address low-income housing needs.

Although there were favorable ratings provided to NSFRC with respect to items associated with the provision of concrete supports in times of need—given the quality and level of connections made and advocacy engaged in on behalf of patrons—there was collective concern about the level of community response and advocacy to select individuals and families most in need. One member highlighted that "...Columbia County is a community of people of faith, but that faith is not always demonstrated..."; adding, "...people want to stay in their corners and believe everything is okay. People in Lake City don't want to acknowledge there is a [homelessness and housing] problem and don't want a shelter." Members thought that the community context was such that nothing would happen unless these issues received significant media attention along with a response/support from state representatives. These discussions led to the following action item:

Action Item #2: NorthStar FRC will be more proactive at a community level; perhaps sponsoring/coordinating an event to bring partners together (in a positive and constructive manner) to address the unmet needs of individuals and families adversely impacted by the lack of affordable housing and homelessness issues.

How Does NorthStar Family 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 NSFRC helps families to develop skills they need to identify their needs and connect to supports. Consensus agreement existed for all 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). There seems to be general agreement that NSFRC does a good job in providing concrete supports to its patrons (that it has access to and/or can connect patrons to) and helping families in crisis with concrete supports (provided or advocated for). These assessments were based on first-hand knowledge (especially among the community ambassadors and volunteers) 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.
- 4.7.5 Connecting parents to peer-to-peer navigation support.

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 all 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.

Although there are a limited number of paid staff, these staff and the regular committed volunteers at NSFRC have deep ties to the local community and are committed to a perspective that supports and strengthens local families. Community events, resources permitting, are a preferred method/means of bringing people together to address issues and promote collective advocacy. One example included the *Remembering Richardson High School: A Historical Dedication* event on February 26, 2022. Richardson High School used to be located on the property that the NSFRC and Richardson Community Center are located on. The event was a "...celebration of Richardson High School's official designation as a place of deep social and educational meaning in the African American community in Columbia County, Florida." The event included a ceremonial unveiling of a new monument (as a State of Florida historical site), as well as music, visual storytelling, tributes to classmates and teachers, historical reflections, slide show presentations, and food trucks. It was a well-attended event that brought together residents (individuals, parents, families, and alumni of Richardson High School), community stakeholders and leaders, and collaborative partners. This celebration was seen as a positive experience for all that attended and received local news coverage. The NSFRC assisted in the organization and facilitation of the event, had information resources available to all who attended, and provided additional supports as

needed. This, and other community events are held to engage families within the community to reinforce NSFRC as a support that promotes cohesion within the community by enhancing familiarity and trust among community members.

Within this context patrons are encouraged/empowered to confront barriers to need fulfillment. The team highlighted that there is a need to build upon NSFRC strengths and focus on community-based change, first by building trusting relationships and collaborations with and between parents and community partners. However, it was thought that more formal efforts at community-based advocacy could be done that support families and family leadership in said efforts. It was emphasized that there was a need for advocacy, a "...need to be a voice for change in a positive way." The team agreed and highlighted the value of focusing such efforts on the issue of homelessness and lack of low-income housing within the community served. Given that, it was reported, the United Way Homeless Coalition and the DCF Office of Economic Self-Sufficiency are other organizations interested in these issues, a possible collaboration with these organizations was suggested. Toward this end, the following action item was recommended:

Action Item #3: NSFRC will explore a possible collaboration with the United Way Homeless Coalition and the Florida Department of Children and Families to develop a formal strategy (including short- and long-term plans) for addressing the lack of affordable housing and homelessness issues impacting families in Columbia County.

This collaboration or "task force" could examine factors contributing to the housing problem, including potential impact of gentrification, and lack of resources and supports to assist people with fixing/improving residences and neighborhoods. In the past, the NSFRC Manager served as the chair of a housing committee in Jacksonville, Florida. He has some experience working with these issues and suggested that NSFRC help organize a housing summit for Columbia County (perhaps as an activity linked to Action Item #3). It was suggested that youth who are part of the Youth Leadership Council, developed through the Community Collaborations to Strengthen and Preserve Families Grant, be involved in these initiatives (associated with Action Item #3) as they have shown a past interest in advocacy work for the community.

...there is a need to build upon NSFRC strengths and focus on community-based change, first by building trusting relationships and collaborations with and between parents and community partners...more formal efforts at community-based advocacy could be done that supported families and family leadership in said efforts.

Table 3: How Does NorthStar Family Resource Center Help Families to Develop Skills They Need	Team Score
to Identify their Needs and Connect to Supports?	(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.	4.25
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.	4.38
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.	4.00
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.	4.25
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.	4.00
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).	4.13
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).	4.25
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.	4.38
4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).	4.25

Apart from issues related to the lack of affordable housing, NSFRC staff and some team members highlighted that an area for improvement or focus of future services and supports should address enhancing computer and technology skills of select patrons, especially seniors. It was reported that there are many patrons who make use of the computers/workstations at the NSFRC (there are 10 computers/laptops patrons can use) that require assistance in navigating resources online. To promote self-sufficiency in these areas, it was suggested that the provision of technology classes including basic computer and phone usage classes would be a good asset for NSFRC. These efforts could be done in collaboration with the Columbia County Public Library (for which a team member, Katrina Evans, is a representative) as they already have an established curriculum for computer basics, internet browsing, and Microsoft Office software. In the past, the local police department has done community presentations on internet safety, security, and avoiding online scams. Similar presentations for participants in any technology classes at NSFRC would be a benefit. These considerations led to the following action item:

Action Item #4: NSFRC will explore, in collaboration with the Columbia County Public Library, the possibility of implementing computer and technology classes on site.

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)⁷ 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 39 (of a possible score of 39) or 100%, 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 NSFRC SFSA Team are appropriately targeted to enhance the fidelity score of provided supports and services addressing concrete supports in times of need.

> ...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.

⁷ 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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

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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/

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.

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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 selfassessment 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
- <u>Social Connections</u>
- Knowledge of Parenting and Child Development
- <u>Concrete Support in Times of Need</u>
- 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 <u>www.mosaic-network.com/gemslive/cssp/</u>. 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.

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

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 How do programs demonstrat		45	Stonely at	hee .	. Heither 28	Disagree	Stonely dis	aste thirteane Comments	
	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 visits are unexpected.								



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?										
				_	_		_	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		- 55	HUNEW ASTREE	e 3: Heitler ?	2: 11:58 19. 1	s Joneth Hisastee Not Application	je 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.						
	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.						
	1.5.6 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.						
	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.						



PARENTAL RESILIENCE: SELF	-ASSESSMENT ITEMS		diee	Neither aster	or tissues	after a
How do programs honor each culture, history and approach		5: Ston	A: Agree 3	Neither 28	artises asses 1. stonely i	2.84°
1.6 Program staff ensure that all families, regardless of family structure; socio- economic, racial, religious,	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
of family structure; socio-	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.					
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 State about the about the approace different and exp the chill ment, at incorpotion activitie 1.6.3 Fishils, ta childrent beliefs. 1.6.4 State extended parentin beliefs. 1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are: 1.7.1 The the lange community appropriate.	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.					



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS	/	all all a	et at	let tee	allydisc	licable
How do programs demonstrat	te that parents are valued?	44 14:-	HONEY 28500	A: Neither	Disab	Strone Not P	aphicanse .
				3		~	Comments
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	1.8.1 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:	1.8.2 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:	1.9.1 Building a staff that reflects the community and families served.						
Taninies it serves by.	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 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.						



How do programs encourage parents to manage stress effectively?

PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	43. 43.	Unev alles	3. Neither 25th	a ton tradies	Net Holeseee	
					//	Co	mments
 proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, military other family crises Changes or fluctuations in a challenging behavior, fearful 	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 through:	 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 or participate in other parent-only activities. 						



PARENTAL RESILIENCE: SELF- low do programs encourage	ASSESSMENT ITEMS parents to manage stress effectively?	5	Strongly 25	Jee Maree	Neither 28	e nordisati	Stongly dis	Autoricate Autoricate Comments
1.13 Staff know how to re- spond appropriately to family crises that come to their at- tention. 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	5	Storey age	e glee	heither age	ise nor disset	se strongly dis	and the second s
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.							
	1.14.2 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	Stoney art	ee helee 3.	Heine age	In tisatee	NOT POPER PROPERTY OF THE POPERTY OF	ji [®] 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.							



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	rents as decision-makers and help		Stoney as	e e	Neither 285	e por disast	stonely dif	38688 J. Hupitcane
build decision-making and le	adership skills?	5	Stru. A:	Agree 3	Nett. 2	Disa. 1	SHO. N	1 APT
								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.							
	1.16.2 Parents are informed about the confidentiality policy and what it means to them.							
	1.16.3 Parents participate in the screen- ing 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.							
	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.							
	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.							
	1.17.2 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 involve- ment and leadership.							
	1.17.4 Are updated regularly.							



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS		all ^{ee}	3. Neither 250	e nor disagre	e iis ^a t	988 - 198
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	43- 43-	Intel ages	3: Neither 25	Jisagree	stongly disas	AND COMP.
							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.						
	1.18.4 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	1.19.1 Providing opportunities for families to volunteer and contribute to the program.						
and decision-makers by:	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.						
	1.19.4 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 How do programs support pa build decision-making and le	rents as decision-makers and help	43.	HUNEY AFFE	8 3. Heiling 2	8188 PUT 15-865 2: D5-8688	EE SIMPLY OF	sages Lethnicale Comments
1.20 The program promotes participation in activities by:	1.20.1 Addressing topics, issues and skills that families identify as important to them.						
	1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).						
	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.						
	1.21.3 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:	1.22.1 Hosting or linking parents to com- munity 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS					nordisat	je ^e	11 ²⁸
How do programs help parents understand how to buffer their child during stressful times?	45	Strongly 2	tie Agree 3	. Neither age	.Disaglee	Stoney di	
							Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.							
 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 							
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.							



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

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections?		5	Strongy ar	Lee Ages	Heither 25te	e nor disage	strongly dis	astre .
								Comments
2.1 Families have access to a construction of the second s	omfortable space where they can meet							
2.2 The program provides opportunities for families with similar interests, chil- dren's ages and/or circum- stances (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).							
	2.2.2 Through parent mentoring and matching for one-on-one support.							
	2.2.3 Informally, by introducing parents to one another.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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ow do programs help familie se social connections?	es value, build, sustain and	5.	SHOREW 28	Agree 3.	Heither 28:	Jisagree	Stongly dis	asto Lehnicale
								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.							
	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.							
	2.3.6 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.							
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.							
2.4 The program encourages positive relationships between families and taff members by planning informal social events where staff can interact with amilies.								
	cts families to resources to strengthen , healthy marriage skills, communication skills,							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections? 2.6 Program staff encourage 2.6.1 Calling, sending notes or making			Stoney ar	BEE 3:	Heither Self	e nordisast	stone with	astres A. A. Phylicans Comments
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.							
	2.6.2 Connecting with them on social media platforms through program pages or groups.							
	2.6.3 Offering support with transportation, child care or other barriers to participation.							
	2.6.4 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.							
	isolation or reluctance to participate can ue to differences in race, language, culture, tation, ability, etc.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs create an i			strongly as	heree 3:	Heither 251	e nordisagi	se Stongly dis	estes c. supicals	
1 0		45.	St A	Ne S	2		S. No		
2.8 The program and its staff model positive social skills and community building 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. 							Comments	
	 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:	 2.9.1 Modeling inclusive behavior among the staff. 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. 2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing a background of the folderbackground of the provided of the provide								
	 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. 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. 								

2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs facilitate m		5	Strongly age	Alles 3:	Heither agree	e nor disagree	se storey his	
		1						Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms nysitting co-ops, play groups, social media an communicate with one another).							
2.12 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:	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.							
the immediate neighborhood or le	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	staff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	ith issues of concern to the community and are nunity 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).								
	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.

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5: Strongly agree

A: Agree

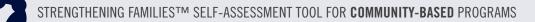
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Not Applicable

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs model developmentally appropriate interactions with children?

					Comments
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.				
	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 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.				
3.3 Physical discipline (i.e., spa by staff or parents.	nking or hitting) is not allowed in the program				

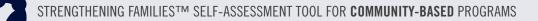


KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		5:5H	AT PRES	481118 28188 1 2:11	1: 510 84	aster A heriticalité Comments
3.4 When staff talk with parents about discipline, they:	3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.					
	3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.					
	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.					
	3.4.6 Recognize different parental and cul- tural 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.					



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

KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		1 25	le ⁸	215	se nor disast Disastee	Storey dis	astree at the
How do programs provide in parenting and child develop		5	Strongly 29	Astee 3.	Neither 2	Disagree	Strongly N	aste
								Comments
	s are offered as one among several strategies for f 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.							
	3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	3.6.4 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.							
	3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	3.6.7 Child care is offered while parents are in classes.							
	3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
3.7 Information is provided to p to expect of their children at eac	barents on stages of child development and what the stage.							



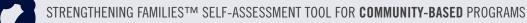
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How do programs provide info on parenting and child develo		5	Strongly ar	heree 3	Neither 2	Disagree	Stoney di	aster and a second seco	
		(Ĺ		ĺ	Ĺ	Comments	
3.8 Parenting information and materials used by the program are culturally and	3.8.1 Are available in the language spoken by program families.								
linguistically appropriate, and:	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.								
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.								
	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	3.9.4 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.								
	3.9.6 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	3.10.1 Parent education groups (including fatherhood groups).								
different ways of parenting, such as:	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.								



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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	5	Stonely as	, heree 3:	Neither 25th	e nor disaet	se Strongly dif	ages Lennicans		
to the needs of parents in differen • Different parenting styles of r • Needs and concerns of first t • Needs of parents who are pa • Noncustodial parents	nothers and fathers and the strengths of each ime parents							Comments	
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.								
 the program provides opportuniti Prenatal and infant health an The birth process and what t The needs of postnatal wome The developing role of first tin if appropriate) 	d development o expect								

XNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS low do programs encourage explore parenting issues and	parents to observe, ask questions,	5	Stoney 25	ee , heree 3	Heimer 28	bisages	se strongly disso	Asee hepitcale
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.							
	3.14.2 Different parenting practices.							
	3.14.3 Parent/child relationships.							
	3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	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.							

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								Comments
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.							
	3.15.2 Being sensitive to parents' frustra- tion, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.							
	3.15.3 Supporting parents in understand- ing appropriate developmental expectations for their children with special needs.							
	3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.							
	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.							



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



					Comments
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.				
	3.16.2 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.				
	3.16.6 Signals that development may not be on track.				
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.				
	3.17.2 Sharing something positive with parents about their children's behavior and development.				
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.				
Denavior by.	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.				



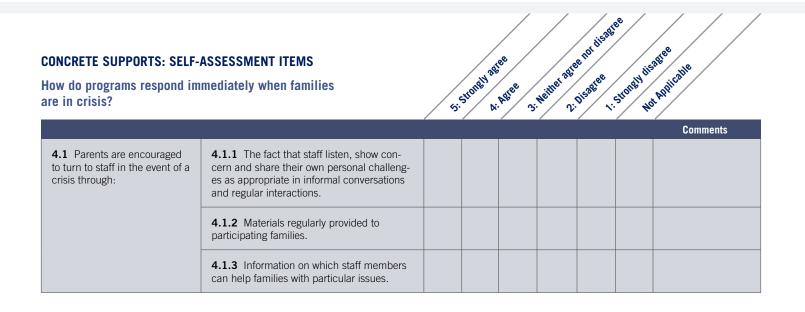
CONCRETE SUPPORT IN TIMES OF NEED

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.





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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		agre	,e	ate	enu	dis	agreete	
How do programs respond im are in crisis?	mediately when families	5	Stronghy 2818	Allee 3:	Neither 2:	Disagree 1:	Stonely dis	ASIE CAPICABLE	
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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 experi- encing 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.								
	4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.								
	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.								



4.4 Staff proactively respond

to signs of parent or family

distress by:

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

help.



	resources, including help lines, community resources or public agencies.				
	4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.				
	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.				
0	hare information about community resources s, play lots, family activities), as well as more				
 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 					



CONCRETE SUPPORTS: SELF How do programs provide inf services in the community?	5	Stonely as	Pares 3. W	2:11:2:15:25 ¹⁰	1:500000 HO	Applicable	
					· · · · ·		Comments
4.6 The program actively builds collaborative links with	4.6.1 Bringing services on site, when possible.						
other service providers by:	4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.						
	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.						



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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS				Heither agree	a nor disager	5 ⁰	stee	
	How do programs help families to develop skills they need to identify their needs and connect to supports?			e Astee 3:	Neither 2910	JISABIER 1.	Strongly dis	Applicable	
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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.								
	4.7.5 Connecting parents to peer-to-peer navigation support.								
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.								
port family feadership of.	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).								



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 How do programs help parents foster their child's social emotional development?			Stimely age	e stee 3.	setter agree	In disaffee	unely disastree Hot hot hot	
								Comments
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.								



OCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: ELF-ASSESSMENT ITEMS ow do programs model nurturing care to children?			Watter	2 3: Heither?	Seles Int disas	see stoney dist	Bee calle
ow do programs model nurt	uring care to children?	13 ⁻¹³	Intel 28100	e 3: Neither	2: Disable	Strong. Not	huitalle
							Comments
ELF-ASSESSMENT ITEMS	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.						

OCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: ELF-ASSESSMENT ITEMS ow do programs model nurturing care to children?			101611 28788	3: Heller after 1	an disselfee	astee A philicale Comments
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.					
	5.5.2 Recognizing behavioral/emotional problems or developmental delays.					
	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.					
	5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.					
	5.5.6 Promoting positive relationships among children living in the same household.					
	5.5.7 Promoting positive relationships among children living in the same household.					
	5.5.8 Understanding how mental health and wellness affects family relationships and the developmental process of young children.					
	5.5.9 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.					
5.6 Families are invited to observe their children interacting with other children and/or staff in the program.						



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs include chi development activities in pro	Idren's social and emotional	45 ^{, 63}	IINEW AFEE	3: Heitter all	. D598 00 1. 5100	A disaste Not the case
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).					
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.					

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	low do programs help children develop a positive cultural dentity and learn to interact in a diverse society?		Strongly age	Agree 3	Neither 25	Disagree	Stongly di	Applicable	
								Comment	s
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.								
5.10 Staff receive training on how cultural differences affect social and emotional development, especially	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.								
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, languag-	5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.								
es 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.								
respectful of differences in paren	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.								
5.14 Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.								

SOCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: SELF-ASSESSMENT ITEMS How do programs respond proactively when social or emotional development needs extra support?			STOREN 25	, heree 3:	Neither aste	e not isse	Stonely dis	Applicable Comments
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.							
	5.15.2 Arranging for appropriate screenings and assessments.							
	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.							



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 RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

		5:STORY		out disaster	
HOW DO PROGRAMS RESPON Or neglect?	HOW DO PROGRAMS RESPOND TO POSSIBLE CHILD ABUSE OR NEGLECT?			2.155858 1.510	ety issues hot halicable
					Comments
6.1 When children enter the program, staff discuss child abuse and neglect prevention with all parents and caretak-	6.1.1 The program's policies and practices that are designed to keep children safe from harm.				
ers. This discussion includes explanations of:	6.1.2 Staff members' responsibility as man- datory child abuse and neglect reporters.				
	6.1.3 How the state defines child abuse and neglect.				
	6.1.4 The program's protocols regarding child abuse and neglect reports.				
6.2 All staff members are trained abuse reporting laws.	d according to their state's mandatory child				
6.3 Staff receive additional training on child abuse and neglect including:	6.3.1 Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.				
	6.3.2 Following the program's protocols for reporting child abuse and neglect.				
	6.3.3 Understanding how cases are generally handled by the child protective services agency once a report is made.				
	6.3.4 The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.				
	6.3.5 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**?

HOW DO PROGRAMS RESPON Dr Neglect?	D TO POSSIBLE CHILD ABUSE	6	Stoney as	ABLES 3:	Heiline ages 1	or disaster	bisages Not heritable Comment	s
6.4 The program's protocols for reporting possible child abuse and neglect:	6.4.1 Are consistent with state child welfare reporting guidelines.							
	6.4.2 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	6.5.1 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:	6.5.2 Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.							
	6.5.3 Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.							
	6.5.4 Striving to be calm, caring and supportive of the family during the reporting process.							
	6.5.5 Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.							
	6.5.6 Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.							
6.6 If a child is placed into child welfare custody, staff are trained to continue to support	6.6.1 Maintaining contact with the child and family, if possible.							
the child and the family by:	6.6.2 Advocating for the family with the Child Protective Services system, when possible.							
	6.6.3 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 healthy development by:	6.7.1 Helping to maintain stability for children involved in the system.				
	6.7.2 Engaging in co-case management practices, if possible.				
	6.7.3 Conducting joint home visits.				
	6.7.4 Attending Child Protective Services meetings to share information.				

Appendix B

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



NorthStar FRC-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.

What 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
- O Direct Service Staff and/or Volunteer
- () Community Collaborator/Partner that Works with Resource Center



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:

	Strongly agree	Agree	Neither 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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.1.2 Materials regularly provided to participating families.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
4.1.3 Information on which staff members can help families with	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
particular issues. Comments						J

			Neither agree			
	Strongly agree	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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.2.2 Offering to connect families to resources, including help lines, community resources or public agencies.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	ϕ
Comments						
4.2.3 Making space available for staff to meet with parents privately.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.2.4 Ensuring that parents can talk with staff members with whom they are the most comfortable.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
$4.2.5\;$ Being sensitive and responsive to the impact of family stress on children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						

amily reaches out to the family proactively.		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/#
3.2 If the family wants assistance, staff members, including upervisors or a staff team, work with the family to help them anage the crisis. Image the crisis. anaments Image the crisis. 3.3 The programs has resources for family assistance, such as iapers, transportation, a safe sleeping environment or even mergency funds. Image the crisis. 3.3 The programs has resources for family assistance, such as iapers, transportation, a safe sleeping environment or even mergency funds. Image the crisis. 3.4 The program has flexible hours of operation to accommodate amilies outside of regular business hours. Image the crisis. .3.3 The program has flexible hours of operation to accommodate amilies outside of regular business hours. Image the crisis. .3.4 The program has flexible hours of operation to accommodate amilies outside of regular business hours. Image the crisis hours. .3.5 If the family agrees, staff connect the family to resources utside the program that can help them, such as medical or mental ealth specialists, or services such as respite care or emergency risis services. Image the crisis accomments .3.6 Staff continue to offer support to the family and monitor the tratation daily until the situation is manageable. Image the crisis manageable.	4.3.1 At least one staff member with a close relationship with the family reaches out to the family proactively.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
upervisors or a staff team, work with the family to help them	Comments						
upervisors or a staff team, work with the family to help them							
.3.3 The programs has resources for family assistance, such as iapers, transportation, a safe sleeping environment or even mergency funds.	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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
iapers, transportation, a safe sleeping environment or even mergency funds. Comments	Comments						
iapers, transportation, a safe sleeping environment or even mergency funds. Comments							
.3.4 The program has flexible hours of operation to accommodate amilies outside of regular business hours.	4.3.3 The programs has resources for family assistance, such as diapers, transportation, a safe sleeping environment or even emergency funds.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
amilies outside of regular business hours.							
.3.5 If the family agrees, staff connect the family to resources utside the program that can help them, such as medical or mental ealth specialists, or services such as respite care or emergency risis services. Comments .3.6 Staff continue to offer support to the family and monitor the ituation daily until the situation is manageable.	4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left\langle \right\rangle$
utside the program that can help them, such as medical or mental ealth specialists, or services such as respite care or emergency risis services.	Comments						
utside the program that can help them, such as medical or mental ealth specialists, or services such as respite care or emergency risis services.							
.3.6 Staff continue to offer support to the family and monitor the ituation daily until the situation is manageable.	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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
ituation daily until the situation is manageable.	Comments						
ituation daily until the situation is manageable.							
comments	4.3.6 Staff continue to offer support to the family and monitor the situation daily until the situation is manageable.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
	Comments						



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

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
4.4.1 Expressing concern and offering help.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	φ
Comments						
4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
$4.4.4\;$ Being sensitive and responsive to the impact of family stress on children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	φ
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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
Comments						

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.
◯ Strongly agree ◯ Agree ◯ Neither agree nor disagree ◯ Disagree ◯ Strongly disagree
○ Not applicable
Comment
 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
◯ Strongly agree ◯ Agree ◯ Neither agree nor disagree ◯ Disagree ◯ Strongly disagree
○ Not applicable
Comment

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.6.1 Bringing services on site, when possible.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
4.6.3 Coordinating follow-up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Comments						
						1
4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	



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	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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
4.7.3 Encouraging parents to advocate for themselves and their child.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
4.7.5 Connecting parents to peer-to-peer navigation support.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						

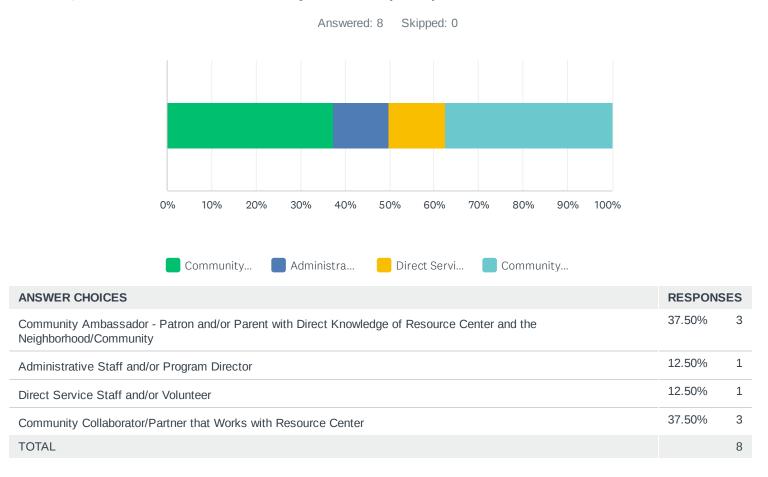
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
4.8.1 Brainstorming with families about what resources would be helpful.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.8.2 Respecting when a family is not comfortable with a specific provider by helping them to either address and resolve the issue or dentify other resources.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Ċ
Comments						
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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms). Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments]	

Appendix C

NorthStar Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— Concrete Support in Times of Need Results

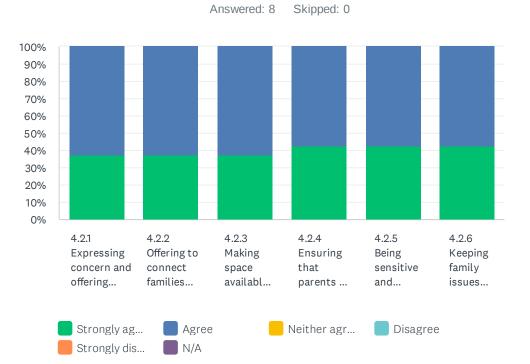
Q1 What best describes your role/perspective as a Team Member?



Q2 4.1 Parents are encouraged to turn to staff in the event of a crisis through:

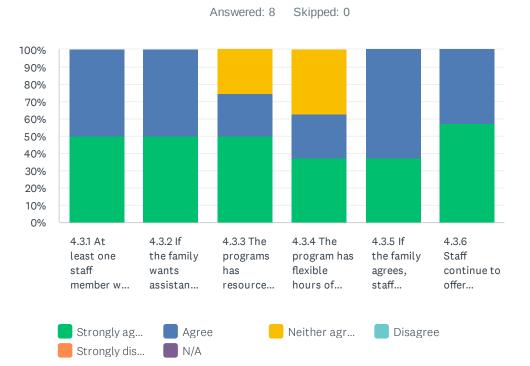
			Answered: 8	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	4.1.1 The fac staff listen.		4.1.2 Mate		4.1.3 Inform on which st			
	Stan listen, concern an their own p Strongly ag	d share personal Agre	participat families.		families wit	in help		
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	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.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.1.2 Materials regularly provided to participating families.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.1.3 Information on which staff members can help families with particular issues.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.25

Q3 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 Expressing concern and offering help in line with the program's philosophy and resources.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00%	8	4.38
4.2.2 Offering to connect families to resources, including help lines, community resources or public agencies.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.2.3 Making space available for staff to meet with parents privately.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.2.4 Ensuring that parents can talk with staff members with whom they are the most comfortable.	42.86% 3	57.14% 4	0.00% 0	0.00% 0	0.00% 0	0.00%	7	4.43
4.2.5 Being sensitive and responsive to the impact of family stress on children.	42.86% 3	57.14% 4	0.00% 0	0.00% 0	0.00% 0	0.00%	7	4.43
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).	42.86% 3	57.14% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	7	4.43

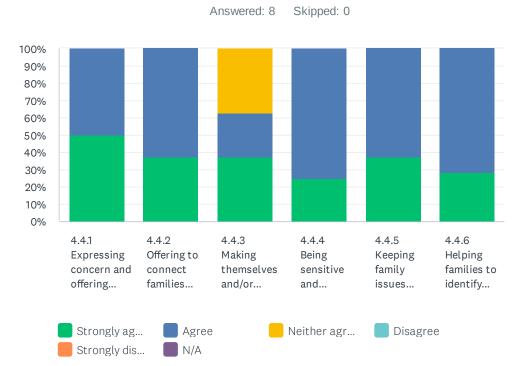
Q4 4.3 When a family is experiencing extreme difficulties or crisis:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.3.1 At leas member with relationship v reaches out t proactively.	a close with the family	50.00% 4	50.00% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.50
4.3.2 If the fa assistance, s members, in supervisors of team, work w to help them crisis.	staff cluding or a staff vith the family	50.00% 4	50.00% 4	0.00% 0	0.00% 0	0.00% 0	0.00%	8	4.50
	r family such as	50.00% 4	25.00% 2	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.25
4.3.4 The pr flexible hours to accommon outside of re- business hou	s of operation date families gular	37.50% 3	25.00% 2	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	4.00
staff connect resources ou program that them, such a mental health or services s	can help as medical or h specialists, such as or emergency	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00%	8	4.38
4.3.6 Staff of offer support and monitor the daily until the manageable.	to the family the situation e situation is	57.14% 4	42.86% 3	0.00%	0.00%	0.00% 0	0.00%	7	4.57
# COMMENTS FOR "4.3.1 AT LEAST ONE STAFF MEMBER WITH A CLOSE RELATIONSHIP WITH THE FAMILY REACHES OUT TO THE FAMILY PROACTIVELY."								DATE	
	There are no r	esponses.							
#	INCLUDING S	For "4.3.2 if t Supervisors Ge the crisis	OR A STAF				Р	DATE	
	There are no r	esponses.							
#		FOR "4.3.3 THE APERS, TRANSI (FUNDS."					,	DATE	
1	We have diap	ers and other pe	rsonal items	. None of the o	ther things men	tioned.		10/17/2022	2 12:17 PM
#		For "4.3.4 The Ate families (го	DATE	

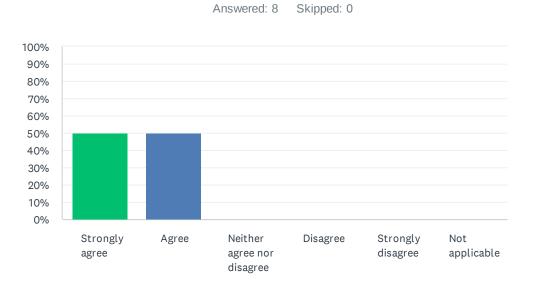
1	I'm unsure how flexible the hours of operation are.	10/20/2022 8:24 AM
2	Manager will make himself available.	10/17/2022 12:17 PM
#	COMMENTS FOR "4.3.5 IF THE FAMILY AGREES, STAFF CONNECT THE FAMILY TO RESOURCES OUTSIDE THE PROGRAM THAT CAN HELP THEM, SUCH AS MEDICAL OR MENTAL HEALTH SPECIALISTS, OR 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.	

Q5 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 Expressing concern and offering help.	50.00% 4	50.00% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.50
4.4.2 Offering to connect families to resources, including help lines, community resources or public agencies.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.	37.50% 3	25.00% 2	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	4.00
4.4.4 Being sensitive and responsive to the impact of family stress on children.	25.00% 2	75.00% 6	0.00% 0	0.00% 0	0.00% 0	0.00%	8	4.25
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).	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	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.	28.57% 2	71.43% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	7	4.29

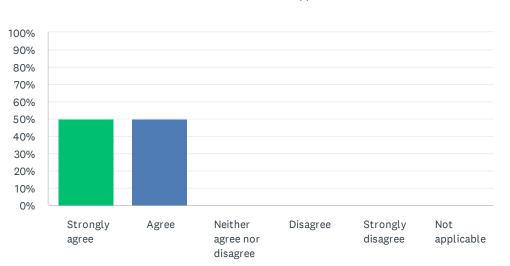
Q6 4.4b Parents are encouraged to share information about community resources (e.g., toy exchanges, resale shops, play lots, family activities), as well as more formal services.



ANSWER CHOICES		RESPONSES		
Strongly agree		50.00%		4
Agree		50.00%		4
Neither ag	ree nor disagree	0.00%		0
Disagree		0.00%		0
Strongly disagree		0.00%		0
Not applicable		0.00%		0
TOTAL				8
#	COMMENT		DATE	
	There are no responses.			

90

Q7 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

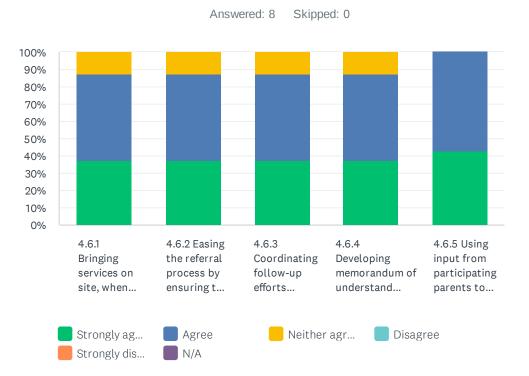


ANSWER CHOICES	RESPONSES	
Strongly agree	50.00%	4
Agree	50.00%	4
Neither agree nor disagree	0.00%	0
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		8

#	COMMENT	DATE
	There are no responses.	

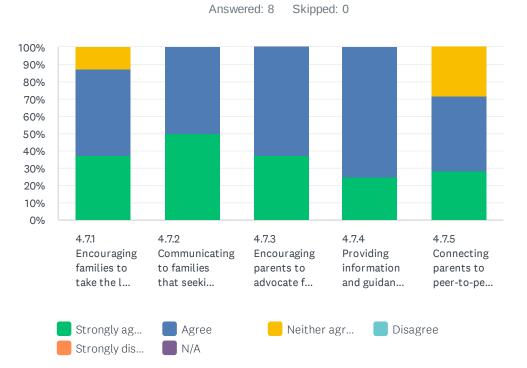
Answered: 8 Skipped: 0

Q8 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 services on site, when possible.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
4.6.3 Coordinating follow- up efforts across service providers, ensuring that the family is involved in service coordination and informed about all communication.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
4.6.4 Developing memorandum of understanding or established processes with partners to coordinate services for families in crisis.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
4.6.5 Using input from participating parents to identify and advocate to fill gaps in the services available to families.	42.86% 3	57.14% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	7	4.43

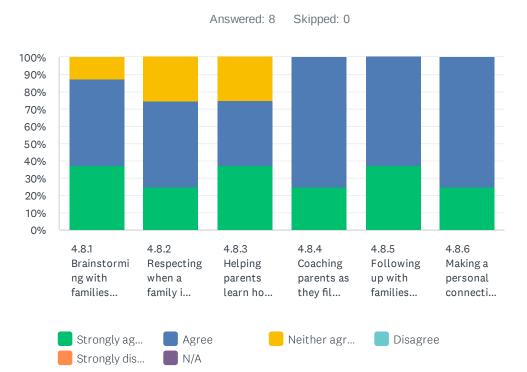
Q9 4.7 Staff help parents to identify and mobilize their own resources to address their families' needs by:



94

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
4.7.1 Encouraging families to take the lead when creating a plan to address family needs, including addressing barriers and anticipated outcomes.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
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.	50.00% 4	50.00% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.50
4.7.3 Encouraging parents to advocate for themselves and their child.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
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.	25.00% 2	75.00% 6	0.00% 0	0.00% 0	0.00% 0	0.00%	8	4.25
4.7.5 Connecting parents to peer-to-peer navigation support.	28.57% 2	42.86% 3	28.57% 2	0.00% 0	0.00% 0	0.00% 0	7	4.00
CREATING	FOR "4.7.1 EN A PLAN TO ADDI PATED OUTCOM	RESS FAM				RIERS	DATE	
There are no	responses.							
AN INDICAT	FOR "4.7.2 CO OR OF WEAKNE JILDING RESILIE	SS OR FAI					DATE	
There are no	responses.							
# COMMENTS AND THEIR	FOR "4.7.3 EN CHILD."	COURAGIN	IG PARENTS T	O ADVOCATE I	FOR THEMSEL	VES	DATE	
There are no	responses.							
THAT THEY	FOR "4.7.4 PR UNDERSTAND T E OF RELEVAN YSTEMS."	HEIR RIGH	ITS IN ACCES	SING SERVICE	S, GAIN		DATE	
There are no	responses.							
# COMMENTS SUPPORT."	FOR "4.7.5 CO	NNECTING	PARENTS TO	PEER-TO-PEE	R NAVIGATION	1	DATE	
1 Not known							10/20/2022	2 8:27 AM

Q10 4.8 When staff make referrals to outside services, they support family 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.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
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.	25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.00
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).	37.50% 3	37.50% 3	25.00% 2	0.00%	0.00% 0	0.00%	8	4.13
4.8.4 Coaching parents as they fill out initial paperwork required to access these services, (e.g., insurance and eligibility forms).	25.00% 2	75.00% 6	0.00% 0	0.00%	0.00% 0	0.00% 0	8	4.25
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.	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
4.8.6 Making a personal connection between families and service providers (if families have agreed to share information through written consent).	25.00% 2	75.00% 6	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.25



The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Parental Resilience

Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator), Robin Perry (Lead Evaluator), Katrina Evans, Stephanie Harden, Keaven Jones, Philip Mobley, Bonnie O'Neal, Allen Pope, Narrie Smith, Patricia Perry, and Toni Spoliansky (NSFRC SFSA Team support)

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.

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Suggested Citation:

Lancaster, C., Perry, R., Evans, K., Harden, S., Jones, K., Mobley, P., O'Neal, B., Pope, A., Smith, N., Perry, P. & Spoliansky, T. (2022). *The NorthStar Family Resource Center (NSFRC) 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 NorthStar Family Resource Center (NSFRC) 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 NSFRC SFSA team with a specific focus on items/measures associated with supporting families by providing parental resilience supports. 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 NorthStar Family Resource Center. Specific strengths associated with providing parental resilience have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

The NorthStar Family Resource Center—History

Partnership for Strong Families (PSF) is 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. PSF 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 Families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

PSF's Family Resource Center Model is built upon a multi-system collaborative focusing on primary and secondary prevention that works toward strengthening families with the goal of preventing child maltreatment and safely reducing entries into foster care. One of the major strengths of the Family Resource Center Model utilized at the five existing sites (which includes the NorthStar Family Resource Center) is its focus on community collaborations as a means of addressing identified needs in the communities being served. There is a strong history of collaboration with each of the existing three Family 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 Family Resource Center reports (for each FRC and PSF), website and social media posts, Family 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 focus 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 Gainesville and Lake City communities who have historically had limited access to family support services.

The first Family Resource Center (FRC) developed by Partnership for Strong Families was the Library Partnership FRC (developed in collaboration with the Alachua County Library District, DCF, and Casey Family Programs), which opened its doors to the community in July 2009. Seeking to build upon the perceived success of PSF's first Family Resource Center, partnerships were established to open a second FRC. The Southwest Advocacy Group (SWAG) was an established entity in the community which works to improve the lives of residents in southwest Gainesville by advocating (to public and private organizations) to increase residents' access to resources, based upon community needs. In collaboration with the Southwest Advocacy Group (SWAG) and Alachua County, the SWAG FRC opened its doors to the community in June 2012 and since then has been providing continuous supports and services to individuals and families. Additionally, in 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, another community with historically limited access to resources. PSF was asked to partner with ACLD to open another co-located site 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. The Cone Park Library Family Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Family Resource Center began operating full-time in May 2014. Though not a part of this evaluation, Tri-County Community Family Resource Center opened its doors in March 2015.

PSF had long known that Columbia County, the area directly north of Alachua County, could benefit from an increased level of intervention to combat a rising number of shelters and incidents of child maltreatment. While the population of the county is relatively low, progressively escalating maltreatment counts in Columbia County started rivaling Alachua's over the past 10 years. PSF perceived a need for the development of a Family Resource Center in Lake City, utilizing their FRC Model and developing a service array specific to the needs of the Lake City community. With the assistance of funding from the Children's Bureau Community Collaborations to Strengthen and Preserve Families grant, Partnership for Strong Families opened their newest Family Resource Center serving the Greater Lake City area in March 2021. Prior to opening, PSF staff, community partners, and community volunteers spent months conducting a community needs assessment to ensure the services and supports offered were what was most needed in the community. A visioning session with community leaders was also conducted in late 2020 to help in the better understanding of the community's needs.

NorthStar Family Resource Center (NSFRC) is co-located on the campus of the Richardson Community Center in the Fergusson Building. This is a central location with plenty of space for community events, programs, and family activities. NSFRC is staffed with a Family Resource Center Manager and a part-time Administrative Assistant, along with the support of community volunteers and commitment of a local Resource Center Advisory Council. The NSFRC offers a variety of no-cost services and supports such as a clothing closet, food distributions, afterschool homework help, community-wide events (e.g., May Day Festivals, Back to School events, COVID-19 Vaccination Drives, Community Health Summits, etc.), job search assistance, and referrals to community partners.

The basis of PSF's FRC model is the Strengthening Families Approach and Protective Factors Framework developed by the Center for the Study of Social Policy (Browne, 2014)¹. 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 FRC. Although there may be some common services and supports across FRCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each FRC. The five protective factors include:

- Parental Resilience
- Concrete Supports in Times of Need
- Knowledge of Parenting and Child Development

¹ Please see: Browne, C.H. (2014). The Strengthening Families Approach and Protective Factors Framework: Branching Out and Reaching Deeper. Washington, D.C.: The Center for the Study of Social Policy.

- Social Connections
- Social and Emotional Competence of Children

This report focuses specifically upon services, supports, and efforts of the NorthStar Family Resource Center to provide patrons and families with Parental Resilience supports. 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 NorthStar Family 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 Parental Resilience supports 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 in assessing the extent to which each of the FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.)². The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family 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 Family Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons 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 following a review of data obtained from the Community Module Data System, which tracks services or participated in utilization trends for individual patrons, with confirmation that they received services or participated in

² See: CSSP (n.d.) Strengthening Families Self-Assessment Tool for Community-Based Programs. Washington. D.C.: Center for the Study of Social Policy. Available at: <u>https://cssp.org/wp-content/uploads/2018/10/COMMUNITY-BASED-PROGRAM-SELF-ASSESSMENT.pdf</u>

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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

activities linked to protective factor and following consultation with NSFRC staff regarding those active in their participation. Unfortunately, one patron was unable to be a member of the team due to personal and parental constraints.

These processes were followed in the establishment of the NSFRC SFSA Team. Composition includes three direct service staff/volunteers (Philip Mobley, Patricia Perry and Narrie Smith), two community collaborators (Katrina Evans and Stephanie Harden) and three community ambassadors (Keaven Jones, Bonnie O'Neal, and Allen Pope). There is a great deal of overlap in roles throughout the team. Ms. Smith and Ms. Harden have also received services as patrons and Mr. Pope and Mr. Jones have also volunteered at the NSFRC. The term "Community Ambassador" was decided by earlier SFSA Teams (affiliated with the Gainesville FRCs) to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) and 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 representing 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 22 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 Does NorthStar Family Resource Center Demonstrate that Parents are Valued? (Items 1.1 to 1.5 and 1.8 to 1.10)

How Does NorthStar Family Resource Center Honor each Family's Race, Language, Culture, History, and Approach to Parenting? (Items 1.6 to 1.7)

How Does NorthStar Family Resource Center Encourage Parents to Manage Stress Effectively? (Items 1.11 to 1.13)

How Does NorthStar Family Resource Center Support Parents as Decision-Makers and Help Build Decision-Making and Leadership Skills? (Items 1.14 to 1.22)

How Does NorthStar Family Resource Center 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 NorthStar Family 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 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 NorthStar Family Resource Center. These strengths were at times noted with expanded discussion 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 orientation meeting of the NSFRC SFSA Team took place on October 6, 2022. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet for two half-day sessions in November, however a third day was added to cover the material. 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 meetings. Meetings that involved the discussion of Parental Resilience supports took place on November 7th and 17th, 2022. The dates and times of meetings were in accordance with preferred times and schedules of all team members and attendees.

The NorthStar FRC Strengthening Families Self-Assessment Team

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



Allen Pope Sr. has visited NorthStar 183 times since first coming in September 2021; much of this time includes regular attendance for the community walk. Allen has also helped with several community events hosted by NorthStar. He has lived in Columbia County since 1973 and graduated from Columbia High before joining the Army. Allen was in the service for three years as a Cannon Crewman then worked at Carlon PVC Pipe Co. He has experience with General Electric as a military policeman in Ocala, FL and as a correctional officer. Allen has been a volunteer coach in Columbia County for 18 years and volunteers at his church, New Bethel AME, in several capacities. Allen is a husband of 22 years to Beverly Pope and father of four biological children and three adopted children. The Popes have fostered over 15 children and provided respite care to other foster families. Mr. Pope shares that he loves the caring and inviting

atmosphere at NorthStar. He is glad that the SFSA team has identified many issues that are lacking in the community and the need for them to be addressed.



Bonnie O'Neal has been coming to NorthStar Family Resource Center since August 2021 as a patron to access services for herself and her family. She was raised in Kissimmee, FL and eventually moved to Lake City, FL in 2019 from Ocala, FL. Bonnie received her Associate of Science degree at Florida Metropolitan University and started schooling to become a medical assistant. Unfortunately, she had to leave the program early to be a caretaker for sick family members. Bonnie is a wife of 28 years to her husband Byron, is a mom to a son and daughter, and loves spending time with her family. She loves everything about NorthStar and was happy to join the SFSA team to be involved and share her experiences.



Keaven Jones is originally from White Springs, FL but has been a part of the Lake City community for 39 years and first started to connect with NorthStar Family Resource Center in May of 2021 as a patron. Keaven works for Career Source Florida Crown as a Workforce Innovation and Opportunity Act (WIOA) supervisor. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market. WIOA also matches employers with the skilled workers they need to compete in the global economy. While he and his two boys are not helping with his mother's yard beautification projects, he is spending time with them and his nieces and nephews at local parks and playgrounds. Keaven loves opportunities that Northstar provides and the support they provide to all cultures. He shares that he "was inspired by the staff and volunteers that I have encountered while attending the

community center" and that "kids that I have met while visiting help to remind me why the future looks so bright."



Dr. Philip Mobley is the NorthStar Family Resource Center Manager and the Senior Minister of the Northside Church of Christ, located in Lake City, FL. He was raised in Lake City but lived for many years in Jacksonville, FL, developing his personal and professional skills. Phil received his Doctoral Degree in Education Leadership from the University of North Florida in 2019, his MBA from Jacksonville University in 2002, and a Bachelor's degree from the University of North Florida in 1975. Dr. Mobley served as a Board Member of the Suwanee Valley United Way and the Community Advisory Board for the Columbia/Hamilton County Health Department. He is currently a member of the Richardson Community Center Advisory Board. Phil is a husband of over 48 years to Lotonia (Toni). They have two children, seven grandsons, and two granddaughters. Phil loves that NorthStar provides services and resources to families to help prevent or

resolve crises and develop strategies to strengthen families. Dr. Mobley shared that he enjoyed hearing everyone's perspective through the Strengthening Families Self-Assessment meetings.



Narragansett "Narrie" Smith, sister of Phil Mobley, has been a longtime patron, supporter, and volunteer of the NorthStar Family Resource Center. She has lived all her life in Lake City, FL. Narrie has a bachelor's degree in Business Administration from the University of North Florida and a master's degree in Educational Leadership from Nova University. After 23 years as a teacher, Narrie became the Principal of Niblack Elementary school, raising their school score from an F to an A. Narrie has served as the Assistant Superintendent of the Columbia County School District and currently sits on the Columbia County School Board. She is a minister and director of Christian Education at New Bethel Missionary Baptist Church. She spends her time volunteering at NorthStar, with Columbia County Schools, and being with family. Narrie is a wife of 47 years to Johnny Smith, mother to two daughters, and proud grandmother of 6. She loves working with

children and models her life around serving God and His people. Narrie was glad to be a part of the SFSA team because it identified areas to grow and improve as a Family Resource Center.



Ms. Patricia A. Perry has been the Administrative Assistant at NorthStar Family Resource Center since before the doors opened to the public in March 2021. She was born and raised in Lake City, FL and has spent much of her life there. Patricia graduated from Columbia High School in 1974 and attended Florida A&M University in Tallahassee and Seattle Central College in Seattle, WA. Starting as a file clerk and working her way up through the Columbia County Clerk of Courts for 30 years, she retired as the Chief Deputy Clerk. Patricia is a wife of 35 years to Nathan Perry Jr. and mother to Joshua Perry. Her church family is a major part of her life, she has been a member of New Bethel Missionary Baptist Church since 1969. Patricia loves that NorthStar makes efforts to help the community in any way possible. She hopes her varied experience and familiarity with the people of Lake City will be a benefit to the community.



Katrina P. Evans, Director of the Columbia County Public Library, has supported the NorthStar Family Resource Center and been a member of the Lake City Resource Center Advisory Council since its inception. She grew up in Lake Placid, FL but has lived in Lake City for more than 25 years. Ms. Evans has a master's degree in Library and Information Studies from Florida State University and a bachelor's degree in literature and history from the University of North Florida. She began her career at the historic Walton-DeFuniak Library and was later hired at Columbia County Public library in 1997. After 19 years of service as Outreach and Youth Services Librarian and Assistant Director, Ms. Evans became the library director in 2016. She has served on the Board of the Northeast Florida Library Information Network and has volunteered in various capacities with the Florida Library Association and Edward Rutledge Chapter, NSDAR. Ms.

Evans has served on local school advisory committees and volunteers with her church. Her husband, Kevin, is a school media specialist at a local elementary school and they have two sons, Drew and Rhys. Katrina joined the SFSA team to learn about local resources that she can take back and share with library staff and patrons. She loves that NorthStar is providing a "one-stop-shop" to our community where people can get assistance with a variety of needs. She shares, "I love that this need is now being met so compassionately by NorthStar Family Resource Center and its amazing staff."



Stephanie Harden began to connect with NorthStar Family Resource Center in January of 2021. Stephanie is a native of Philadelphia, PA, but she has lived in Florida for the last thirteen years, she began working in Lake City last year through a promotion to Hope Navigator II with the Department of Children and Families. Stephanie is working on her master's degree in Strategic Business from Northcentral University and plans to get her doctorate in Theology. She has 30 years of teaching background and over 20 years of customer service experience, along with over 20 years of Ministerial Leadership and Counseling, that she applies to assisting families in need. Stephanie is the business owner/CEO of Loving Arms Services and serves on several boards including the Partnership for Strong Families Children's Partnership Counsel. Stephanie is a wife of 20 years to Pastor Troy Harden, mother of 10 children (blended family), and a grandmother of

17 beautiful grandchildren. In addition to spending time with her family, she reads, loves to thrift store shop, and is completing her first book. Stephanie loves that NorthStar is in a central part of Lake City that needs resources and is working to create a service provision agreement to open a Hope Florida Navigator satellite station at the Family Resource Center. Stephanie was glad to be a part of the SFSA team because there were several wonderful action items to work on. With years of experience in various resource centers Stephanie appreciates the compassion and family atmosphere shown at NorthStar.

Although not formally members of the NSFRC SFSA Team, Dr. Robin Perry (Lead Evaluator) and Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator) attended each of the NSFRC SFSA Team meetings. They, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended these meetings as well, 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 NSFRC. Christen Lancaster is the Community Research Coordinator for the NSFRC, 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 NSFRC. 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 NSFRC to community needs related to supporting families through providing parental resilience supports. 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. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (over three days) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in between meetings.

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 providing Parental Resilience supports. 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.

How Does NorthStar Family Resource Center Demonstrate that Parents are Valued?

Table 1 (see below) provides a detailed summary of the individual items/questions associated with a measure of how the NSFRC demonstrates 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 that the majority of team members thought were not applicable.

Currently, the NSFRC does not provide any onsite activities exclusively targeting this protective factor, though information and referrals are given. This is a by-product of the fact that NSFRC is in its early stage of operation and has targeted (initially) most resources toward the more immediate needs of families associated with concrete supports and social connections, which represented 58.7% and 21.6% of all service requests in 2021. In 2021, approximately 10% (n=163 of 1,646) of all service requests were deemed to focus on the social and emotional development of children/youth. In 2021, 2.79% (n=46 of 1,646) of all service requests at NSFRC were identified to focus on the parental resilience protective factor (Perry, Lancaster, Mobley, Merritt, Spoliansky, & Edelman, 2022). These services were predominantly focused on the provision of individual referrals and linking patrons with collaborative partners on issues associated with job/employment assistance (n=24), health/medical information (n=6), unemployment benefits-assistance (n=4), tutoring for adult (n=3), and GED Classes (n=3) (Perry et al., 2022). Although not a primary focus/classification of most service initiatives, attention to promoting the resilience of parents and families and reducing stress they experience is reportedly integrated into most of the work and engagement with families. Such led to the consensus agreement (reaching an average threshold score of 4.0 or higher) with 19 of the 32 (59%) items/indicators of how NSFRC demonstrates that parents are valued (see Table 1). The team scores (weighted average) cells are colorcoded 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). There were no items/indicators for which there was a disagreement consensus. Please note that the parental resilience protective factor (as classified by the CSSP process) is referred to as "family functioning/resilience" by the PSF Family Resource Centers.

Though specific parental resilience supports were few at NorthStar FRC in 2021, there was great interest by the SFSA team to focus on this protective factor and address this disparity. There was consensus that program staff and volunteers understand the stresses and barriers that parents and families face within the community and are committed in their work to support parents and enhance the well-being of families. The team shared a strong consensus that staff at NorthStar FRC welcome, affirm, and support families and value their role in their children's lives (see team scores for items 1.4.1 through 1.4.6 and 1.9.1 through 1.9.4). There is reportedly great interest in building up parental resilience and lessening parental stressors which are often a by-product of dealing with their children and environmental stresses. Services at NorthStar FRC linked to the provision of concrete supports and promoting social connections also aid with parental resilience; see [Lancaster C. et al. & Perry R. et al., 2022].

> "There was consensus that program staff and volunteers understand the stresses and barriers that parents and families face within the community and are committed in their work to support parents and enhance the well-being of families."

Team members agreed that there are multiple avenues of regular communication with parents but scored in a range for neither agree nor disagree that staff regularly ask parents about observations of their child.

The team highlighted the mutually respectful relationships between program staff, volunteers, and patrons. Dr. Philip Mobley, the FRC Manager has worked with many support groups over the years and shared his perspective on the importance of creating a safe space where people felt they were listened to and could share what they were going through without stigma, express their emotions (and "even cry") with a trustworthy and supporting professional. He noted that he wants to create this type of "shared space" at NorthStar FRC but acknowledged that there are cultural and practical challenges impacting the scope of services and supports that can be provided. Select team members highlighted that there are limitations or resistance to social change within a rural town (that the majority classified Lake City as). Ms. Patricia Perry, NorthStar's administrative assistant (a longtime resident and retired Chief Deputy Clerk after 30 years of serving at the Columbia County Clerk of Courts), noted that NorthStar FRC "…hasn't been around long enough…" to make the kind of differences needed in promoting parental resilience. She shared, and many team members agreed, that many desired outcomes associated with this protective factor will be seen only after "…a long period of time" including sustained efforts and accepted integration of the FRC within the community.

Although it was thought that it may take a while to see the full benefit of NorthStar FRC's efforts at promoting parent and family resilience, staff have begun to build up a sense of trust within the community. Establishing trust with patrons, families, and the broader community, it was asserted, is critical for having any impact on and effecting desired change. NorthStar FRC employs key staff and has recruited noteworthy volunteers that have a history and an established presence within the community, reflecting the community and families NorthStar FRC serves (see consensus agreement on all items associated with 1.9 in Table 1). They are also perceived by SFSA team members as trusted resources and messengers that have mutually respectful relationships with all family members of patrons seeking services (see consensus agreement on items 1.4.1 through 1.4.6 in Table 1). For example, Dr. Mobley and his family have an established history within the community served and are known to many households. Dr. Phil Mobley is a local pastor and community leader in the area and his sister, Narrie Smith—who volunteers regularly at NorthStar FRC—is on the Columbia County School Board and is a Baptist Minister. She also was a past Principal of Niblack Elementary School and served as the Assistant Superintendent of the Columbia County School District. Dr. Mobley and Ms. Smith's father, Lovett "LU"

"Although it was thought that it may take a while to see the full benefit of outcomes of NorthStar FRC's efforts at promoting parent and family resilience, staff have begun to build up a sense of trust within the community. Establishing trust with patrons, families, and the broader community, it was asserted, is critical for having any impact on and effecting desired change." He was also a Baptist Pastor, and a teacher at Richardson High School³. Ms. Patricia, the office assistant is known as a trusted resource in the community because (as noted above) she worked at the Clerk of Court office for 30 years.

Trust is also being built with patrons through respectful and attentive communications with parents and families that receive some resource or support from program staff, volunteers, and collaborative partners. Patrons are greeted upon entry into the FRC and there are efforts at being welcoming and friendly toward all family members (see items 1.3.1 and 1.3.2 in Table 1). Program staff spoke at length about how some parents need "parenting support...[and] real help" given stresses associated with dealing with social, emotional, and behavioral health needs of their children. When these issues are manifested or disclosed to staff, efforts are reportedly made by staff to engage in a supportive manner with parents regarding their and their children's needs. Some parents/caregivers seek friendly advice and support from staff that are responsive in their efforts to discuss child development and parenting matters and to link/refer parents to the resources in the community that can be of assistance. Alternatively, it was reported that challenges exist with efforts made to "...convince some people that they need parenting supports..." when their child is being disruptive, demonstrating poor social skills, and/or engaged in dangerous behavior. It was thought that noteworthy efforts have been made to build a sense of trust with patrons, parents/caregivers, and family members through the development of mutually respectful relationships, listening, and the timely response to identified needs. The timeliness of response and supports is not limited to NorthStar FRC staff. Quality working relationships of program staff with collaborative partners has been a benefit to patrons. For example, on several occasions patrons have come into NorthStar FRC saying they need employment assistance which resulted in an immediate referral to Keaven Jones—a Workforce Innovation and Opportunity Act (WIOA) supervisor with Career Source Florida Crown (and SFSA Team member) — who responded with "I'm on my way." These connections between staff and partners with patrons, parents, and families are a good start to building rapport in the community, and a foundation for continuing efforts at building trust in the future.

> "...noteworthy efforts have been made to build a sense of trust with patrons, parents/caregivers, and family members through the development of mutually respectful relationships, listening, and the timely response to identified needs."

³ Richardson High School (no longer operational) has a notable history/legacy within the community. A State of Florida historical marker honoring Richardson High School was dedicated at a formal ceremony on February 26, 2022, in addition to a community celebration entitled "Remembering Richardson High School," organized by the Richardson High School Roundup Committee and NorthStar Family Resource Center. For more information regarding the historical marker ceremony and community celebration, see Chase, K. (2022). For additional historical information regarding Richardson High School (and other historically Black schools in Florida) see: Clemons, M.O. (2006).

There was one item (of eight) focusing on mutually respectful relationships with family members that scored in a range of neither agree nor disagree:

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.

While many discussions on these sensitive topics reportedly happen on a one-on-one basis with the Family Resource Center manager, one community ambassador shared with the team some ongoing custody struggles with the other parent of their child. The community ambassador noted that "Phil gave advice on not just how to deal with that situation but also how to have certain conversations with [the other parent] and keep the goal of what's best for our son" as the top priority. Though the community ambassador was frustrated and found it difficult to come to talk to someone about such a sensitive subject, it was commented that "seeing a friendly face on the way in helped [the parent] keep taking the steps." Phil not only provided advice but continued to be in conversation with the ambassador/parent and check in on updates to the situation. The community ambassador shared that "it meant the world to me because me being a 39-year-old... and my father has passed, it feels like Phil is one of [my] fathers" who "not only gives me the opportunity to grow but also gives me the direction to make sure the path I'm growing in is one the family can benefit from as well as myself."

"Seeing a friendly face on the way in helped [the parent] keep taking the steps."

As denoted in Table 1, there are seven (of nine) items related to supports for fathers for which the consensus rating was in a range for neither agree nor disagree. These include:

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/males 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 a child's mother, lack of information or a non-custodial relationship with the child.

The team spent considerable time discussing these items and the perceived lack of supports within the broader community (and at the FRC) targeting men, or more specifically, fathers. It was suggested that fathers have unique needs and that there are unique challenges connecting with them. Women and mothers are more likely to come to the center. The 2021 service report for NorthStar FRC shows that 29% more women come into the FRC than men to obtain services (Perry, Lancaster, Mobley, Merritt, Spoliansky, & Edelman, 2022). While the reason for lower male and father presence at NorthStar FRC varies, there were some barriers to participation that came up in discussion. Some of the reasons suggested by team members included fathers' perspective that they do not have enough time given their busy work schedules to seek supports or participate in center events. Some suggestions were made attributing the lack of commitment of fathers in their children's lives to the lack of role models in the fathers' own lives. Finally, push back, conflict, and potential barriers between parents can make it difficult for parents to be involved in their child's lives.

The unique needs of and challenges experienced by single fathers in the community was highlighted. One team member's son is a single father trying to do everything on his own for his infant. He was referred by the team member to the FRC for supports, and connected with Dr. Mobley, who has since been working with the single father one-on-one, developing a plan for obtaining needed supports. The team member acknowledged the value of Dr. Mobley's efforts given his knowledge and experiences, but also given his role as a father and adult male. The member noted that "he needs a support group of other guys who are dealing with this and who can give him insight, I can tell him from my perspective but being a man raising a little girl, that's a whole different story". Here, there was perceived value in engaging fathers in structured activities and with providing opportunities for peer activities, as well as with man-to-man and father-to-father interactions and supports (see Items 1.5.4 and 1.5.5 in Table 1). Select members praised the efforts and the skills of staff, specifically Dr. Mobley, when discussing the needs of fathers. Dr. Mobley was described as a "strong" father and grandfather figure, and a successful community advocate that helps men feel comfortable expressing their feelings. The team wholeheartedly agreed that Dr. Mobley creates a "...no judgement zone" where "you can be yourself and he won't look down on you." Dr. Mobley shares that it's important for conversations with men to be "... organic because men tend to be less open about their feelings and are resistant to sharing what they are going through."

These discussions were thought to identify unmet needs for fathers, and the need for additional parenting supports for mothers and fathers within the community served by NorthStar FRC. The importance of developing program supports for caregivers and parents (mothers and fathers) led to the following action item:

Action Item #1: NorthStar will explore opportunities for structuring caregiver and parenting support groups with topics including parenting issues, education, and father and mother specific groups for engagement and support. Although the above action item highlights the need for parenting supports for both mothers and fathers, the team reiterated (as suggested above) that additional efforts would be needed to engage fathers and that such efforts are valued as some children need and crave meaningful attention and relationships with fathers. One staff member, highlighting the importance of father involvement, recalled the excitement of one homework help student when her father picked her up from the activity instead of her mother (who typically does); she ran to meet her father and left her school folder behind (not typical) while focused on interacting with her father. Other team members shared personal and professional experiences and observations of children and youth that responded similarly (with excitement and delight) when their father showed an interest in them, and they were able to have some "daddy time." However, it was noted that, unfortunately, many children do not have a caring father or father-figure in their lives. This places more care demands on single mothers and may, it was believed, have a potential negative impact upon a child's development. Subsequently, empathizing the importance of fathers in families and within the broader community was identified as a valued focus point for future NorthStar FRC efforts.

"...the team reiterated...that additional efforts would be needed to engage fathers and that such efforts are valued as some children need and crave meaningful attention and relationships with fathers."

Some parents and fathers, team members reported, are simply absent from their children's lives in many respects and/or "don't know how to be parents." Allen Pope, a longtime community ambassador and volunteer at NorthStar, shared his experience with teaching life lessons in the context of sporting events. As a father to natural and adopted children and a caregiver to foster children, he shared concerns on the minds of the younger generations. He highlights the fact that it "...takes time" to try to connect and support the children he comes in contact with and to reinforce values and a perspective that "...the sky's the limit for you;" that there is hope and opportunity if they receive support and make decisions in their own best interests. There was an expanded discussion regarding the worries and peer pressures that youth in the community are dealing with and their need for caring parents, nurturance, and love. Many team members expressed concerns for younger generations being negatively influenced by social media, a lack of positive in-person social connection, cyber bulling, gang activity, and stress experienced in their families and in the community. Team members suggested that a lack of positive adult male involvement in children's lives (along with poor parenting) is a harmful factor that is contributing to (especially for male youth) high school dropout rates, local gang involvement, poor social and conflict resolution skills, and limited prioritization of meaningful future goals (e.g., around school and employment/careers, etc.). One team member spoke of how these concerns were manifested at a recent funeral of a 16-year-old (a victim of gang violence) where friends of the youth actively displayed "gang signs" and were "smoking dope."

In an effort to increase the value of men in their children's lives and address the harmful behavior of children in the community, especially among young men, NorthStar FRC is planning a Boys to Men Summit. When discussing assessment results associated with the Social Connections protective factor, an action item was identified to "Develop an annual summit focused on reclaiming the community's youth and males that include workshops targeted towards parents and young men and feature successful athletes and professionals from this area with the goal of developing mentorship programs and support groups" (Lancaster et al., 2022). This action item has applicability to these discussions. This summit is hoped to be a kick-off event to having more supports and structured activities for adult men and fathers offered at NorthStar FRC and/or in collaboration with other community groups/organizations. Some activities and supports mentioned of potential value included (but were not limited to) father advisory groups, peer/parenting mentoring and support groups, and recreational/team-based activities. It was hoped that any summit activities and eventual supports be non-judgmental, interactive, and "organic" (semi-structured, dynamic/participatory, non-hierarchical, etc.); focused on creating a "safe space" and "...right type of environment..." that makes it "...comfortable for sharing..." because (as one SFSA team member noted) "...men may be less open to talking about what they are going through."

> Dr. Mobley creates a "...no judgement zone" were "you can be yourself and he won't look down on you".

Building parental resilience includes being in close connection with providers that can address parents' needs as they arise. Due to the wide diversity in families' connections, there is a need to strengthen parents and families through provider connections, and staff training. The team had a consensus score in the range of neither agree nor disagree that NorthStar was:

1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families

1.8.2 Coordinating the site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.

There was also a score of neither agree nor disagree for:

1.10 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.

1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.

Group discussion revealed a particular need to connect with non-English speaking parents, both citizens, and refugees. In a recent case, NorthStar FRC staff were visited by a patron who only spoke Spanish and

whom they didn't know how to assist. On that occasion there happened to be another patron in the building who spoke Spanish and was able to assist with translation. Ms. Perry highlighted that some parents seeking supports rely upon their children as translators and that there has been an increase of Hispanic families in the community. Program staff agreed that they are under-resourced in their ability to assist primarily Spanish-speaking families and can benefit from bi-lingual staff and resources. Ms. Katrina Evans, the director of the Columbia County Public library (and SFSA team member) shared that they have full-time staff that speak Spanish that can be called upon as a resource. Additionally, Mr. Jones of Career Sources said they sometimes have bilingual staff who could assist. Ms. Evans additionally shared that the library has tutoring for English as a Second Language, individual tutoring, small groups, conversational classes, and citizenship classes that can all be used by NorthStar FRC patrons. She was also willing to work with NorthStar FRC to have some of these classes/supports on-site at NorthStar FRC if desired.

Though the FRC's informational rack cards are in Spanish there is interest in making sure all event flyers are in English and Spanish. Team members agreed that for engagement of all community members and families, it's important to make sure resource materials are easy for people to read in their primary language. A community provider that was engaged at the last Health Fair who lives in Ft. White has offered his services for any program material translations that need to be done. Toni Spoliansky (Project Director for the *Resource Center Model: Evaluation, Refinement, and Expansion* grant) who attended these meetings suggested connections be made with nearby faith and/or Hispanic congregations in town with non-English speaking parents to help identify specific needs and provide supports. Though there are no current services targeted at immigrants and refugee families, there is an interest in continuing with the efforts already developed to connect with diverse families that resulted in the following action item:

Action Item #2: NorthStar will develop a strategy of engagement to connect with non-English speaking populations by exploring what resources exist for interpretation assistance through local agencies and congregations.

NorthStar FRC is also interested in obtaining more in-house support from collaborative partners. Stephanie Harden, a Hope Navigator with the Office of Economic Self-Sufficiency⁴ (and SFSA team member), expressed an interest in having a remote office at NorthStar because "this is where the action happens." She feels this will help her better connect with possible clients and help her assist patrons in need. This is an ideal co-location of services that will help NorthStar be even more of a "one-stop shop".

https://oppaga.fl.gov/ProgramSummary/ProgramDetail?programNumber=5047

⁴ For more information regarding the Florida Department of Children and Families' Office of Economic Self-Sufficiency (especially its assistance programs and community partner network), please see: https://myflfamilies.com/service-programs/access/overview.shtml

Additional information can be found via the Florida Office of Program Policy Analysis and Government Accountability (OPPAGA) at:

For more detailed information related to the Hope Florida - A Pathway to Prosperity program (that utilizes Hope Navigators), please see: https://www.myflfamilies.com/APathwaytoProsperity/

Dr. Mobley is working with her to develop this as a formal agreement. The goal of having a Hope Florida Navigator on site possibly once a week will allow DCF to come closer to where their clients reside. The services delivered by the Hope Navigator will not change. For the resource center, clients will be oriented to the services and resources provided by the center.

Action Item #3: NorthStar will work on establishing co-location services, as determined appropriate, with DCF/Hope Florida to be provided at the Family Resource Center.

This willingness to connect over time and build stronger networks of support for patrons explains the range of scores as agree/strongly agree for items referring to NorthStar FRC seeking to reflect the community it serves.

Table 1: How Does NorthStar Family 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	4.67
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.	4.11
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	4.44
from families about activities throughout the year.	
1.2.3 Staff regularly ask parents about their observations of their child.	3.88
1.3 All family members are made to feel welcome:	
1.3.1 Someone is available to greet families when they come in.	4.89
1.3.2 Staff are respectful even when family visits are unexpected.	4.67
1.4 Staff develop mutually respectful relationships with all family members by:	4.22
1.4.1 Taking time to get to know family members individually, by name.	4.33
1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.	4.44
1.4.3 Regularly inquiring about what is happening in their lives.	4.22
1.4.4 Providing emotional support and encouragement.	4.33
1.4.5 Sharing appropriate information about themselves.	4.11
1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.	4.11
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	4.22
having children with different partners.	
1.4.8 Using intake forms, applications and surveys that are gender-neutral.	4.13
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	3.88
parenting.	5.00
1.5.2 Providing information specific to fathers/male family members in a special area such as	3.75
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.	3.13
1.5.4 Providing peer activities or services that are man-to-man, father-to- father.	3.50
1.5.5 Engaging male participants to greet other men at program activities.	3.50
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.	3.89
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.	3.78
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.	4.00
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:	
1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse	3.88
families.	
1.8.2 Coordinating site visits at organizations that serve different populations so that staff can learn how to best serve diverse families.	3.63
1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally	
different communication styles.	4.00
1.9 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.	4.33
1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups	4.33
represented in the community served.	4.55
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	4.22
or mono-cultural.	
1.10 The program supports participating immigrant and refugee families by:	
1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique	3.75
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	3.75
immigrant and refugee families.	

How Does NorthStar Family Resource Center Honor each Family's Race, Language, Culture, History, and Approach to Parenting?

Table 2 highlights a series of items associated with NSFRC efforts at disseminating information and providing connections to services and supports related to the provision of parental resilience in a manner that honors each family's race, language, culture, history, and approach to parenting. Among the eight items listed in Table 2, only two did not have a consensus agreement score.

Consensus agreement scores were obtained for the following items:

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 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.

1.6.4 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.

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.

1.7.3 Designed or selected to reflect the culture(s) of the community served.

Dr. Mobley, remarking on the staff's efforts at honoring each family's race, language, culture, history, and approach to parenting, noted that everyone at NorthStar FRC "…works hard to be sensitive to diverse group." This sensitivity translates not just to the patrons but to and among the staff and volunteers as well, asserting that NorthStar FRC staff "are diverse in our thinking" and that they work well together. SFSA team members that have witnessed staff interactions with patrons confirm these

NorthStar FRC staff "are diverse in our thinking, but we work together really well." efforts at inclusion, understanding, and respectfulness extended to patrons across all the diversity elements that are the focus of these assessment items.

NorthStar's rack cards explaining the services available to patrons are intentionally made in two different languages (Spanish and English) and with different photos to show representation for a variety of groups. Phil shares that NorthStar FRC staff work to be respectful and inclusive of all groups and "treat everyone the same."

A current lack of dedicated services/programming around sharing cultural traditions may explain the score of neither agree nor disagree that parents have opportunities to share skills, talents, and cultural traditions with children and other parents (Item 1.6.3). It is hoped that efforts associated with Action Item #2 will address these needs; the success of which was considered likely given that staff reportedly "...respect other cultures...[and] try to be inclusive."

A point of interest for the NorthStar FRC SFSA team was the consensus of neither agree nor disagree rating on 1.7.2:

1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:

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.

The NorthStar FRC does not currently have a Parent Advisory Committee (PAC) which may explain why this item received a team score of neither agree nor disagree. However, there was interest in creating such a committee that could support NorthStar's programming and ensure outreach efforts are culturally relevant and linguistically accessible to all families. Some NorthStar FRC staff have received extensive training on the development and implementation of parent advisory committees. Further, the creation of a PAC is considered a strategic objective of all PSF Family Resource Centers as outlined in PSFs Resource Center Operating Plan (2021). SFSA team members highlighted the potential benefits of having a representative and active PAC. Dr. Mobley shared the value of sharing leadership with members of a PAC that is focused on enhancing the strategic objectives of NorthStar FRC. A PAC can help develop and support/empower parent leaders and get other parents involved to "make this center their center, not our center." One team member, thinking about the process shared that "It is like a PTA for the Family Resource Center" that will promote "ownership" of processes and supports meant to help parents and families in the community. These discussions led to the development of the following action item:

Action Item #4: NorthStar FRC will create a Parent Advisory Council within the next 12 months.

Table 2: How Does NorthStar Family Resource Center Honor each Family's Race, Language, Culture, History, and Approach to Parenting?	Team Score (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	4.35
family decision-making of different cultural and ethnic groups.	4.55
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	4.00
seeks to partner with families in incorporating those features into program activities and	4.00
structure.	
1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and	3.75
other parents.	5.75
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 materials.	4.56
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	4.11
community served.	4.11
1.7.2 Reviewed by a Parent Advisory Committee to ensure that they are culturally relevant and	3.75
linguistically accessible to all families in the program.	3.75
1.7.3 Designed or selected to reflect the culture(s) of the community served.	4.56

How Does NorthStar Family Resource Center Encourage Parents to Manage Stress Effectively? Collectively, consensus agreement was demonstrated for 10 of the 13 items (77%) denoted in Table 3. The number of positive (consensus agreement) ratings was thought to demonstrate that NorthStar FRC generally helps families deal with crises and stress and that NorthStar FRC staff are doing what they can (with available resources) to support parents experiencing stress. Some SFSA team members shared anecdotes regarding personal experiences and observations of the attentive caring attitude of staff and volunteers when dealing with a parent experiencing stress, whether associated with social, economic, caregiver/parenting, etc. factors. One member highlighted a specific circumstance where her son (a single father) received emotional and parenting support from Dr. Mobley that helped her son better manage and alleviate stress.

The helpful and caring attributes of staff documented in early sections of this report, it was held, create a safe environment for parents and patrons to disclose or share with staff what is bothering them at any given time. Sometimes this care requires several friendly connections, building rapport over time, to establish a sense of trust where parents feel comfortable to "...get down to the deeper issues" that are a source of stress. When referring to fatherhood stressors, Dr. Mobley noted that some "...men are dealing with all kinds of emotional scars they have..." including the abandonment of their fathers and perceived failures (personal, career, parenting, etc.) that need to be dealt with, along with a need to "...be affirmed as men."

The environment at NorthStar FRC, it is thought, is perceived as calming and helpful by patrons. One community ambassador shared that "before I leave my house, I'm very stressed, and when I get here (to NorthStar FRC), it's a comfort zone." Though the community ambassador recounted several family dynamics that are very stressful, this person can come to NorthStar where staff are available to talk about circumstances they are experiencing. NorthStar FRC gives them a respite to escape family stressors for a time and access supports that help build up personal resilience.

One community ambassador shared that "before I leave my house, I'm very stressed, and when I get here (to NorthStar FRC), it's a comfort zone."

Although focused on supporting parents, it was noted that a number of the services and supports highlighted within the SFSA tool (see 1.12.2, 1.12.3, and 1.12.5) are not provided due to available resources (e.g., staff, facility, etc.) and the NorthStar FRC's capacities. Some noted activities are not feasible with only one full-time and one part-time staff and a limited number of professional volunteers who provide support to the paid staff and help to bolster services for patrons. Some listed services are more difficult such as a "night out" but others are possible (e.g., an exercise class) given the timeframe/operational hours of NorthStar FRC—Monday through Thursday 9 am-5 pm and Friday 9 am-1 pm.

Subsequently items **1.12.2**, **1.12.3** and **1.12.5** scored in the range of neither agree nor disagree while the others (affiliated with 1.12) had a consensus of agreement.

1.12 The program provides regular opportunities for parents to relieve stress through:

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 to them.

1.12.5 Providing occasional child-care so parents can take a "night out", go shopping or participate in other parent-only activities.

Given resource needs, the SFSA team suggested connecting with local colleges in an effort to recruit students in need of volunteer hours. On March 15th, 2021, NorthStar FRC created a service provision agreement with Florida Gateway College that, in part, outlines providing approved, student volunteers/interns to assist with Family Resource Center activities, including homework help and summer youth camps (Pegram, H., et al., 2022). Florida Gateway College provides affordable, high-quality postsecondary educational opportunities to the community members of North Central Florida.

Dr. Mobley is working on creating an agreement with Saint Leo University as well. The use of interns from universities is limited by the tasks and training they would be assigned to and the specific qualifications of the field supervisor (i.e., NorthStar FRC staff). For example, the use of master's level students (e.g., in social work) that could help with more advanced supports like case management type services would require a supervisor with a master's degree (e.g., in social work from a Council on Social Work accredited institution) and select experience within the field the intern is being trained in. Most intern programs require the supervisor of the intern to have a master's in social work (MSW). Currently, there is no staff member at NSFRC with this credential. We are working with the higher learning institutions to determine the possible work arounds without compromising the fidelity of their program.

The process of becoming a volunteer was reported as a barrier to recruitment. Volunteers are required to complete an extensive application and participate with a Level II Background Screen and a drug screen, with the exception of those individuals who plan to volunteer less than 10 hours in a one-month period. For those volunteers falling within this second category, "Single-Day Volunteer" approval must be signed by the Chief of Clinical and Community Services in advance of volunteering. It is the policy of Partnership for Strong Families (PSF), as a state funded agency, to require criminal history background checks for all employees, volunteers, and interns (Partnership for Strong Families, 2019). Reportedly, many potential volunteers are discouraged by the level of information needed in the large application packet and choose not to apply. One team member shared their frustration with the required background check and subsequent denial to volunteer if there is any documented offense, because "...it keeps a lot of good people from participating [as volunteers]." The team member shared, "I think it's a discredit to our men that we don't allow them to help because of their past... they have a truth that would help these young people." They and other team members agreed that youth need to hear from someone with experience that "...this is not right for you, I'm telling you it's wrong because it messed me up." These processes and protocols for volunteer approval were seen, in part, to be a potential barrier to volunteer engagement and participation from fathers.

One frequent need for volunteer support is during Homework Help, a social and emotional competence protective factor-based afterschool program designed to help students complete their homework before going home to spend time with their family. This event can have upwards of 15 children between first grade and middle school on any given day, and that can be a strain on staff. In addition to addressing specific needs of children, this activity is a "touch point"/opportunity to connect with parents, helping build their resilience. For example, a grandmother recently adopted two 9-year-old boys whom she brought to Homework Help for assistance. She and her husband were "stressed out" because they have these young boys in their home. They want them to succeed, but there were social and behavioral issues (not uncommon developmental and post-adoption issues) they needed support working through. While the children received homework help, Dr. Mobley engaged with the grandmother, sat down with her, and discussed the challenges experienced, parenting expectations and appropriate expectations for the children. Because she had last raised children two generations ago, Dr. Mobley was able to provide context for the boys' behavior and help her learn to better relate to them. There were repeated follow-up conversations with the grandmother to gauge needed supports while the children continued to participate in the Homework Help program.

In any regard, the demonstrated and potential demand for supports and services at NorthStar FRC requires enhancement of recruitment of volunteers. These conversations led to the following action item:

Action Item #5: NorthStar will continue to pursue efforts and expand on collaborations with universities to solidify relationships that lead to interns and volunteers serving a functional role at the Family Resource Center.

As highlighted in Table 3, there was consensus agreement that each of the seven items affiliated with 1.13 were manifested by existing staff. There was no expanded discussion on these individual items as team members highlighted earlier noted comments related to: 1) the level of personal and professional experience and commitment of staff, 2) their professionalism and genuine interest in helping patrons, 3) their connection to the community, 4) their knowledge base, and 5) their willingness and ability to establish trust with patrons and provide services and supports in a non-stigmatized manner, supported the assessment that staff know how to respond appropriately to family crises that come to their attention.

Table 3: How Does NorthStar Family Resource Center 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	4.22				
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.	4.00				
1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.	3.89				
1.12.3 Organizing spa days, exercise classes or other parent-only social activities.	3.75				
1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.	4.11				
1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	3.44				
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.	4.33				
1.13.2 Supporting families' immediate and long-term plans.	4.22				
1.13.3 Talking to families about difficult issues and helping them access additional help.	4.56				
1.13.4 Maintaining confidentiality.	4.78				
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.	4.33				
1.13.6 Understanding trauma and its impact on children and how staff can help.	4.33				
1.13.7 Other community agencies providing specialized services to families and children.	4.11				

How Does NorthStar Family Resource Center Support Parents as Decision-Makers and Help Build Decision-Making and Leadership Skills?

Table 4, shown in two parts below collectively represent agreement with 30 of 41 (73%) possible items, with the remaining 11 items receiving a consensus score of neither agree nor disagree.

All nine items affiliated with the first two indicators (1.14 and 1.15) have a consensus of agreement with the SFSA team. Again, this shows a sense of professionalism and care for all people, both staff and patrons. Staff were reported to receive program support when working with families under stress and were seen as supportive/reinforcing of parental authority when working with families. As noted, consensus agreement scores were obtained for the following:

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.

1.14.2 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.

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/or decisions about their children.

1.15.3 Talking respectfully with parents about how to handle difference 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.

Though NorthStar FRC staff are constantly keeping an eye on the children during Homework Help and provide/refer parents for supports when assistance is needed, there is no official/formal screening process used at the FRC. Without this formal screening, issues are brought up with parents in an organic/informal manner when they drop off or pick up their children. Several instances/examples of these exchanges and efforts of help have been mentioned in this and other SFSA reports thus far. Subsequently, select items affiliated with 1.16 (see Table 4) received a team consensus rating of neither agree nor disagree. These include the following:

1.16 Parents are engaged as partners in developmental screenings or assessments of their child:

1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.

1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.

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 with copies of the plan.

There was a consensus agreement that 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.

1.17.2 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.

There was one score falling in a range for neither agree nor disagree related to parents and staff creating plans together that are updated regularly (1.17.4). As mentioned above there are no formal plans created for families; although NorthStar FRC staff reportedly do work with and follow-up/check in on parents' and children's efforts related to child, parent, and family needs associated with promoting resilience.

Table 4: How Does NorthStar Family Resource Center Support Parents as Decision-Makers and Help Build Decision-Making and Leadership Skills?					
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.	4.25				
1.14.2 Opportunities to process their own emotional reactions with appropriate support.	4.13				
1.14.3 Access to a mental health consultant.	4.00				
1.14.4 Time off if needed.	4.25				
1.15 Staff reinforce parental authority by:					
1.15.1 Respecting parents' directions and/or decisions about their children.	4.50				
1.15.2 Learning about parents' expectations and limits for their children.	4.25				
1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.	4.50				
1.15.4 Understanding the parenting and child behavior norms of the parent's culture.	4.50				
1.15.5 Being careful not to contradict a parent in front of his or her child or other children.	4.63				
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.	4.44				
1.16.2 Parents are informed about the confidentiality policy and what it means to them.	4.22				
1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.	3.89				
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.	4.22				
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.	3.88				
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.	3.88				
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.	4.11				
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.	4.00				
1.17.2 Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.	4.56				
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.	4.67				
1.17.4 Are updated regularly.	3.71				

In the second part of Table 4 there are scores ranging in agreement from neither agree nor disagree for every indicator, although 14 (66.6%) of 21 received team scores that indicated consensus agreement. Among the seven items that received team scores in the neither agree nor disagree range, it was thought these ratings were due to program limitations brought on by few staff/resources, programming yet to be developed (or in the process of development), and the fact that NorthStar FRC is still new in the community.

Three (of five) items received consensus agreement ratings on program efforts to support a parent's personal education and career goals:

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.

As suggested earlier, NorthStar FRC has formal collaborative agreements with local community colleges and universities, and Career Source Florida Crown, structured to assist patrons and parents with promoting/advancing their education and career goals.

Mr. Jones is one of the many resources at Florida Crown where NorthStar can do a "warm" hand-off for patrons to access resources. The summers of 2021 and 2022, NSFRC participated in the Summer Youth Employment program that is a joint effort between Lake City Police Department and Florida Crown. In this program a teenager works 3.5 days a week/ 28 hours for 6 weeks. These young people are supervised and receive a stipend from Florida Crown.

Two items that received consensus neither agree nor disagree ratings associated with supporting a parent's education/career goals include:

1.18 The program supports a parent's personal education and career goals by:

1.18.4 Inviting past program parents and community volunteers to share their educational and career experience with families.

1.18.5 Providing formal and/or informal parenting 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.

Team members spoke of the value (see earlier comments) of facilitating community events and events that utilized speakers, including peers, that have been successful in their life and careers. Although these types of formal gatherings are not regular, there is interest in the exploration of such initiatives, resources permitting. Discussion regarding the provision of formal or informal parenting mentoring opportunities expanded into a broader discussion of parenting education and the best means of facilitating such (including through peer/parent mentoring opportunities). Team members highlighted that it's a "...careful dance" to try and provide education to parents and families without them feeling watched or criticized. Some examples from staff (Dr. Mobley and Ms. Perry) were provided that exemplified the knowledge and skill needs of select parents as such relates to dealing with their children's developmental (including cognitive, social, and emotional) needs, how to appropriately deal

with behavior issues (e.g., discipline, reinforcements, providing a structure for learning, etc.), and a myriad of challenging issues.

The "struggle" for staff, it was suggested, remains how to help parents feel supported but not judged, for fear that a negative reaction to being judged could be stigmatizing, and a disincentive to developing a trusting relationship with others (staff and peers/other parents) from which learning can take place. Ms. Harden shared her experience when working with parents and the need to reassure them that any efforts at help and parenting support do not come with an assessment that they are bad parents. Rather any services provided (in her professional work setting) or referrals for parenting classes or groups are presented as an opportunity for getting support. Action Item 1 listed above was identified to possibly address these needs.

In the meantime, informal support to strengthen parental resilience is reportedly provided on a one-onone basis. For example, in one instance a grandmother from the neighborhood called NorthStar FRC requesting help for her grandchild who arrives at Niblack Elementary School screaming uncontrollably each morning. Dr. Mobley would drive over to the school (one mile away) and talk with the boy in the in the guidance office and get him to calm down in order to return to class. The connection with the grandmother and young child eventually led Dr. Mobley to connect with the child's mother who, it was learned, was desperately in need of specialized care for her child, but she was struggling to complete the paperwork. Realizing the issues, Dr. Mobley said to the mother, "I'm going to sit here with you, and we are going to fill out this paperwork." The level of care and commitment to provide immediate support to a family to stabilize a crisis/stressful situation with the child and help the mother access long-term support, followed by advocacy on her behalf was welcoming, helped establish a trusting relationship with the family, and aided in the mother becoming a more resilient parent.

The following items in Table 4 also represent scores of neither agree nor disagree:

1.19 The program provides opportunities and support for families to serve as leaders and decision-makers by:

1.19.3 Asking families for regular input on programmatic decisions.

1.19.4 Asking families for input into staff hiring and training.

1.20 The program promotes participation in activities by:

1.20.3 Providing childcare during trainings or workshops.

1.21 The program helps to support the continued development of parent leaders by supporting:

1.21.3 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:

1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.

It was thought that all of these could be addressed through the implementation of Action Item 4 (see above) as such relates to the creation of a Parent Advisory Council within the next 12 months; and, Action Item 5, as such relates to continuing efforts to pursue and expand on collaborations with colleges and universities to solidify relationships that lead to interns and volunteers serving a functional role at the Family Resource Center.

Table 4 (Continued): How Does Cone Park Library Resource Center Support Parents as Decision- Makers and Help Build Decision-Making and Leadership Skills?	Team Score (Weighted Average)
1.18 The program supports a parent's personal education and career goals by:	, weruge,
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	4.22
training, job preparation skills).	
1.18.2 Forming partnerships with nearby educational resources, including higher education	4.22
institutions, to support families' learning interests and educational goals.	4.33
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	4.56
career interests.	
1.18.4 Inviting past program parents and community volunteers to share their educational and	3.88
career experiences with families.	5.00
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	3.63
and support for parent leadership development.	
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.	4.44
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	
1.19.3 Asking families for regular input on programmatic decisions.	3.89
1.19.4 Asking families for input into staff hiring and training.	3.63
1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group	4.00
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.	4.33
1.20.2 Designing activities to address interests of different family members (e.g., fathers,	4.44
mothers, other family members).	0.00
1.20.3 Providing child care during trainings or workshops.	3.89
1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise	4.13
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	
	4.38
sharing information of interest to other parents. 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	4.00
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	
community needs and assets.	4.33
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and	
community needs.	4.22
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.	4.00
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national	
level.	3.88

How Does NorthStar Family Resource Center Help Parents Understand How to Buffer Their Child During Stressful Times?

Table 5 shows a consensus of agreement for all items suggesting NorthStar FRC staff are there to help parents buffer their child during stressful times. Again, a willingness and openness to help all patrons, including parents and children is shown through these scores. NorthStar FRC staff work with parents on their own interpersonal issues and give advice in connecting with their children during stressful times.

NorthStar FRC staff's "coaching is great. I'll be honest with you, it's outstanding. I love it."

NorthStar FRC staff are often using one service as an opening to connect at a deeper level with parents in an effort to bolster their resilience. Many of the issues around resilience and stress reduction are very personal and require that patrons have some good-will and trust established with staff. One way these deeper connections are made is through staff paying attention to the signs of stress and distress at all times. As an example, Dr. Mobley shared with one team member —whose son comes to homework help— "I can tell when your son had a bad day because he's quiet." Relaying this observation to the parent helped the parent connect with and better understand his son. The parent shared, in response, "I've picked up on those things, and I remember, okay pay attention to the non-verbal communication as well as verbal communication." This father goes on to say NorthStar FRC staff's "coaching is great. I'll be honest with you, it's outstanding. I love it." This type of depth of connection shows both personal and parenting support through the provision of meaningful advice can be impactful.

Table 5: How Does NorthStar Family Resource Center Help Parents Understand How to Buff Their Child During Stressful Times?	fer Team Score (Weighted Average)
1.23 Staff receive training on talking with parents about helping children in times of family crisis.	4.13
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 buffering children during stressful times	e 4.13
1.25 Parents and staff have access to a mental health consultant who can help them proactively addre the needs of children and other family members during stressful times.	ess 4.00

Fidelity of Parental Resilience 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 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)⁵ 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 68 (of a possible score of 97) or 70%, suggesting that the services and supports associated with the Parental Resilience Protective 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 NSFRC 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 Parental Resilience Protective Factor were implemented with <u>moderate</u> <u>fidelity</u> to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

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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 selfassessment 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
- <u>Concrete Support in Times of Need</u>
- 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 <u>www.mosaic-network.com/gemslive/cssp/</u>. 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.

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

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 How do programs demonstrat		45	Stonely at	hee .	. Heither 28	Disagree	Stonely dis	aste thirteane Comments	
	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 visits are unexpected.								



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS How do programs demonstrate that parents are valued?									
				_	_		_	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 ranny 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-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstra		- 55	HUNEW ASTREE	e 3: Heitler ?	2: 11:58 19. 1	s Joneth Hisastee Not Application	je 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.						
	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.						
	1.5.6 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF	-ASSESSMENT ITEMS		diee	Neither aster	or tissues	after a
How do programs honor each culture, history and approach		5: Ston	A: Agree 3	Neither 28	artises asses 1. stonely i	3.84°
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.					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.					
	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.					
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.					



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How do programs demonstrat	e that parents are valued?	6 15:	Joney ages	es Aeith	0: Disab	Stone	aste land	
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1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	1.8.1 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: 1.9 The program seeks to	1.8.2 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:	1.9.1 Building a staff that reflects the community and families served.							
Taninies it serves by.	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 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.							



How do programs encourage parents to manage stress effectively?

PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	43. 43.	Unev alles	3. Neither 25th	a ton tradies	Net Holeseee	
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 proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, military other family crises Changes or fluctuations in a challenging behavior, fearful 	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 through:	 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 or participate in other parent-only activities. 						



PARENTAL RESILIENCE: SELF- low do programs encourage	ASSESSMENT ITEMS parents to manage stress effectively?	5	Strongly 25	Jee Maree	Neither 28	e nordisati	Stongly dis	Autoricate Autoricate Comments
1.13 Staff know how to re- spond appropriately to family crises that come to their at- tention. Staff receive training and support 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	5	Storey age	e glee	heither age	ise nor disset	se strongly dis	and the second s
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.							
	1.14.2 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	Stoney art	ee hetee 3.	Heine age	In tisatee	NOT POPER PROPERTY OF THE POPERTY OF	ji [®] 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.							



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	rents as decision-makers and help		Stoney as	80	Neither 285	e por disast	stonely dif	38688 J. Hupitcane
build decision-making and le	adership skills?	5	Stru. A:	Agree 3	Nett. 2	Disa. 1	SHO. N	1 APT
								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.							
	1.16.2 Parents are informed about the confidentiality policy and what it means to them.							
	1.16.3 Parents participate in the screen- ing 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.							
	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.							
	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.							
	1.17.2 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 involve- ment and leadership.							
	1.17.4 Are updated regularly.							



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS		all ^{ee}	3. Neither 250	e nor disagre	e iis ^a t	988 - 198
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	43- 43-	Intel ages	3: Neither 25	Jisagree	stongly disas	AND COMP.
							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.						
	1.18.4 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	1.19.1 Providing opportunities for families to volunteer and contribute to the program.						
and decision-makers by:	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.						
	1.19.4 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 How do programs support pa build decision-making and le	rents as decision-makers and help	43.	HUNEY AFFE	8 3. Halfer 2	8188 PUT 15-865 2: D5-8688	EE Strongly by	sages Lethnicale Comments
1.20 The program promotes participation in activities by:	1.20.1 Addressing topics, issues and skills that families identify as important to them.						
	1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).						
	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.						
	1.21.3 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:	1.22.1 Hosting or linking parents to com- munity 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS					nordisat	je ^e	11 ²⁸
How do programs help parents understand how to buffer their child during stressful times?	45	Strongly 2	tie Agree 3	. Neither age	.Disaglee	Stoney di	
							Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.							
 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 							
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.							



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

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections?			Strongy ar	Lee Ages	Heither 25te	e nor disage	strongly dis	astre .
								Comments
2.1 Families have access to a construction of the second s	omfortable space where they can meet							
2.2 The program provides opportunities for families with similar interests, children's area and/or circum-	2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses).							
dren's ages and/or circum- stances (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:	2.2.2 Through parent mentoring and matching for one-on-one support.							
	2.2.3 Informally, by introducing parents to one another.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

DCIAL CONNECTIONS: SELF-/	e program provides inities for families to e and foster a sense munity by organizing/ : 2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups. 2.3.2 Periodic events like coffee breaks and breakfasts. 2.3.2 Periodic events like coffee breaks and breakfasts. 2.3.3 Celebrations, graduations and holidays. 2.3.4 Field trips and community events. 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. 2.3.6 Affordable family activities. 2.3.7 Special programs for dads, grandpar- ents, teen moms, teen dads and other care- givers 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. e program encourages positive relationships between families and imbers by planning informal social events where staff can interact with . e program offers or connects families to resources to strengthen ships between adults (e.g., healthy marriage skills, communication skills,		5	88		e nor disagree	50 / S	ARCE . SE
ow do programs help familie se social connections?	es value, build, sustain and	5.	SHOREW 28	Agree 3.	Heither 28:	Jisagree	Stongly dis	asto Lehnicale
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2.3 The program provides opportunities for families to socialize and faster a sense								
of community by organizing/ hosting:								
	2.3.4 Field trips and community events.							
	potlucks, and other opportunities for parents to share and learn about each other's home							
	2.3.6 Affordable family activities.							
	ents, teen moms, teen dads and other care- givers who would enjoy activities directed at							
	where parents can get program information							
	, healthy marriage skills, communication skills,							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

SOCIAL CONNECTIONS: SELF- low do programs help familio ise social connections?		5	Stoney ar	BEE 3:	Heither Self	e nor disast	stone with	astres A. A. Phylicans Comments
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.							
ipate in program activities by:	2.6.2 Connecting with them on social media platforms through program pages or groups.							
_	2.6.3 Offering support with transportation, child care or other barriers to participation.							
	2.6.4 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.							
	isolation or reluctance to participate can ue to differences in race, language, culture, tation, ability, etc.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs create an i			strongly as	heree 3:	Heither 25	e nordisagi	se Stongly dis	estes c. supicals	
1 0		45.	St A	Ne S	2		S. No		
2.8 The program and its staff model positive social skills and community building 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. 							Comments	
	 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:	 2.9.1 Modeling inclusive behavior among the staff. 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. 2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing a background of the folderbackground of the provided of the provide								
	 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. 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. 								

2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs facilitate m		5	Strongly age	Alles 3:	Heither agree	e nor disagree	se storey his	
		1						Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms nysitting co-ops, play groups, social media an communicate with one another).							
2.12 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:	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.							
the immediate neighborhood or le	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	staff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	ith issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, pport).							
	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.

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5: Strongly agree

A: Agree

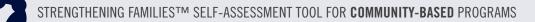
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Not Applicable

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs model developmentally appropriate interactions with children?

					Comments
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.				
	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 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.				
3.3 Physical discipline (i.e., spa by staff or parents.	nking or hitting) is not allowed in the program				

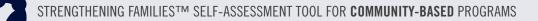


KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		5:5H	AT PRES	Heither 25:05	1: 510 84	aster A heriticalité Comments
3.4 When staff talk with parents about discipline, they:	3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.					
	3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.					
	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.					
	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.					



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

KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		1 25	le ⁸	215	se nor disast Disastee	Stonely dis	astree at the
How do programs provide in parenting and child develop		5	Strongly 29	Astee 3.	Neither 2	Disagree	Strongly N	aste
								Comments
	s are offered as one among several strategies for f 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.							
	3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	3.6.4 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.							
	3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	3.6.7 Child care is offered while parents are in classes.							
	3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
3.7 Information is provided to p to expect of their children at eac	barents on stages of child development and what the stage.							



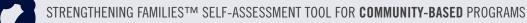
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How do programs provide info on parenting and child develo		5	Strongly ar	heree 3	Neither 2	Disagree 1	Stoney di	aster and a second seco	
		(Ĺ		ĺ	Ĺ	Comments	
3.8 Parenting information and materials used by the program are culturally and	3.8.1 Are available in the language spoken by program families.								
linguistically appropriate, and:	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.								
3.9 Parenting and child development information is provided through multiple av-	3.9.1 Books and videos in a resource library.								
enues to meet diverse learning styles, including:	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	3.9.4 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.								
	3.9.6 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	3.10.1 Parent education groups (including fatherhood groups).								
different ways of parenting, such as:	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.								



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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	ormation and resources	5	Stonely as	Pee 3:	Neither 25th	e nor disaet	se Strongly dif	ages Lennicans	
to the needs of parents in differen • Different parenting styles of r • Needs and concerns of first t • Needs of parents who are pa • Noncustodial parents	nothers and fathers and the strengths of each ime parents							Comments	
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.								
 the program provides opportuniti Prenatal and infant health an The birth process and what t The needs of postnatal wome The developing role of first tin if appropriate) 	d development o expect								

XNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS low do programs encourage explore parenting issues and	parents to observe, ask questions,	5	Stoney 25	ee , heree 3	Heimer 28	bisages	se strongly disso	Asee hepitcale
3.14 Parents and staff work together to design and orga-	3.14.1 Cultural/ethnic expectations and practices about parenting.							
nize opportunities for parent led discussions (such as a Community Café or Parent Café series) to explore:	3.14.2 Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	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.							

NOWLEDGE OF PARENTING A ELF-ASSESSMENT ITEMS ow do programs encourage xplore parenting issues and	parents to observe, ask questions,	, 13	attorety age	ee helee 3.	Beitter age	insates	stonely dis	Pages L. Frinchis
								Comments
3.15 Staff recognize and support the parenting	3.15.1 Regularly checking in with parents about parenting issues.							
challenges experienced by families with children who have special needs by:	3.15.2 Being sensitive to parents' frustra- tion, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.							
	3.15.3 Supporting parents in understand- ing appropriate developmental expectations for their children with special needs.							
	3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.							
	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.							



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



					Comments
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.				
	3.16.2 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.				
	3.16.6 Signals that development may not be on track.				
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.				
	3.17.2 Sharing something positive with parents about their children's behavior and development.				
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.				
	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.				



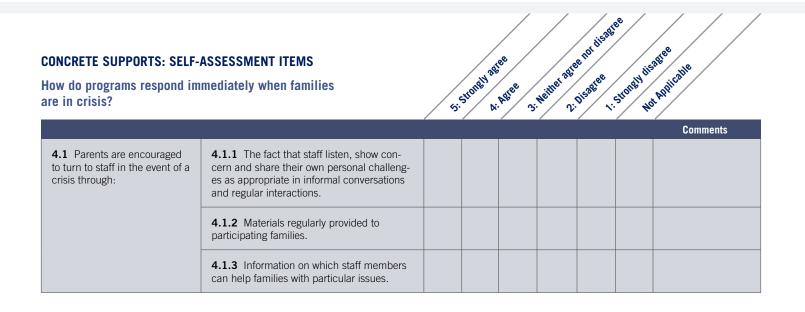
CONCRETE SUPPORT IN TIMES OF NEED

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.





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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		agre	,e	ate	enu	dis	agreete	
How do programs respond im are in crisis?	mediately when families	5	Stronghy 2818	Allee 3:	Neither 2:	Disagree 1:	Stonely dis	ASIE CAPICABLE	
				/	/	/		Comme	nts
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 experi- encing 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.								
	4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.								
	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.								



4.4 Staff proactively respond

to signs of parent or family

distress by:

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

help.



	resources, including help lines, community resources or public agencies.				
	4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.				
	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.				
0	hare information about community resources s, play lots, family activities), as well as more				
	e services dults and children)				



CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS How do programs provide information and connections to services in the community?			Stonely as	Pares 3. W	2:11:2:15:25 ¹⁰	1:510087115	Applicable
					· · · · ·		Comments
4.6 The program actively builds collaborative links with	4.6.1 Bringing services on site, when possible.						
other service providers by:	4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.						
	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.						



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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS				Heither agree	a nor disager	5 ⁰	elee	
How do programs help familie identify their needs and conn	es to develop skills they need to ect to supports?	5	Strongly age	ASTER 3:	Neither 2910	JISABIER 1.	Strongly dis	Applicable	
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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.								
	4.7.5 Connecting parents to peer-to-peer navigation support.								
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.								
port family feadership of.	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).								



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 How do programs help parents foster their child's social emotional development?			Stimely age	e stee 3.	setter agree	IN DISASTER	unely disastree Hot hot hot	
								Comments
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).								
	edge and expertise about their children's as they share information about social and							



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ow do programs model nurt	uring care to children?	13 ⁻¹³	Intel 28100	e 3: Neither	2: Disable	Strong. Not	huitalle
							Comments
5.4 Staff nurture children and model nurturing for parents by:	5.4.1 Responding consistently to children in a warm, supportive manner.						
.F-ASSESSMENT ITEMS w do programs model nurtu .4 Staff nurture children and nodel nurturing for parents	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.						

OCIAL AND EMOTIONAL CON ELF-ASSESSMENT ITEMS ow do programs model nurt		43. 43.	101611 28788	3: Heller after 1	an disselfee	astee A philicale Comments
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.					
	5.5.2 Recognizing behavioral/emotional problems or developmental delays.					
	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.					
	5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.					
	5.5.6 Promoting positive relationships among children living in the same household.					
	5.5.7 Promoting positive relationships among children living in the same household.					
	5.5.8 Understanding how mental health and wellness affects family relationships and the developmental process of young children.					
	5.5.9 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.					
5.6 Families are invited to obser and/or staff in the program.	ve their children interacting with other children					



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs include chi development activities in pro	Idren's social and emotional	45 ^{, 63}	IINEW AFEE	3: Heitter all	. D598 00 1. 5100	A disaste Not the case
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.					
practices that include:	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).					
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.					

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SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		adi	ee /		ee nor disate	jee	allee	
How do programs help childr identity and learn to interact	en develop a positive cultural in a diverse society?	45	Strongly age	Agree 3	Neither 25	Disagree	Stongly di	Applicable	
								Comment	s
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.								
5.10 Staff receive training on how cultural differences affect social and emotional development, especially	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.								
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, languag-	5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.								
es 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.									
5.14 Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.								

SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs respond pr emotional development need	roactively when social or	4	STOREN 25	, heree 3:	Neither aste	e not isse	Stonely dis	Applicable Comments
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.							
	5.15.2 Arranging for appropriate screenings and assessments.							
	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.							



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 RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

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HOW DO PROGRAMS RESPON Or neglect?	D TO POSSIBLE CHILD ABUSE	5:54018W	Bree 3. Neith	2.155858 1.510	ety issues not half is the
					Comments
6.1 When children enter the program, staff discuss child abuse and neglect prevention with all parents and caretak-	6.1.1 The program's policies and practices that are designed to keep children safe from harm.				
ers. This discussion includes explanations of:	6.1.2 Staff members' responsibility as man- datory child abuse and neglect reporters.				
	6.1.3 How the state defines child abuse and neglect.				
	6.1.4 The program's protocols regarding child abuse and neglect reports.				
6.2 All staff members are trained abuse reporting laws.	d according to their state's mandatory child				
6.3 Staff receive additional training on child abuse and neglect including:	6.3.1 Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.				
	6.3.2 Following the program's protocols for reporting child abuse and neglect.				
	6.3.3 Understanding how cases are generally handled by the child protective services agency once a report is made.				
	6.3.4 The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.				
	6.3.5 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**?

HOW DO PROGRAMS RESPON Dr Neglect?	D TO POSSIBLE CHILD ABUSE	6	Stoney as	ABLES 3:	Heiline ages 1	or disaster	bisages Not heritable Comment	s
6.4 The program's protocols for reporting possible child abuse and neglect:	6.4.1 Are consistent with state child welfare reporting guidelines.							
abuse and negrect:	6.4.2 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	6.5.1 Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.							
responsibilities to both the child welfare agency and to families that include:	6.5.2 Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.							
	6.5.3 Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.							
	6.5.4 Striving to be calm, caring and supportive of the family during the reporting process.							
	6.5.5 Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.							
	6.5.6 Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.							
6.6 If a child is placed into child welfare custody, staff are trained to continue to support the child and the family by:	6.6.1 Maintaining contact with the child and family, if possible.							
	6.6.2 Advocating for the family with the Child Protective Services system, when possible.							
	6.6.3 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 healthy development by:	6.7.1 Helping to maintain stability for children involved in the system.				
	6.7.2 Engaging in co-case management practices, if possible.				
	6.7.3 Conducting joint home visits.				
	6.7.4 Attending Child Protective Services meetings to share information.				

Appendix B

Electronic Version of Promoting Parental Resilience Questions of SFSA Tool



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.

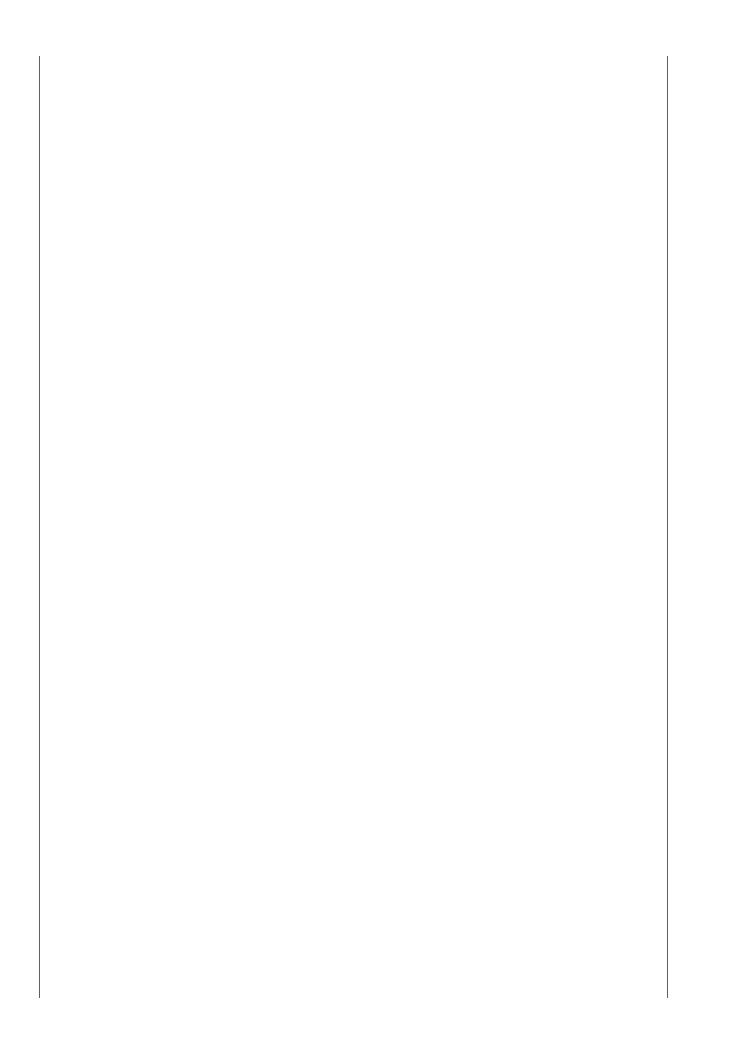
Given your knowledge and experiences, please respond to the series of questions about the Resource Center as such relate to select core strategies for building the protective factor associated with Parental Resilience. You will be asked to identify (on a 5-point scale) your level of agreement with a 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?

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

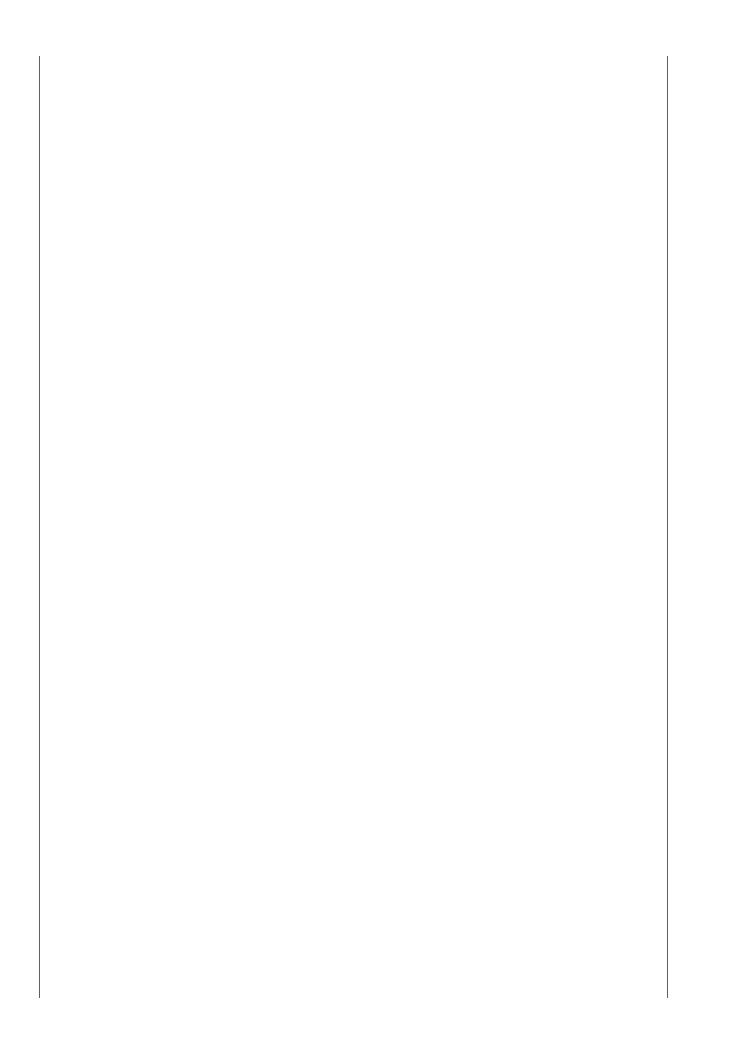


ow do programs demonstrate that parents are v	aluod2	0110-10	.01 110.		-	
1.1 Staff strive to recognize and affirm the cent lives through every interaction with families incl informal communication.	ral role					's
Strongly agree Agree Neither agree nor disa	agree (🔵 Disa	igree (Strong	ly disagre	е
○ Not applicable						
Comment						
2 The program has multiple avenues for regular						
2 The program has multiple avenues for regular	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	ľ
2 The program has multiple avenues for regular .2.1 The program provides an orientation for families about the rogram philosophy, goals and objectives.		Agree	agree nor	Disagree	00	1 (
.2.1 The program provides an orientation for families about the		Agree	agree nor	Disagree	00	1
.2.1 The program provides an orientation for families about the rogram philosophy, goals and objectives.		Agree	agree nor	Disagree	00	1))
 .2.1 The program provides an orientation for families about the rogram philosophy, goals and objectives. .2.2 Staff use a variety of methods (e.g., new family orientations, mall group meetings, individual conversations, and written uestionnaires) to provide information and gather input from amilies about activities throughout the year. 		Agree	agree nor	Disagree	00	1))))
2.2.1 The program provides an orientation for families about the rogram philosophy, goals and objectives. Comments 2.2.2 Staff use a variety of methods (e.g., new family orientations, mall group meetings, individual conversations, and written uestionnaires) to provide information and gather input from amilies about activities throughout the year. Comments		Agree	agree nor	Disagree	00	1))))
2.1 The program provides an orientation for families about the rogram philosophy, goals and objectives. Comments 2.2 Staff use a variety of methods (e.g., new family orientations, mall group meetings, individual conversations, and written uestionnaires) to provide information and gather input from amilies about activities throughout the year.		Agree	agree nor	Disagree	00	1))))

agree Agree disagree Disagree dis 1.3.1 Someone is available to greet families when they come in.	agree N
1.3.2 Staff are respectful even when family visits are unexpected.	
omments) C

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/
1.4.1 Taking time to get to know family members individually, by name.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	С
Comments						
1.4.2 Listening and learning about their interests, current activities, hopes and expectations for themselves and their children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.4.3 Regularly inquiring about what is happening in their lives. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	
1.4.4 Providing emotional support and encouragement. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	Ċ
1.4.5 Sharing appropriate information about themselves. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	
1.4.6 Recognizing and acknowledging parents' strengths, efforts and contributions.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Ç
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	C
Comments						
1.4.8 Using intake forms, applications and surveys that are gender-neutral.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Ç
Comments						
.5 Staff show that they value fathers and are sen	sitive to	their	r unique Neither agree	e needs	by:	

	Strongly agree	Agree	nor disagree	Disagree	Strongly disagree	N/A
1.5.1 Taking part in periodic training on understanding and appreciating fathers' needs and parenting.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.5.2 Providing information specific to fathers/male family members in a special area such as a lounge, bulletin board, or bookshelf.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.5.4 Providing peer activities or services that are man-to-man, father-to-father.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	φ
Comments						
1.5.5 Engaging male participants to greet other men at program activities.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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	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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.6.3 Parents have opportunities to share skills, talents and cultural traditions with children and other parents.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.6.4 Staff engage grandparents, elders and extended family members in discussions on parenting and the transmission of cultural beliefs.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
$1.6.5\;$ The program displays diverse families and family structures in books, posters and program materials.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

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
1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
1.7.3 Designed or selected to reflect the culture(s) of the community served.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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	Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right\rangle$
Comments						
1.8.3 Facilitating discussions to help staff members understand and appreciate their culturally different communication styles.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

		Strongly agree		Neither agree nor disagree	Disagree	Strongly e disagree	N/A
		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
.10 The program supports participating immigrant and refugee families by: Neither agree Strongly nor Strongly agree Agree Agree disagree Disagree Agree disagree Agree disagree Agree disagree Agree disagree Agree disagree disagree disagree Agree disagree	Comments						
1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served. Image: 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. Image: Comments .10 The program supports participating immigrant and refugee families by: Neither agree Strongly nor Strongly agree Agree disagree Disagree disagree NV4 1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families is prespectful manner. Image: Comments 1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families. Image: Comments	are skilled at working with the diversity of the families in the	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
diverse cultural groups represented in the community served. Comments I.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. Comments I.10 The program supports participating immigrant and refugee families by: Neither agree Strongly nor Strongly agree Agree disagree Disagree disagree Net I.10.1 Ensuring that staff are knowledgeable about immigrant and respectful manner. Comments I.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families.	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. Image: Comment of the program supports participating immigrant and refugee families by: Neither agree Strongly agree Agree disagree Disagree disagree NV# 1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner. Image: Comments 1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families. Image: Comment of the program support of th	diverse cultural groups represented in the community served.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
children with connections to the diversity that exists in society - even if the program's community is mono-lingual, mono-ethnic or mono-cultural. Comments .10 The program supports participating immigrant and refugee families by: Neither agree Strongly nor Strongly nor Strongly agree Agree disagree Disagree disagree N/4 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.							
agree Strongly nor Strongly	children with connections to the diversity that exists in society - even if the program's community is mono-lingual, mono-ethnic or	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Neither agree strongly nor Strongly strongly nor Strongly N/4 1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a respectful manner. Image: Comments Image:	mono-cultural.						
refugee families' unique challenges and can help address them in a OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO							
1.10.2 Maintaining up-to-date information on supports and services most relevant to immigrant and refugee families. O O O	Comments	Strongly	_	Neither agree nor	-	Strongly	N/A
services most relevant to immigrant and refugee families.	Comments .10 The program supports participating immigra 1.10.1 Ensuring that staff are knowledgeable about immigrant and refugee families' unique challenges and can help address them in a	Strongly agree	_	Neither agree nor	-	Strongly	N/A
Comments	Comments .10 The program supports participating immigra 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 agree	_	Neither agree nor	-	Strongly	N/A
	Comments .10 The program supports participating immigra 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	Strongly agree	_	Neither agree nor	-	Strongly	N/A
	Comments .10 The program supports participating immigra 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 agree	_	Neither agree nor	-	Strongly	
	Comments .10 The program supports participating immigra 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 agree	_	Neither agree nor	-	Strongly	
	Comments .10 The program supports participating immigra 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 agree	_	Neither agree nor	-	Strongly	



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

1.12 The program provides regular opportunities for parents to relieve stress through:

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

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
1.13.1 Understanding the impact of family crises and/or loss on all family members especially children and how to respond appropriately.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.13.2 Supporting families' immediate and long-term plans.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
1.13.3 Talking to families about difficult issues and helping them access additional help.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.13.4 Maintaining confidentiality.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.13.6 Understanding trauma and its impact on children and how staff can help.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	φ
Comments						
1.13.7 Other community agencies providing specialized services to families and children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						



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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.14.2 Opportunities to process their own emotional reactions with appropriate support.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
1.14.3 Access to a mental health consultant.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.14.4 Time off if needed.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

1.15 Staff reinforce parental authority by:	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
$1.15.1\;$ Respecting parents' directions and/or decisions about their children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.15.2 Learning about parents' expectations and limits for their children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	ϕ
Comments						
1.15.3 Talking respectfully with parents about how to handle differences in expectations regarding children's behavior and development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.15.4 Understanding the parenting and child behavior norms of the parent's culture.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	ϕ
Comments						
1.15.5 Being careful not to contradict a parent in front of his or her child or other children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

1.16 Parents are engaged as partners in developm of their child:	ental so	creeni	ings or	assessn	nents	
	Strongly agree		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.Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
1.16.2 Parents are informed about the confidentiality policy and what it means to them.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	ϕ
Comments						
1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
17.1 Identify the family's assets, interests, skills, needs and als for themselves and their children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
omments						
17.2 Identify services and opportunities within the program that ay help parents achieve their goals and effectively use their skills d talents.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right\rangle$
omments						
17.3 Identify other community resources and opportunities that ay help families achieve their goals, continue their learning d/or provide other avenues for involvement and leadership.	\bigcirc	\bigcirc	0	0	0	\bigcirc
17.4 Are updated regularly.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

1.18.1 Referring families to educational and career resources	Strongly		agree nor		Strongly	
	agree	Agree		Disagree	disagree	N/A
e.g., GED programs, adult education, ESL classes, employment opportunities, workplace literacy, parenting skills, job training, job preparation skills).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.18.2 Forming partnerships with nearby educational resources, ncluding higher education institutions, to support families' earning interests and educational goals. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.18.4 Inviting past program parents and community volunteers o share their educational and career experiences with families. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

1.19 The program provides opportunities and suppleaders and decision-makers by:	port for	famil	ies to s	erve as		
	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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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	r ()	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.19.3 Asking families for regular input on programmatic	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc	C

(

decisions. Comments

Γ

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N//
1.20.1 Addressing topics, issues and skills that families identify as important to them.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members). Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	<u> </u>	
1.20.3 Providing child care during trainings or workshops. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
1.20.4 Conducting face-to-face or telephone outreach to families who might not otherwise participate.	\bigcirc	\bigcirc	\bigcirc	\bigcirc		0
Comments						
	develop	oment	of pare	nt lead	ers by	
	Strongly		Neither agree nor		Strongly	N/A
1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other	Strongly agree		Neither agree nor		-	NA
1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents.	Strongly agree		Neither agree nor		Strongly	N/A
upporting: 1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents. Comments 1.21.2 Leadership development trainings and mentoring activities.	Strongly agree		Neither agree nor		Strongly	N/A
.21 The program helps to support the continued upporting: 1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents. Comments 1.21.2 Leadership development trainings and mentoring activities. Comments 1.21.3 Training opportunities for advocacy and civics (e.g., how local and state government works, how to foster change).	Strongly agree		Neither agree nor		Strongly	
upporting: 1.21.1 Personal growth such as attending conferences or special events and collecting and sharing information of interest to other parents. Comments 1.21.2 Leadership development trainings and mentoring activities. Comments 1.21.3 Training opportunities for advocacy and civics (e.g., how	Strongly agree		Neither agree nor		Strongly	

			Neither agree			
	Strongly agree		nor disagree	Disagree	Strongly disagree	N/A
1.22.1 Hosting or linking parents to community events that help raise awareness of emerging community needs and assets.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
						1



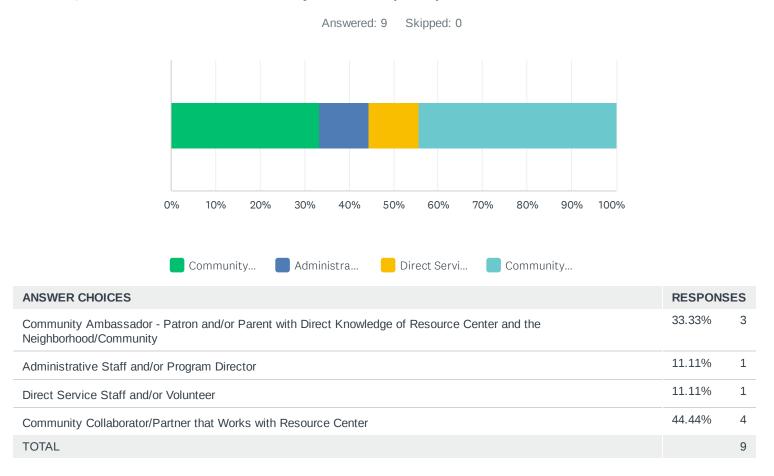
				Resilience
low do programs l tressful times?	help paren	ts understand how to b	ouffer their chil	d during
1.23 Staff receiv of family crisis.	e training	on talking with parents	about helping	children in times
Strongly agree	O Agree	O Neither agree nor disagr	ee 🔵 Disagree	O Strongly disagree
O Not applicable				
 Recognizing the How stress may behavior according 	cts the child signs of stre impact the c gly	l's brain, behavior and de	o shape adult res	
Comment				
		e access to a mental hea ds of children and othe Neither agree nor disagr	r family membe	

Appendix C

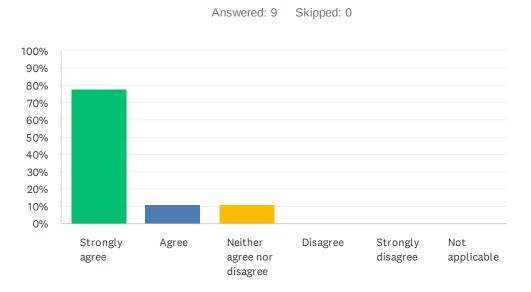
NorthStar Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— <u>Promoting Parental Resilience</u> Results

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



Q2 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.



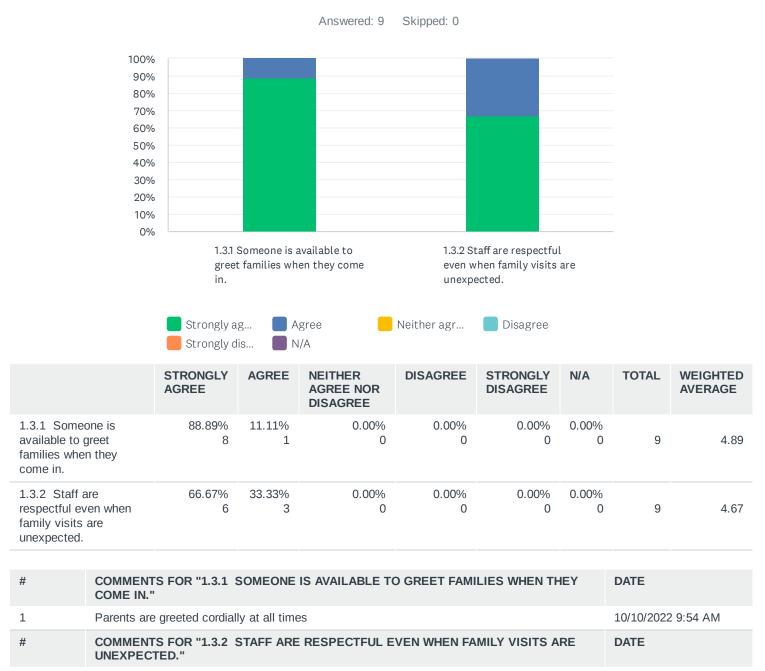
ANSWER C	HOICES	RESPONSES		
Strongly ag	ree	77.78%		7
Agree		11.11%		1
Neither agre	e nor disagree	11.11%		1
Disagree		0.00%		0
Strongly dis	agree	0.00%		0
Not applical	le	0.00%		0
TOTAL				9
#	COMMENT		DATE	
1	Parents are included when choice are made on behalf children who partion offer by Resource Center	cipate in programs	10/10/2022 9:54 AM	

105

Q3 1.2 The program has multiple avenues for regular communication with families.

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.2.1 The provides a orientation families a	an	(e.g., nev	of methods	1.2.3 Staff regularly as about their observation			
	Strongly ag.			Neither agr	Disagree			
	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.	44.44% 4	33.33% 3	11.11% 1	11.11% 1	0.00% 0	0.00% 0	9	4.11
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.	44.44% 4	55.56% 5	0.00%	0.00%	0.00% 0	0.00% 0	9	4.44
1.2.3 Staff regularly ask parents about their observations of their child.	11.11% 1	55.56% 5	22.22% 2	0.00% 0	0.00% 0	11.11% 1	9	3.88
	FOR "1.2.1 TH PROGRAM PH					LIES	DATE	
There are no		LUGUFNI	, SUALS AND	Objective3.				
# COMMENTS	FOR "1.2.2 ST	AFF USE A	A VARIETY OF	METHODS (E.	G., NEW FAMIL	Y	DATE	

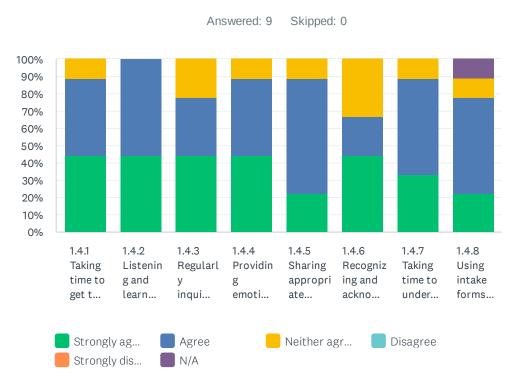
	ORIENTATIONS, SMALL GROUP MEETINGS, INDIVIDUAL CONVERSATIONS, AND WRITTEN QUESTIONNAIRES) TO PROVIDE INFORMATION AND GATHER INPUT FROM FAMILIES ABOUT ACTIVITIES THROUGHOUT THE YEAR."	
1	written questionnaires, and individual conversations	10/10/2022 9:54 AM
#	COMMENTS FOR "1.2.3 STAFF REGULARLY ASK PARENTS ABOUT THEIR OBSERVATIONS OF THEIR CHILD."	DATE
1	I do not know	10/13/2022 3:03 PM
2	Through the questionnaire when enrolling a child.	10/10/2022 9:54 AM



Q4 1.3 All family members are made to feel welcome:

There are no responses.

Q5 1.4 Staff develop mutually respectful relationships with all family members by:

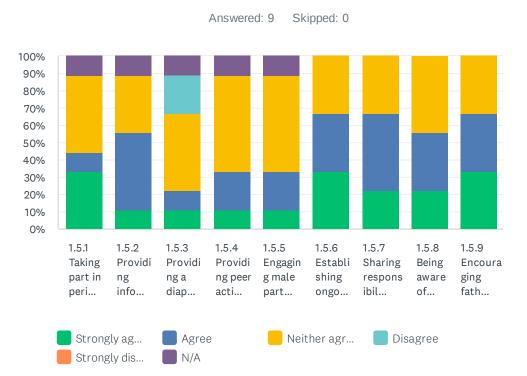


		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.4.1 Taking to know fami individually,	ily members	44.44% 4	44.44% 4	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.33
1.4.2 Listen learning abou interests, cu activities, ho expectations themselves children.	ut their rrent opes and s for	44.44% 4	55.56% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.44
1.4.3 Regula about what is in their lives.	s happening	44.44% 4	33.33% 3	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.22
1.4.4 Provid emotional su encouragem	ipport and	44.44% 4	44.44% 4	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.33
1.4.5 Sharin appropriate in about thems	nformation	22.22% 2	66.67% 6	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.11
1.4.6 Recog acknowledgi strengths, ef contributions	ng parents' forts and	44.44% 4	22.22% 2	33.33% 3	0.00% 0	0.00% 0	0.00%	9	4.11
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.		33.33% 3	55.56% 5	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.22
1.4.8 Using forms, applic surveys that neutral.	ations and	22.22% 2	55.56% 5	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.13
#	COMMENTS FOR "1.4.1 TAKING TIME TO GET TO KNOW FAMILY MEMBERS						DATE		
1	INDIVIDUALLY, BY NAME." yes, through conversation with family members who come to the center.						10/10/2022	2 9:54 AM	
#	COMMENTS FOR "1.4.2 LISTENING AND LEARNING ABOUT THEIR INTERESTS, CURRENT ACTIVITIES, HOPES AND EXPECTATIONS FOR THEMSELVES AND THEIR CHILDREN."					EIR	DATE		
	There are no responses.								
#	COMMENTS FOR "1.4.3 REGULARLY INQUIRING ABOUT WHAT IS HAPPENING IN THEIR LIVES."					Ν	DATE		
	There are no	responses.							
#	COMMENTS	FOR "1.4.4 PF	ROVIDING	EMOTIONAL S	UPPORT AND	ENCOURAGEM	IENT."	DATE	

There are no responses.

#COMMENTS FOR "1.4.5 SHARING APPROPRIATE INFORMATION ABOUT THEMSELVES."DATEThere are no responses.There are no responses.#COMMENTS FOR "1.4.6 RECOGNIZING AND ACKNOWLEDGING PARENTS' STRENGTHS, EFFORTS AND CONTRIBUTIONS."DATEThere are no responses.DATE#COMMENTS FOR "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."DATEThere are no responses.There are no responses.DATE#COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT ARE GENDER-NEUTRAL."DATE1I do not know10/13/2022 3:03 PM			
# COMMENTS FOR "1.4.6 RECOGNIZING AND ACKNOWLEDGING PARENTS' STRENGTHS, EFFORTS AND CONTRIBUTIONS." DATE # Comments for "1.4.6 Recognizing and acknowledging parents' There are no responses. DATE # COMMENTS FOR "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." DATE There are no responses. There are no responses. There are no responses. # COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT DATE	#		DATE
STRENGTHS, EFFORTS AND CONTRIBUTIONS." There are no responses. There are no responses. There are no responses. # COMMENTS FOR "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." DATE There are no responses. There are no responses. There are no responses. # COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT DATE		There are no responses.	
# COMMENTS FOR "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." DATE There are no responses. There are no responses. DATE # COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT DATE	#		DATE
INDIVIDUAL PARENTS, SUCH AS NAVIGATING CHILD CUSTODY OR THE CHILD INDIVIDUAL PARENTS, SUCH AS NAVIGATING CHILD CUSTODY OR THE CHILD SUPPORT SYSTEM, PLAYING DUAL ROLES IN A SINGLE-PARENT HOUSEHOLD OR INDIVIDUAL PARENTS, SUCH AS NAVIGATING CHILD CUSTODY OR THE CHILD There are no responses. There are no responses. # COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT DATE		There are no responses.	
# COMMENTS FOR "1.4.8 USING INTAKE FORMS, APPLICATIONS AND SURVEYS THAT DATE ARE GENDER-NEUTRAL."	#	INDIVIDUAL PARENTS, SUCH AS NAVIGATING CHILD CUSTODY OR THE CHILD SUPPORT SYSTEM, PLAYING DUAL ROLES IN A SINGLE-PARENT HOUSEHOLD OR	DATE
ARE GENDER-NEUTRAL."		There are no responses.	
1 I do not know 10/13/2022 3:03 PM	#	,	DATE
	1	I do not know	10/13/2022 3:03 PM

Q6 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.	33.33% 3	11.11% 1	44.44% 4	0.00% 0	0.00% 0	11.11% 1	9	3.88
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% 4	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.75
1.5.3 Providing a diaper changing table in the men's room or other area accessible to men.	11.11% 1	11.11% 1	44.44% 4	22.22% 2	0.00% 0	11.11% 1	9	3.13
1.5.4 Providing peer activities or services that are man-to-man, father- to-father.	11.11% 1	22.22% 2	55.56% 5	0.00% 0	0.00% 0	11.11% 1	9	3.50
1.5.5 Engaging male participants to greet other men at program activities.	11.11% 1	22.22% 2	55.56% 5	0.00% 0	0.00% 0	11.11% 1	9	3.50
1.5.6 Establishing ongoing partnerships with community resources that provide services to fathers.	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00%	0.00% 0	9	4.00
1.5.7 Sharing responsibility for inviting fathers to attend programs and working to engage them in activities.	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00%	9	3.89
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.	22.22% 2	33.33% 3	44.44% 4	0.00% 0	0.00% 0	0.00%	9	3.78
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.	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00% 0	0.00%	9	4.00

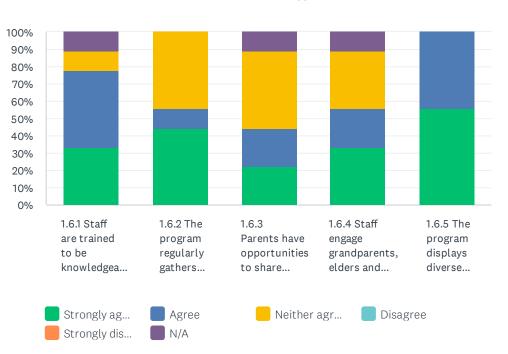
#

COMMENTS FOR "1.5.1 TAKING PART IN PERIODIC TRAINING ON UNDERSTANDING AND APPRECIATING FATHERS' NEEDS AND PARENTING."

DATE

1	I do not know	10/13/2022 3:03 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 do not know	10/13/2022 3:03 PM
#	COMMENTS FOR "1.5.3 PROVIDING A DIAPER CHANGING TABLE IN THE MEN'S ROOM OR OTHER AREA ACCESSIBLE TO MEN."	DATE
1	I do not know	10/13/2022 3:03 PM
#	COMMENTS FOR "1.5.4 PROVIDING PEER ACTIVITIES OR SERVICES THAT ARE MAN- TO-MAN, FATHER-TO-FATHER."	DATE
1	I do not know	10/13/2022 3:03 PM
#	COMMENTS FOR "1.5.5 ENGAGING MALE PARTICIPANTS TO GREET OTHER MEN AT PROGRAM ACTIVITIES."	DATE
1	I do not know	10/13/2022 3:03 PM
#	COMMENTS FOR "1.5.6 ESTABLISHING ONGOING PARTNERSHIPS WITH COMMUNITY RESOURCES THAT PROVIDE SERVICES TO FATHERS."	DATE
	There are no responses.	
#	COMMENTS FOR "1.5.7 SHARING RESPONSIBILITY FOR INVITING FATHERS TO ATTEND PROGRAMS AND WORKING TO ENGAGE THEM IN ACTIVITIES."	DATE
	There are no responses.	
#	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
	There are no responses.	
#	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
	There are no responses.	

Q7 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.



Answered: 9 Skipped: 0

		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
be knowledg the parenting) practices hes to family king of ural and	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.25
1.6.2 The pr regularly gat information a interests, be expectations those relating child's cultur language dev and seeks to families in in those feature program acti structure.	hers about family liefs and s, including g to the e and velopment, o partner with corporating es into	44.44% 4	11.11% 1	44.44% 4	0.00% 0	0.00% 0	0.00%	9	4.00
1.6.3 Parent opportunities skills, talents traditions wit and other pa	to share s and cultural h children	22.22% 2	22.22% 2	44.44% 4	0.00% 0	0.00% 0	11.11% 1	9	3.75
1.6.4 Staff e grandparents extended far members in on parenting transmission beliefs.	s, elders and nily discussions and the	33.33% 3	22.22% 2	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	4.00
1.6.5 The pr displays dive and family st books, poste program mat	erse families tructures in ers and	55.56% 5	44.44% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.56
#	PARENTING	FOR "1.6.1 ST PRACTICES A CULTURAL AN	ND APPRO	ACHES TO FA			THE	DATE	
1	I do not know		DETIMO					10/13/2022	2 3:05 PM
#	FAMILY INT	FOR "1.6.2 TH ERESTS, BELIE S CULTURE AN LIES IN INCORP TURE."	EFS AND E	XPECTATIONS GE DEVELOPI	, INCLUDING T MENT, AND SE	HOSE RELATII	NG TO NER	DATE	
	There are no	responses.							
#		FOR "1.6.3 PA				,		DATE	
1	I do not know	V						10/13/2022	2 3:05 PM
#		FOR "1.6.4 ST MBERS IN DISC						DATE	

	CULTURAL BELIEFS."	
1	I do not know	10/13/2022 3:05 PM
#	COMMENTS FOR "1.6.5 THE PROGRAM DISPLAYS DIVERSE FAMILIES AND FAMILY STRUCTURES IN BOOKS, POSTERS AND PROGRAM MATERIALS."	DATE

Q8 1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally appropriate. Materials are:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.7.1 Trans whenever into the la spoken by	possible, anguage(s)	Parent A	ee to ensure	1.7.3 Design selected to the culture community	reflect (s) of the		
		Strongly ag			Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.7.1 Transl whenever po the language by all familie community s	ssible, into (s) spoken s in the	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
1.7.2 Review Parent Advis Committee to they are cultur relevant and accessible to in the program	ory o ensure that urally linguistically o all families	22.22% 2	22.22% 2	44.44% 4	0.00%	0.00% 0	11.11% 1	9	3.75
1.7.3 Design selected to re culture(s) of community s	eflect the the	55.56% 5	44.44% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.56
#		FOR "1.7.1 TR (S) SPOKEN BY						DATE	
	There are no	responses.							
#	COMMENTS THAT THEY	FOR "1.7.2 RE ARE CULTURA I THE PROGRA	LLY RELE					DATE	
1	I do not know	/						10/13/2022	3:05 PM

#

COMMENTS FOR "1.7.3 DESIGNED OR SELECTED TO REFLECT THE CULTURE(S) OF THE COMMUNITY SERVED." DATE

There are no responses.

Q9 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:



#	COMMENTS FOR "1.8.1 INVITING PARTNER ORGANIZATIONS TO PROVIDE WORKSHOPS FOR STAFF ON WORKING WITH DIVERSE FAMILIES."	DATE
1	I do not know	10/13/2022 3:07 PM
#	COMMENTS FOR "1.8.2 COORDINATING SITE VISITS AT ORGANIZATIONS THAT SERVE DIFFERENT POPULATIONS SO THAT STAFF CAN LEARN HOW TO BEST SERVE	DATE

styles.

	DIVERSE FAMILIES."	
1	I do not know	10/13/2022 3:07 PM
#	COMMENTS FOR "1.8.3 FACILITATING DISCUSSIONS TO HELP STAFF MEMBERS UNDERSTAND AND APPRECIATE THEIR CULTURALLY DIFFERENT COMMUNICATION STYLES."	DATE
1	I do not know	10/13/2022 3:07 PM

Q10 1.9 The program seeks to reflect the community and families it serves by:

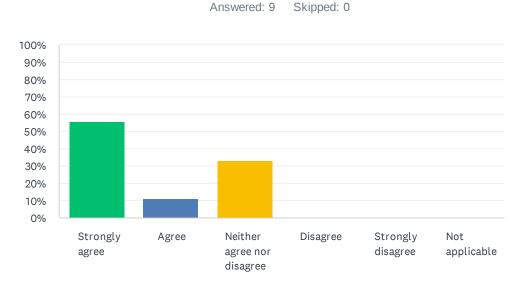
			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.9.1 Building a staff that reflects the community ar	rec	.2 entionally cruiting and uploying sta	1.9.3 Connecting w elders and ot trusted	ther member provide	-		
	Strongly ag Strongly dis	Agre N/A	e 🦲	Neither agr	Disagree			
	STRONGLY 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% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	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.	55.56% 5	22.22% 2	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.33
1.9.3 Connecting with elders and other trusted messengers of the diverse cultural groups represented in the community served.	55.56% 5	22.22% 2	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.33
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.	55.56% 5	11.11% 1	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.22

#	COMMENTS FOR "1.9.1 BUILDING A STAFF THAT REFLECTS THE COMMUNITY AND FAMILIES SERVED."	DATE
1	Afro-American and White. No Hispanic	10/10/2022 10:08 AM
#	COMMENTS FOR "1.9.2 INTENTIONALLY RECRUITING AND EMPLOYING STAFF MEMBERS WHO ARE SKILLED AT WORKING WITH THE DIVERSITY OF THE FAMILIES IN THE PROGRAM."	DATE
	There are no responses.	
#	COMMENTS FOR "1.9.3 CONNECTING WITH ELDERS AND OTHER TRUSTED MESSENGERS OF THE DIVERSE CULTURAL GROUPS REPRESENTED IN THE COMMUNITY SERVED."	DATE
	There are no responses.	
#	COMMENTS FOR "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."	DATE
	There are no responses.	

Q11 1.10 The program supports participating immigrant and refugee families by:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	are kno immigra	nsuring that wledgeable a ant and refug challenges a	about gee families'	informa service	laintaining up-to- ation on supports s most relevant t ant and refugee fa	s and o		
		Strongly ag.			Neither agr	D isagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.10.1 Ensuring the staff are knowledge about immigrant ar refugee families' un challenges and can address them in a respectful manner.	jeable nd nique n help	22.22% 2	22.22% 2	44.44% 4	0.00% 0	0.00% 0	11.11% 1	9	3.75
1.10.2 Maintaining date information or supports and servi most relevant to immigrant and refu families.	n ices	11.11% 1	44.44% 4	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.75
"								D.475	
IMM	IIGRANT	FOR "1.10.1 E AND REFUGEE HEM IN A RESI	FAMILIES	UNIQUE CHA			П	DATE	
1 I do	not know	/						10/13/2022	2 3:07 PM
		FOR "1.10.2 M CES MOST REL					TS	DATE	
1 I do	not know	/						10/13/2022	2 3:07 PM

Q12 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.



ANSWE	R CHOICES	RESPONSES		
Strongly	agree	55.56%		5
Agree		11.11%		1
Neither a	gree nor disagree	33.33%		3
Disagree		0.00%		0
Strongly	disagree	0.00%		0
Not appli	cable	0.00%		0
TOTAL				9
#	COMMENT		DATE	
	There are no responses.			

Q13 1.12 The program provides regular opportunities for parents to relieve stress through:

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.12.1 Linking parents to organized	1.12.2 Setting space a time fo	and spa (or exer	nizing Mal days, or	king staff P o	12.5 Providing ccasional hild care		
	Strongly dis.	N/A	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.12.1 Linking parents to organized support groups.	44.44% 4	11.11% 1	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	4.00
1.12.2 Setting aside space and time for parents to gather, talk and participate in informal activities.	33.33% 3	33.33% 3	22.22% 2	11.11% 1	0.00% 0	0.00% 0	9	3.89
1.12.3 Organizing spa days, exercise classes or other parent-only social activities.	22.22% 2	33.33% 3	22.22% 2	11.11% 1	0.00% 0	11.11% 1	9	3.75
1.12.4 Making staff or consultants available for parents to talk to individually about issues that are troubling them.	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
1.12.5 Providing occasional child care so parents can take a "night out," go shopping or participate in other parent-only activities.	22.22% 2	11.11% 1	55.56% 5	11.11% 1	0.00% 0	0.00% 0	9	3.44

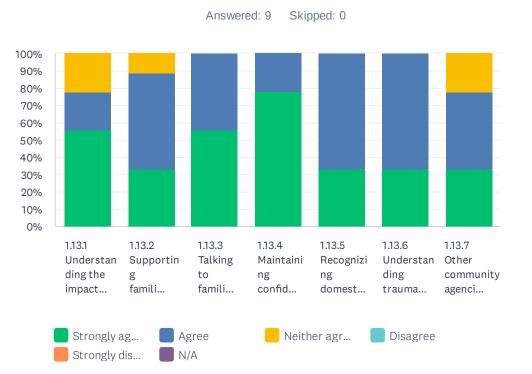
#

COMMENTS FOR "1.12.1 LINKING PARENTS TO ORGANIZED SUPPORT GROUPS."

DATE

	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
1	workshop on finance and budgeting	10/10/2022 10:15 AM
#	COMMENTS FOR "1.12.3 ORGANIZING SPA DAYS, EXERCISE CLASSES OR OTHER PARENT-ONLY SOCIAL ACTIVITIES."	DATE
1	I do not know	10/13/2022 3:53 PM
2	Daily Community Walk which encourage Good Health	10/10/2022 10:15 AM
#	COMMENTS FOR "1.12.4 MAKING STAFF OR CONSULTANTS AVAILABLE FOR PARENTS TO TALK TO INDIVIDUALLY ABOUT ISSUES THAT ARE TROUBLING THEM."	DATE
1	Open door policy for parental concerns	10/10/2022 10:15 AM
#	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
	There are no responses.	

Q14 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:



I.13.1 Understanding the impact of family crises and/or loss on all family respond appropriately.AGREE SCSDISAGREE AGREEDISAGREE DISAGREEDISAGREE DISAGREENATOTAL VERAGEWEICHTED AVERAGE1.13.1 Understanding the impact of family crises and/or loss on all family respond appropriately.55.56% SCS22.22% SCS0.00% SCS0.0
impact of family crises and/or loss on all family members - especially children - and how to respond appropriately. 5 2 2 0 0 9 4.33 1.13.2 Supporting families' immediate and long-term plans. 33.33% 55.56% 11.11% 0.00% 0.00% 0.00% 9 4.22 1.13.3 Talking to families about difficult issues and helping them access additional help. 55.56% 44.44% 0.00% 0.00% 0.00% 9 4.56 1.13.4 Maintaining confidentiality. 77.78% 22.22% 0.00% 0.00% 0.00% 9 4.78 1.13.5 Recognizing domestic volence, chronic heath problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately. 33.33% 66.67% 0.00% 0.00% 0.00% 9 4.33 1.13.6 Understanding trauma and its impact on 33.33% 66.67% 0.00% 0.00% 0.00% 9 4.33
families' immediate and long-term plans.35100094.221.13.3 Talking to families about difficult issues and helping them access additional help.55.56% 444.44% 00.00% 00.00% 00.00% 00.00% 00.00% 00.00% 094.561.13.4 Maintaining confidentiality.77.78% 722.22% 20.00% 00.00% 00.00% 00.00% 00.00% 94.781.13.5 Recognizing depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.3.33% 66.67% 366.67% 00.00% 00.00% 00.00% 00.00% 94.331.13.6 Understanding trauma and its impact on3.33% 366.67% 60.00% 00.00% 00.00% 00.00% 94.33
about difficult issues and helping them access additional help.540000094.561.13.4 Maintaining confidentiality.77.78% 722.22% 20.00% 00.00% 00.00% 00.00% 0094.781.13.5 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.33.33% 66.67%66.67% 00.00% 00.00% 00.00% 094.331.13.6 Understanding trauma and its impact on33.33% 366.67% 60.00% 00.00% 00.00% 00.00% 094.33
confidentiality.7200094.781.13.5 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.33.33%66.67% 6.67%0.00% 00.00% 00.00% 094.331.13.6 Understanding trauma and its impact on33.33%66.67% 30.00% 60.00% 00.00% 00.00% 00.00% 94.33
domestic violence, depression, developmental delays, mental illness, chronic health problems, substance abuse and other signs of imminent crisis and knowing how to respond appropriately.36000094.331.13.6 Understanding trauma and its impact on33.33% 366.67% 60.00% 00.00% 00.00% 00.00% 094.33
trauma and its impact on 3 6 0 0 0 0 9 4.33
help.
1.13.7 Other community agencies providing specialized services to families and children. 33.33% 44.44% 22.22% 0.00% 0.00% 0.00% 9 4.11
COMMENTS FOR "1.13.1 UNDERSTANDING THE IMPACT OF FAMILY CRISES AND/OR DATE LOSS ON ALL FAMILY MEMBERS ESPECIALLY CHILDREN AND HOW TO RESPOND
APPROPRIATELY."
APPROPRIATELY."

 appropriate agency.
 DATE

 #
 COMMENTS FOR "1.13.4 MAINTAINING CONFIDENTIALITY."
 DATE

 There are no responses.
 Developmental delays, mental ILLNESS, CHRONIC HEALTH PROBLEMS, SUBSTANCE ABUSE AND OTHER SIGNS OF IMMINENT CRISIS AND KNOWING HOW TO
 DATE

DATE

10/10/2022 10:15 AM

COMMENTS FOR "1.13.3 TALKING TO FAMILIES ABOUT DIFFICULT ISSUES AND

Manager and Admin. Asst. is available to counsel parent or refer parent and patron to

HELPING THEM ACCESS ADDITIONAL HELP."

#

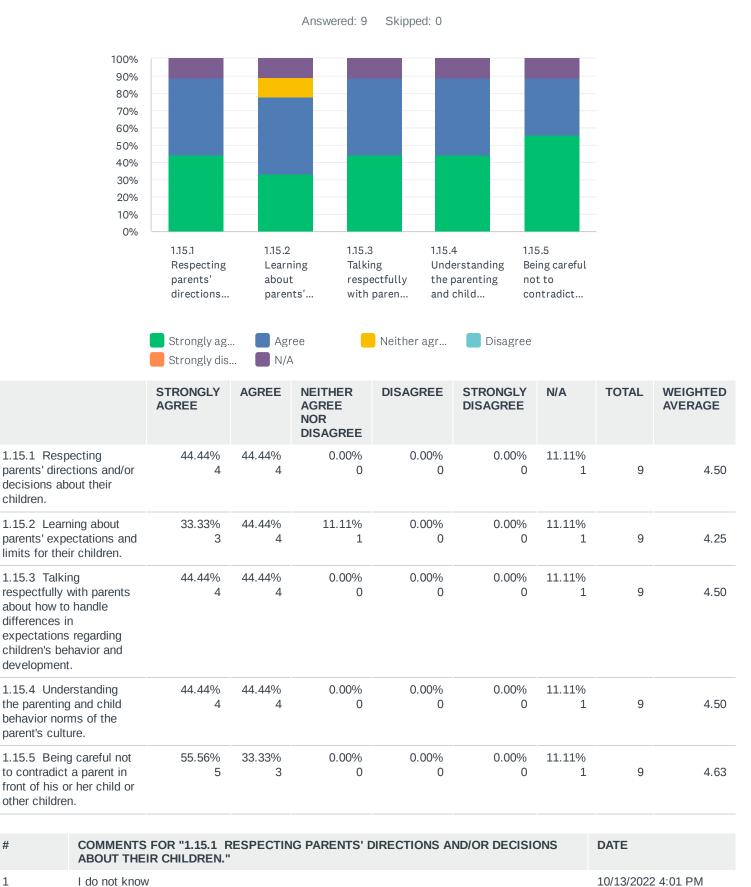
1

1	Monthly meetings with various agencies.	10/10/2022 10:15 AM
#	COMMENTS FOR "1.13.6 UNDERSTANDING TRAUMA AND ITS IMPACT ON CHILDREN AND HOW STAFF CAN HELP."	DATE
1	Monthly meetings with various agencies.	10/10/2022 10:15 AM
#	COMMENTS FOR "1.13.7 OTHER COMMUNITY AGENCIES PROVIDING SPECIALIZED SERVICES TO FAMILIES AND CHILDREN."	DATE
1	Monthly meeting with various agencies.	10/10/2022 10:15 AM

Q15 1.14 Staff receive program support when working with families under stress through:

				Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%		1.14.1 Acknowledg and support their efforts	ement (1.14.2 Dpportunities to process their pwn emotional	1.14.3 Accesto a mental health consultant	l off if	F Time needed.		
		Strongly ag	_	gree /A	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY N/A DISAGREE		TOTAL	WEIGHTED AVERAGE
1.14.1 Acknowledgement and support for their efforts from supervisors and administrators.		44.44% 4	22.22% 2	22.22% 2	0.00% 0	0.00% 0	11.11% 1	9	4.25
1.14.2 Oppo process their emotional re- appropriate s	r own actions with	33.33% 3	33.33% 3	22.22% 2	0.00% 0	0.00% 0	11.11% 1	9	4.13
1.14.3 Acce mental healt consultant.		33.33% 3	22.22% 2	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	4.00
1.14.4 Time needed.	off if	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.25
#		s for "1.14.1 Ervisors ani		EDGEMENT AN TRATORS."	D SUPPORT F		ORTS	DATE	
1	I do not know	N						10/13/2022	2 4:01 PM
#		5 FOR "1.14.2 5 WITH APPRO		NITIES TO PRO JPPORT."	CESS THEIR O	WN EMOTION	4L	DATE	
1	I do not know	N						10/13/2022	2 4:01 PM
#	COMMENTS	S FOR "1.14.3	ACCESS T	O A MENTAL HI	EALTH CONSU	LTANT."		DATE	

1	I do not know	10/13/2022 4:01 PM
#	COMMENTS FOR "1.14.4 TIME OFF IF NEEDED."	DATE
1	I do not know	10/13/2022 4:01 PM



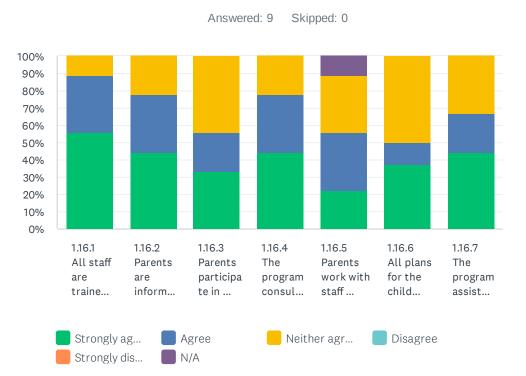
Q16 1.15 Staff reinforce parental authority by:

#

1

2	Homework Help and other planned activities for children.	10/10/2022 10:35 AM
#	COMMENTS FOR "1.15.2 LEARNING ABOUT PARENTS' EXPECTATIONS AND LIMITS FOR THEIR CHILDREN."	DATE
1	I do not know	10/13/2022 4:01 PM
#	COMMENTS FOR "1.15.3 TALKING RESPECTFULLY WITH PARENTS ABOUT HOW TO HANDLE DIFFERENCES IN EXPECTATIONS REGARDING CHILDREN'S BEHAVIOR AND DEVELOPMENT."	DATE
1	I do not know	10/13/2022 4:01 PM
2	through conversations with parents or grandparents.	10/10/2022 10:35 AM
#	COMMENTS FOR "1.15.4 UNDERSTANDING THE PARENTING AND CHILD BEHAVIOR NORMS OF THE PARENT'S CULTURE."	DATE
1	I do not know	10/13/2022 4:01 PM
#	COMMENTS FOR "1.15.5 BEING CAREFUL NOT TO CONTRADICT A PARENT IN FRONT OF HIS OR HER CHILD OR OTHER CHILDREN."	DATE
1	I do not know	10/13/2022 4:01 PM

Q17 1.16 Parents are engaged as partners in developmental screenings or assessments of their child:



	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.	55.56% 5	33.33% 3	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.44
1.16.2 Parents are informed about the confidentiality policy and what it means to them.	44.44% 4	33.33% 3	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.22
1.16.3 Parents participate in the screening and/or are informed of the results of all screenings as soon as possible.	33.33% 3	22.22% 2	44.44% 4	0.00% 0	0.00% 0	0.00%	9	3.89
1.16.4 The program consults with parents immediately when child health, behavior or developmental problems are suspected or identified.	44.44% 4	33.33% 3	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.22
1.16.5 Parents work with staff to develop plans and accommodations for their children based on the screening.	22.22% 2	33.33% 3	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.88
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	12.50% 1	50.00% 4	0.00% 0	0.00% 0	0.00%	8	3.88
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.	44.44% 4	22.22% 2	33.33% 3	0.00% 0	0.00% 0	0.00%	9	4.11

#	COMMENTS FOR "1.16.1 ALL STAFF ARE TRAINED IN THE PROGRAM'S CONFIDENTIALITY POLICY REGARDING SCREENING AND RESULTS."	DATE
1	part of the orientation for staff and volunteers.	10/10/2022 10:35 AM
#	COMMENTS FOR "1.16.2 PARENTS ARE INFORMED ABOUT THE CONFIDENTIALITY POLICY AND WHAT IT MEANS TO THEM."	DATE

1	Privacy Policy.	10/10/2022 10:35 AM
#	COMMENTS FOR "1.16.3 PARENTS PARTICIPATE IN THE SCREENING AND/OR ARE INFORMED OF THE RESULTS OF ALL SCREENINGS AS SOON AS POSSIBLE."	DATE
	There are no responses.	
#	COMMENTS FOR "1.16.4 THE PROGRAM CONSULTS WITH PARENTS IMMEDIATELY WHEN CHILD HEALTH, BEHAVIOR OR DEVELOPMENTAL PROBLEMS ARE SUSPECTED OR IDENTIFIED."	DATE
	There are no responses.	
#	COMMENTS FOR "1.16.5 PARENTS WORK WITH STAFF TO DEVELOP PLANS AND ACCOMMODATIONS FOR THEIR CHILDREN BASED ON THE SCREENING."	DATE
1	I do not know	10/13/2022 4:01 PM
#	COMMENTS FOR "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."	DATE
	There are no responses.	
#	COMMENTS FOR "1.16.7 THE PROGRAM ASSISTS PARENTS IN FINDING AND	DATE
	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."	

Q18 1.17 Parents and staff develop family plans together that:

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	90% 80% 70% 60% 50% 40% 30% 20% 10% 0% 1.17.1 Identify the family's assets, interests,		1.17.2 dentify services and opportunities ree	1.17.3 Identify oth community resources a Neither agr	er upo reg	.4 Are dated ularly.		
	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.	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.00
1.17.2 Identify services and opportunities within the program that may help parents achieve their goals and effectively use their skills and talents.	55.56% 5	44.44% 4	0.00% 0	0.00% 0	0.00% 0	0.00%	9	4.56
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.	66.67% 6	33.33% 3	0.00% 0	0.00% 0	0.00% 0	0.00%	9	4.67
1.17.4 Are updated regularly.	12.50% 1	37.50% 3	37.50% 3	0.00% 0	0.00% 0	12.50% 1	8	3.71

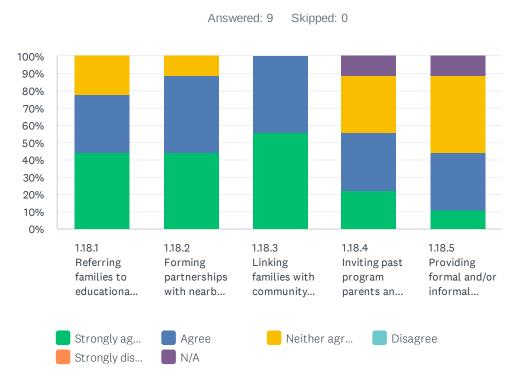
#

COMMENTS FOR "1.17.1 IDENTIFY THE FAMILY'S ASSETS, INTERESTS, SKILLS, DATE NEEDS AND GOALS FOR THEMSELVES AND THEIR CHILDREN."

There are no responses.

#	COMMENTS FOR "1.17.2 IDENTIFY SERVICES AND OPPORTUNITIES WITHIN THE PROGRAM THAT MAY HELP PARENTS ACHIEVE THEIR GOALS AND EFFECTIVELY USE THEIR SKILLS AND TALENTS."	DATE
1	Help Parents and Patron utilize computer to complete job applications and other needs.	10/10/2022 10:35 AM
#	COMMENTS FOR "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."	DATE
	There are no responses.	
#	COMMENTS FOR "1.17.4 ARE UPDATED REGULARLY."	DATE
1	I do not know	10/13/2022 4:01 PM

Q19 1.18 The program supports a parent's personal education and career goals by:



		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.18.1 Refer to educationaresources (e programs, ac education, E employment opportunities literacy, pare job training, j preparation s	al and career .g., GED dult .SL classes, s, workplace enting skills, job	44.44% 4	33.33% 3	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.22
1.18.2 Form partnerships educational r including hig education ins support fami interests and goals.	with nearby resources, her stitutions, to lies' learning	44.44% 4	44.44% 4	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.33
1.18.3 Linki with commun resources fo volunteer and activities and experiences parents' know skills and bu career intere	nity r internships, d leadership d other that expand wledge and ild on their	55.56% 5	44.44% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.56
1.18.4 Inviting past program parents and community volunteers to share their educational and career experiences with families.		22.22% 2	33.33% 3	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.88
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.		11.11% 1	33.33% 3	44.44% 4	0.00%	0.00% 0	11.11%	9	3.63
#	COMMENTS FOR "1.18.1 REFERRING FAMILIES TO EDUCATIONAL AND CAREER DATE RESOURCES (E.G., GED PROGRAMS, ADULT EDUCATION, ESL CLASSES, EMPLOYMENT OPPORTUNITIES, WORKPLACE LITERACY, PARENTING SKILLS, JOB TRAINING, JOB PREPARATION SKILLS)."								
	There are no	responses.							
#	RESOURCE	FOR "1.18.2 F S, INCLUDING NTERESTS AN	HIGHER ED	UCATION INS	ITUTIONS, TO			DATE	
1	Library GED	program. Relatio	onship with I	ocal College.				10/10/2022	2 10:35 AM

#	COMMENTS FOR "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."	DATE
	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	I do not know	10/13/2022 4:01 PM
#	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
1	I do not know	10/13/2022 4:01 PM

Q20 1.19 The program provides opportunities and support for families to serve as leaders and decision-makers by:

Answered: 9 Skipped: 0									
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.19.1 Providing opportunitie for famili	suppor	fami rting regu	ng lies for lar in	1.19.4 Asking families for input into	Pro far ro	9.5 oviding milies with les in		
	Strongly ag.			Neither agr	🗾 Dis	agree			
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGRE	E STRON DISAG		N/A	TOTAL	WEIGHTED AVERAGE
1.19.1 Providing opportunities for families to volunteer and contribute to the program.	44.44% 4	55.56% 5	0.00% 0	0.009	6 O 0	.00% 0	0.00% 0	9	4.44
1.19.2 Encouraging and supporting parents in becoming active members of the program's governing/advisory groups and in taking on leadership roles	22.22% 2	66.67% 6	0.00% 0	0.009	6 O 0	.00% 0	11.11% 1	9	4.25
1.19.3 Asking families for regular input on programmatic decisions.	22.22% 2	44.44% 4	33.33% 3	0.00%	% 0 0	.00% 0	0.00% 0	9	3.89
1.19.4 Asking families for input into staff hiring and training.	11.11% 1	33.33% 3	44.44% 4	0.009	6 O 0	.00% 0	11.11% 1	9	3.63
1.19.5 Providing families with roles in evaluating the program (e.g., parent questionnaires, group evaluation meetings).	37.50% 3	25.00% 2	37.50% 3	0.009	6 O 0	.00% 0	0.00% 0	8	4.00

#	COMMENTS FOR "1.19.1 PROVIDING OPPORTUNITIES FOR FAMILIES TO VOLUNTEER AND CONTRIBUTE TO THE PROGRAM."	DATE
	There are no responses.	
#	COMMENTS FOR "1.19.2 ENCOURAGING AND SUPPORTING PARENTS IN BECOMING ACTIVE MEMBERS OF THE PROGRAM'S GOVERNING/ADVISORY GROUPS AND IN TAKING ON LEADERSHIP ROLES"	DATE
1	I do not know	10/13/2022 4:01 PM
2	SFSA Team	10/10/2022 10:35 AM
#	COMMENTS FOR "1.19.3 ASKING FAMILIES FOR REGULAR INPUT ON	DATE
	PROGRAMMATIC DECISIONS."	DATE
#	PROGRAMMATIC DECISIONS."	DATE
#	PROGRAMMATIC DECISIONS." There are no responses. COMMENTS FOR "1.19.4 ASKING FAMILIES FOR INPUT INTO STAFF HIRING AND	
# 1 #	PROGRAMMATIC DECISIONS." There are no responses. COMMENTS FOR "1.19.4 ASKING FAMILIES FOR INPUT INTO STAFF HIRING AND TRAINING."	DATE
1	PROGRAMMATIC DECISIONS." There are no responses. COMMENTS FOR "1.19.4 ASKING FAMILIES FOR INPUT INTO STAFF HIRING AND TRAINING." I do not know COMMENTS FOR "1.19.5 PROVIDING FAMILIES WITH ROLES IN EVALUATING THE	DATE 10/13/2022 4:01 PM

Q21 1.20 The program promotes participation in activities by:

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.20.1 Addressing topics, isso and skills t	ues	1.20.2 Designing activities to address	1.20.3 Providing ch care during trainings or.	face-1	L ucting co-face or hone		
	Strongly ag.		ree <mark>–</mark> A	Neither agr	Disagree			
	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.	33.33% 3	66.67% 6	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.33
1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).	44.44% 4	55.56% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.44
1.20.3 Providing child care during trainings or workshops.	33.33% 3	33.33% 3	22.22% 2	11.11% 1	0.00% 0	0.00% 0	9	3.89
1.20.4 Conducting face- to-face or telephone outreach to families who might not otherwise participate.	22.22% 2	55.56% 5	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.13

#	COMMENTS FOR "1.20.1 ADDRESSING TOPICS, ISSUES AND SKILLS THAT FAMILIES IDENTIFY AS IMPORTANT TO THEM."	DATE
1	Workshops on budgeting, health fair, Juneteenth etc.	10/10/2022 10:35 AM
#	COMMENTS FOR "1.20.2 DESIGNING ACTIVITIES TO ADDRESS INTERESTS OF DIFFERENT FAMILY MEMBERS (E.G., FATHERS, MOTHERS, OTHER FAMILY MEMBERS)."	DATE

# COMMENTS FOR "1.20.3 PROVIDING CHILD CARE DURING TRAININGS OR WORKSHOPS." DATE There are no responses. There are no responses. DATE # COMMENTS FOR "1.20.4 CONDUCTING FACE-TO-FACE OR TELEPHONE OUTREACH TO DATE DATE	1	May Day, Back to School Bash, Remembering Richardson etc.	10/10/2022 10:35 AM
	#		DATE
# COMMENTS FOR "1.20.4 CONDUCTING FACE-TO-FACE OR TELEPHONE OUTREACH TO DATE		There are no responses.	
FAMILIES WHO MIGHT NOT OTHERWISE PARTICIPATE."	#		DATE
1 I do not know 10/13/2022 4:01 PM			

Q22 1.21 The program helps to support the continued development of parent leaders by supporting:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.21.1 Perso growth s attending o or special o	such as conferences	1.21.2 Lea developm and ment activities	nent trainings toring	1.21.3 Traini opportuniti advocacy ar (e.g., how lo	es for nd civics		
		Strongly ag	_		Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
1.21.1 Person - such as atte conferences of events and co sharing inform interest to oth	ending or special ollecting and nation of	33.33% 3	55.56% 5	0.00% 0	0.00% 0	0.00% 0	11.11% 1	9	4.38
1.21.2 Leade development and mentoring	trainings	22.22% 2	44.44% 4	22.22% 2	0.00% 0	0.00% 0	11.11% 1	9	4.00
1.21.3 Trainir opportunities advocacy and (e.g., how loca government w to foster chan	for I civics al and state <i>v</i> orks, how	22.22% 2	33.33% 3	33.33% 3	0.00% 0	0.00% 0	11.11% 1	9	3.88
#		FOR "1.21.1 P _ EVENTS AND PARENTS."						DATE	
1	I do not know						10/13/2022	2 4:01 PM	
#	# COMMENTS FOR "1.21.2 LEADERSHIP DEVELOPMENT TRAININGS AND MENTORING ACTIVITIES."					RING	DATE		
1	I do not know	/						10/13/2022	2 4:01 PM
#	COMMENTS	FOR "1.21.3 T	Raining C	PPORTUNITIE	S FOR ADVOC	ACY AND CIVI	cs	DATE	

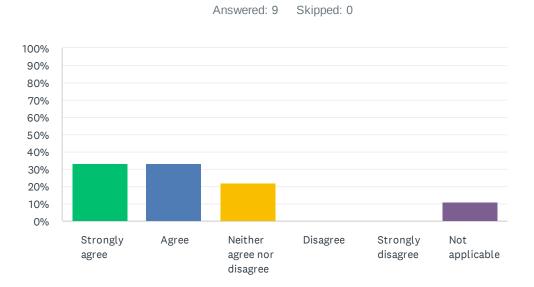
	(E.G., HOW LOCAL AND STATE GOVERNMENT WORKS, HOW TO FOSTER CHANGE)."	
1	I do not know	10/13/2022 4:01 PM

Q23 1.22 The program helps to support parents' opportunities for leadership in community change by:

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	1.22.1 Hosting or linking parents to community ev Strongly ag	Cor par	nnecting rents to vocacy grou	1.22.3 Ensuring tha local, state a federal polic Neither agr	and paren	ecting		
	Strongly dis		_					
	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.	33.33% 3	66.67% 6	0.00% 0	0.00% 0	0.00% 0	0.00%	9	4.33
1.22.2 Connecting parents to advocacy groups that work on issues related to child, family and community needs.	33.33% 3	55.56% 5	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.22
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.	25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.00
1.22.4 Connecting parents to groups that inform and shape policy at the local, state or national level.	37.50% 3	12.50% 1	50.00% 4	0.00% 0	0.00% 0	0.00% 0	8	3.88

#	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	I do not know	10/13/2022 4:01 PM
#	COMMENTS FOR "1.22.4 CONNECTING PARENTS TO GROUPS THAT INFORM AND SHAPE POLICY AT THE LOCAL, STATE OR NATIONAL LEVEL."	DATE
1	I do not know	10/13/2022 4:01 PM

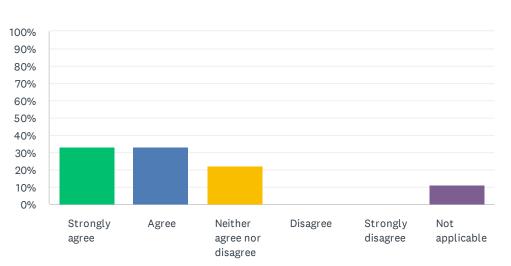
Q24 1.23 Staff receive training on talking with parents about helping children in times of family crisis.



ANSWER CHOICES RESPONSES 33.33% 3 Strongly agree 33.33% 3 Agree 22.22% 2 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 11.11% 1 Not applicable TOTAL 9

#	COMMENT	DATE
1	I do not know	10/13/2022 4:02 PM

Q25 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

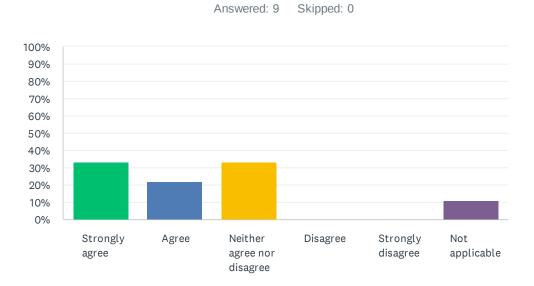


Answered: 9 Skipped: 0

ANSWER CHOICES	RESPONSES	
Strongly agree	33.33%	3
Agree	33.33%	3
Neither agree nor disagree	22.22%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	11.11%	1
TOTAL		9

#	COMMENT	DATE
1	I do not know	10/13/2022 4:02 PM

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 3 33.33% Strongly agree 22.22% 2 Agree 33.33% 3 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 11.11% 1 Not applicable TOTAL 9 # COMMENT DATE 1 I do not know 10/13/2022 4:02 PM

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The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Providing Knowledge of Parenting and Child Development

Robin Perry (Lead Evaluator), Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator), Katrina Evans, Stephanie Harden, Keaven Jones, Philip Mobley, Bonnie O'Neal, Allen Pope, Narrie Smith, Patricia Perry, and Toni Spoliansky (NSFRC SFSA Team support)

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.

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Suggested Citation:

Perry, R., Lancaster, C., Evans, K., Harden, S., Jones, K., Mobley, P., O'Neal, B., Pope, A., Smith, N., Perry, P. & Spoliansky, T. (2023). *The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Providing 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 NorthStar Family Resource Center (NSFRC) 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 NSFRC SFSA team with a specific focus on items/measures associated with supporting families by providing knowledge of parenting and child development supports. 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 NorthStar Family Resource Center. Specific strengths associated with providing knowledge of parenting and child development supports have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

The NorthStar Family Resource Center—History

Partnership for Strong Families (PSF) is 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. PSF 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 Families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

PSF's Family Resource Center Model is built upon a multi-system collaborative focusing on primary and secondary prevention that works toward strengthening families with the goal of preventing child maltreatment and safely reducing entries into foster care. One of the major strengths of the Family Resource Center Model utilized at the five existing sites, including the NorthStar Family Resource Center, is its focus on community collaborations as a means of addressing identified needs in the communities being served.

There is a strong history of collaboration with each of the existing three Family 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 Family Resource Center reports (for each FRC and PSF), website and social media posts, Family 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 focus 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 Gainesville and Lake City communities who have historically had limited access to family support services.

The first Family Resource Center (FRC) developed by Partnership for Strong Families was the Library Partnership RC (developed in collaboration with the Alachua County Library District, DCF, and Casey

Family Programs), which opened its doors in July 2009. Seeking to build upon the perceived success of PSF's first Family Resource Center, partnerships were established to open a second FRC. The Southwest Advocacy Group (SWAG) was an established entity in the community which works to improve the lives of residents in southwest Gainesville by advocating (to public and private organizations) to increase residents' access to resources, based upon community needs. In collaboration with the Southwest Advocacy Group (SWAG) and Alachua County, the SWAG FRC opened its doors to the community in June 2012 and since then has been providing continuous supports and services to individuals and families. Additionally, in 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, another community with historically limited access to resources. PSF was asked to partner with ACLD to open another co-located site at the Cone Park Library. As southeast Gainesville was considered a "hotspot" of high rates of reported child maltreatment, PSF agreed to move forward with this new venture. The Cone Park Library Family Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Family Resource Center began operating full-time in May 2014. Though not a part of this evaluation, Tri-County Community Resource Center opened its doors in March 2015.

PSF had long known that Columbia County, the area directly north of Alachua County, could benefit from an increased level of intervention to combat a rising number of shelters and incidents of child maltreatment. While the population of the county is relatively low, progressively escalating maltreatment counts in Columbia County started rivaling Alachua's over the past 10 years. PSF perceived a need for the development of a Family Resource Center in Lake City, utilizing their FRC Model and developing a service array specific to the needs of the Lake City community. With the assistance of funding from the Children's Bureau Community Collaborations to Strengthen and Preserve Families grant, Partnership for Strong Families opened their newest Family Resource Center serving the Greater Lake City area in March 2021. Prior to opening, PSF staff, community partners, and community volunteers spent months conducting a community needs assessment to ensure the services and supports offered were what was most needed in the community. A visioning session with community leaders was also conducted in late 2020 to further understand the community's needs.

NorthStar Family Resource Center (NSFRC) is co-located on the campus of the Richardson Community Center in the Fergusson Building. This location provides a central location with plenty of space for community events, programs, and family activities. NSFRC is staffed with a Family Resource Center Manager and a part-time Administrative Assistant, along with limited support of community volunteers and commitment of a local Resource Center Advisory Council. The NSFRC offers a variety of no-cost services and supports such as a clothing closet, food distributions, afterschool homework help, community-wide events (e.g., May Day Festivals, Back to School events, COVID-19 Vaccination Drives, Community Health Summits, etc.), job search assistance, and referrals to community partners.

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

The basis of PSF's FRC model is the Strengthening Families Approach and Protective Factors Framework developed by the Center for the Study of Social Policy (Browne, 2014)¹. The model is a collection of

¹ Please see: Browne, C.H. (2014). The Strengthening Families Approach and Protective Factors Framework:

services and supports (stratified by protective factor classification) that may be utilized (at different levels) by patrons at each FRC. Although there may be some common services and supports across FRCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each FRC. All services provided through the FRCs are tied to one of the five protective factors, which 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 NorthStar Family Resource Center to provide patrons and families with 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 NorthStar Family 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 knowledge of parenting and child development. 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 FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.)². The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family 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

² See: CSSP (n.d.) Strengthening Families Self-Assessment Tool for Community-Based Programs. Washington. D.C.: Center for the Study of Social Policy. Available at: <u>https://cssp.org/wp-</u> <u>content/uploads/2018/10/COMMUNITYBASED-PROGRAM-SELF-ASSESSMENT.pdf</u>

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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

Branching Out and Reaching Deeper. Washington, D.C.: The Center for the Study of Social Policy.

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 Family Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons who have been active participants in the program (or whose children participate in the program). The parents/patrons initially selected to be members of each assessment team were chosen following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons) with confirmation that they received services or participated in activities linked to a protective factor and following consultation with NSFRC staff regarding their participation. Unfortunately, one patron was unable to be a member of the team due to personal and parental constraints.

These processes were followed in the establishment of the NSFRC SFSA Team. Composition (see below) includes three direct service staff/volunteers (Philip Mobley, Patricia Perry and Narrie Smith), two community collaborators (Katrina Evans and Stephanie Harden) and three community ambassadors (Keaven Jones, Bonnie O'Neal, and Allen Pope). There is a great deal of overlap in roles throughout the team. Ms. Smith and Ms. Harden have also received services as patrons and Mr. Pope and Mr. Jones have also volunteered at the NSFRC. The term "Community Ambassador" was decided by earlier SFSA Teams (affiliated with the Gainesville FRCs) to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) and 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:

How Does NorthStar Family Resource Center Model Developmentally Appropriate Interactions with Children? (Items 3.11 through 3.47)

How Does NorthStar Family Resource Center Provide Information and Resources on Parenting and Child Development? 3.5 through 3.13)

How Does NorthStar Family 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 NorthStar Family 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

NorthStar Family 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.

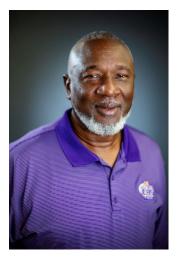
After individual team members completed their scores, these data were shared via a written summary report (see Appendix C for the SFSA Tool for Community-Based Programs— Knowledge of Parenting and *Child Development Results*) highlighting the distribution of responses by team members for each item. Efforts 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 NSFRC. 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 orientation meeting of the NSFRC SFSA Team took place on October 6, 2022. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet for two half-day sessions in November, however a third day was added to cover the material. 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. Subsequent meetings that involved the discussion of Knowledge of Parenting and Child Development items took place on December 5, 2022. The dates and times of meeting were in accordance with preferred times and schedules of all team members and attendees.

The NSFRC Strengthening Families Self-Assessment Team

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



Allen Pope Sr. has visited NorthStar 183 times since first coming in September 2021; much of this time includes regular attendance for the community walk. Allen has also helped with several community events hosted by NorthStar. He has lived in Columbia County since 1973 and graduated from Columbia High before joining the Army. Allen was in the service for three years as a Cannon Crewman then worked at Carlon PVC Pipe Co. He has experience with General Electric as a military policeman in Ocala, FL and as a correctional officer. Allen has been a volunteer coach in Columbia County for 18 years and volunteers at his church, New Bethel AME, in several capacities. Allen is a husband of 22 years to Beverly Pope and father of four biological children and three adopted children. The Popes have fostered over 15 children and provided respite care to other foster families. Mr. Pope shares that he loves the caring and inviting

atmosphere at NorthStar. He is glad that the SFSA team has identified many issues that are lacking in the community and the need for them to be addressed.



Bonnie O'Neal has been coming to NorthStar Family Resource Center since August 2021 as a patron to access services for herself and her family. She was raised in Kissimmee, FL and eventually moved to Lake City, FL in 2019 from Ocala, FL. Bonnie received her Associate of Science degree at Florida Metropolitan University and started schooling to become a medical assistant. Unfortunately, she had to leave the program early to be a caretaker for sick family members. Bonnie is a wife of 28 years to her husband Byron, is a mom to a son and daughter, and loves spending time with her family. She loves everything about NorthStar and was happy to join the SFSA team to be involved and share her experiences.



Keaven Jones is originally from White Springs, FL but has been a part of the Lake City community for 39 years and first started to connect with NorthStar Family Resource Center in May of 2021 as a patron. Keaven works for Career Source Florida Crown as a Workforce Innovation and Opportunity Act (WIOA) supervisor. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market. WIOA also matches employers with the skilled workers they need to compete in the global economy. While he and his two boys are not helping with his mother's yard beautification projects, he is spending time with them and his nieces and nephews at local parks and playgrounds. Keaven loves opportunities that Northstar provides and the support they provide to all cultures. He shares that he "was inspired by the staff and volunteers that I have encountered while attending the

community center" and that "kids that I have met while visiting help to remind me why the future looks so bright."



Dr. Philip Mobley is the NorthStar Family Resource Center Manager and the Senior Minister of the Northside Church of Christ, located in Lake City, FL. He was raised in Lake City but lived for many years in Jacksonville, FL, developing his personal and professional skills. Phil received his Doctoral Degree in Education Leadership from the University of North Florida in 2019, his MBA from Jacksonville University in 2002, and a Bachelor's degree from the University of North Florida in 1975. Dr. Mobley served as a Board Member of the Suwanee Valley United Way and the Community Advisory Board for the Columbia/Hamilton County Health Department. He is currently a member of the Richardson Community Center Advisory Board. Phil is a husband of over 48 years to Lotonia (Toni). They have two children, seven grandsons, and two granddaughters. Phil loves that NorthStar provides services and resources to families to help prevent or resolve crises and develop strategies to strengthen families. Dr. Mobley

shared that he enjoyed hearing everyone's perspective through the Strengthening Families Self-Assessment meetings.



Narragansett "Narrie" Smith, sister of Phil Mobley, has been a longtime patron, supporter, and volunteer of the NorthStar Family Resource Center. She has lived all her life in Lake City, FL. Narrie has a bachelor's degree in Business Administration from the University of North Florida and a master's degree in Educational Leadership from Nova University. After 23 years as a teacher, Narrie became the Principal of Niblack Elementary school, raising their school score from an F to an A. Narrie has served as the Assistant Superintendent of the Columbia County School District and currently sits on the Columbia County School Board. She is a minister and director of Christian Education at New Bethel Missionary Baptist Church. She spends her time volunteering at NorthStar, with Columbia County Schools, and being with family. Narrie is a wife of 47 years to Johnny Smith, mother to two daughters, and proud grandmother of 6. She loves working with

children and models her life around serving God and His people. Narrie was glad to be a part of the SFSA team because it identified areas to grow and improve as a Family Resource Center.



Ms. Patricia A. Perry has been the Administrative Assistant at NorthStar Family Resource Center since before the doors opened to the public in March 2021. She was born and raised in Lake City, FL and has spent much of her life there. Patricia graduated from Columbia High School in 1974 and attended Florida A&M University in Tallahassee and Seattle Central College in Seattle, WA. Starting as a file clerk and working her way up through the Columbia County Clerk of Courts for 30 years, she retired as the Chief Deputy Clerk. Patricia is a wife of 35 years to Nathan Perry Jr. and mother to Joshua Perry. Her church family is a major part of her life, she has been a member of New Bethel Missionary Baptist Church since 1969. Patricia loves that NorthStar makes efforts to help the community in any way possible. She hopes her varied experience and familiarity with the people of Lake City will be a benefit to the community.



Katrina P. Evans, Director of the Columbia County Public Library, has supported the NorthStar Family Resource Center and been a member of the Lake City Resource Center Advisory Council since its inception. She grew up in Lake Placid, FL but has lived in Lake City for more than 25 years. Ms. Evans has a master's degree in Library and Information Studies from Florida State University and a bachelor's degree in literature and history from the University of North Florida. She began her career at the historic Walton-DeFuniak Library and was later hired at Columbia County Public library in 1997. After 19 years of service as Outreach and Youth Services Librarian and Assistant Director, Ms. Evans became the library director in 2016. She has served on the Board of the Northeast Florida Library Information Network and has volunteered in various capacities with the Florida Library Association and Edward Rutledge Chapter, NSDAR. Ms.

Evans has served on local school advisory committees and volunteers with her church. Her husband, Kevin, is a school media specialist at a local elementary school and they have two sons, Drew and Rhys. Katrina joined the SFSA team to learn about local resources that she can take back and share with library staff and patrons. She loves that NorthStar is providing a "one-stop-shop" to our community where people can get assistance with a variety of needs. She shares, "I love that this need is now being met so compassionately by NorthStar Family Resource Center and its amazing staff."



Stephanie Harden began to connect with NorthStar Family Resource Center in January of 2021. Stephanie is a native of Philadelphia, PA, but she has lived in Florida for the last thirteen years. She began working in Lake City last year through a promotion to Hope Navigator II with the Department of Children and Families. Stephanie is working on her master's degree in Strategic Business from Northcentral University and plans to get her doctorate in Theology. She has 30 years of teaching background and over 20 years of customer service experience, along with over 20 years of Ministerial Leadership and Counseling, that she applies to assisting families in need. Stephanie is the business owner/CEO of Loving Arms Services and serves on several boards including the Partnership for Strong Families Children's Partnership Counsel. Stephanie is a wife of 20 years to Pastor Troy Harden, mother of 10 children (blended family), and a grandmother of

17 beautiful grandchildren. In addition to spending time with her family, she reads, loves to thrift store shop, and is completing her first book. Stephanie loves that NorthStar is in a central part of Lake City that needs resources and is working to create a service provision agreement to open a Hope Florida Navigator satellite station at the Family Resource Center. Stephanie was glad to be a part of the SFSA team because there were several wonderful action items to work on. With years of experience in various resource centers Stephanie appreciates the compassion and family atmosphere shown at NorthStar.

Although not formally members of the NSFRC SFSA Team, Dr. Robin Perry (Lead Evaluator) and Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator) attended each of the NSFRC SFSA Team meetings. They, and Toni Spoliansky (Project Director for the *Resource Center Model*:

Evaluation, Refinement, and Expansion grant) who attended these meetings as well, 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 NSFRC. Christen Lancaster is the Community Research Coordinator for the NSFRC, 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 NSFRC. 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 NSFRC to community needs related to supporting families through modeling 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. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (over three days) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in between meetings.

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 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 NSFRC's strengths and potential areas of improvement.

It is important to note, that although discussion and findings summarized in this report are informative and provide insights with respect to how NSFRC is responsive to the parenting and child development knowledge needs of patrons/parents, discussions on these results were more limited as: 1) SFSA Team members highlighted that for many items for which there was consensus agreement, support for these ratings paralleled comments related to staff and volunteer actions, NSFRC activities and supports for other protective factors (primarily promoting parent and family resilience and promoting the social and emotional wellbeing of children); and, 2) due to limited resources and early service and support priorities, NSFRC does not directly provide many of the parenting supports (e.g., parenting education classes and support groups, parent counselling, and/or child development classes or supports) denoted in the assessment tool. According to NFSRCs 2021 Profile of Services and Supports report, "There were only two reported services/supports linked to promote parenting and child development in 2021; these included the provision of information and referrals to parenting classes within the community" (Perry et al., 2022c).

How Does NorthStar Family 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 NSFRC models developmentally appropriate interactions with children. There is a consensus of agreement (reaching an average threshold score of 4.0 or higher) with 7 of the 14 items/indicators (50%) that NSFRC models developmentally appropriate interactions with children, with 7 within the Neither Agree nor Disagree range.

As denoted earlier in other reports (Perry et al., 2022a; 2022b; Lancaster et al., 2022) the SFSA team perceives the skills and competencies of staff and volunteers to be exemplary when interacting with parents and children. Staff "...are committed in their work to support parents and enhance the wellbeing of families..." while "...building a sense of trust with... the development of mutually respectful relationships." (Lancaster et al., 2022). As noted in Perry et al. (2022b), "...staff at NSFRC are caring, engaged and responsive to parents and families in times of distress and crisis." There is frequent engagement with parents/caregivers to "...discuss family circumstances and child/youth developmental issues of importance to enhance a child's life, school success and social and emotional development while providing parents/caregivers with needed support to meet their child's needs..." where staff "...serve as role models for children and parent/caregivers...through interactions with children and in dialog with parents/caregivers about appropriate behavioral expectations for children (and with respect to parenting) that are developmentally appropriate." (Perry et al., 2022a).

The caring approach to providing knowledge of parenting and child development was a great help to one couple in their 80s who adopted their 9-year-old great grandsons. Staff and volunteers were able to sit down with the parents/grandparents one-on-one and share modern parenting techniques, viewpoints, and manage expectations. They were responsive to these engagements, and it appears that the relationship with the boys and their parents/grandparents has strengthened after becoming involved with the center. Incidentally, this family attends the same church as Narragansett Smith, a NSFRC volunteer and SFSA member who often helps with Homework Help and brings her two grandchildren. Though the children are normally required to sit near their parents/grandparents, Ms.

Smith shared that the parents/grandparents were "delighted as a matter of fact" that the youth could sit together at church. In sum, with the establishment of trust, these community members benefited from services and supports at NSFRC and gained knowledge of parenting through a gentle one-on-one approach.

Homework Help at NSFRC is open to children from 1st to 8th grade between 2:45 PM and 4:45 PM Monday through Thursday. The children are provided a snack and spend the time doing their homework, receiving assistance as needed. Often during the same hours, individual tutoring is provided to middle and high school students as well as those studying to pass various educational exams. Many staff and volunteers have an abundance of experience working with children, youth, and families within the community.

The SFSA team agreed that the following actions and attributes were present for staff in their work with parents and children seeking services and supports at NSFRC:

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.

3.1.3 Staff can explain to parents how various activities and interactions support their child's development.

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.

3.4 When staff talk with parents about discipline, they:

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.

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 parents were 'delighted as a matter of fact' that the youth could sit together at church. They had built up trust in community members found through NSFRC and gained knowledge of parenting through a gentle one-on-one approach."

Table 1: How Does NorthStar Family Resource Center Model Developmentally Appropriate Interactions with Children?	Team Score (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.	4.33
3.1.2 Staff understand and can explain the development arc for young children.	3.89
3.1.3 Staff can explain to parents how various activities and interactions support their child's development.	4.11
3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.	3.78
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.	4.11
3.2.2 Staff and parents together use appropriate assessment tools to screen for developmental concerns and monitor development.	3.78
3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.	3.33
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.	3.89
3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.	3.89
3.4.3 Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.	3.89
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.	4.11
3.4.7 Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.	4.11

Items for which there was a consensus of neither agree nor disagree included:

3.1 Staff demonstrate a strong understanding of child development:

3.1.2 Staff understand and can explain the development arc for young children.

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

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

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.

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.

3.4.2 Provide information on age-appropriate positive discipline techniques and reasonable expectations.

3.4.3 Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior.

It is important to note that the lack of consensus agreement on the above items was perceived by SFSA team members to be a by-product of a few factors. These include, but are not limited to, limited formal activities and supports related to promoting parenting and child development knowledge that would afford opportunities for select interactions, and limited knowledge by individual team members on staff practices for select items. The lack of consensus agreement for select items (e.g., 3.12 and 3.14) could signal a need and value for providing additional training and professional development opportunities for staff related to parenting and child development topics. Regardless, there was general consensus (from direct observations, as well as knowledge and experiences working with staff) that key staff and volunteers model developmentally appropriate interactions with children.

How Does NorthStar Family 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 3 of the 30 items/indicators that NSFRC provides information and resources on parenting and child development, with 27 within the Neither Agree nor Disagree range.

The lack of consensus agreement with 90% of the assessment items addressing this question, it was asserted, related to the fact that many members did not think these items had applicability for NSFRC, especially the abundance of items related to the provision of parenting education classes. Parenting education classes, including efforts focused at disseminating information on child development issues, is not a primary focus at NSFRC for reasons documented earlier in this report. When specific parenting and child development needs are identified by staff—typically within the context of providing support primarily targeting other protective factors—efforts are made to connect (via formal referrals) patrons/parents to other service providers in the community.

Regardless, as was identified by other FRC SFSA teams (see, for example, David-John et al., 2021) the NSFRC SFSA team perceived the concept of parenting classes (a focus on many assessment items in Table 2) as stigmatizing for those seeking support from FRCs. There was general agreement, should resources exist, to enhance supports related to this protective factor in a manner that is non-stigmatizing, informal, supportive, and informative. Program staff, volunteers, and community ambassadors agreed that many parents need supports in addition to a growth of knowledge and skill development as parents to better address the developmental needs of their children. Although individual one-on-one support and advice is provided to select parents on these issues, staff highlighted that there are many parents—who seek concrete supports and whose children may participate in select activities—that need to develop foundational knowledge on child safety, child development, cleanliness/hygiene, parenting, parent-child relationship roles, setting boundaries, and discipline related issues. In terms of parenting and relationship roles, staff and collaborative partners highlighted a series of observations and examples of parents' difficulties managing their child(ren)'s behavior, reinforcing "bad"/undesired behaviors, being unaware of potential safety concerns (in the home and in the community; including the use of social media, etc.) their children may be exposed to, and inappropriate

developmental interactions with their children (e.g., parents that are "...trying to be the kids' friends instead of being the parent"). Many parents where these concerns/needs are manifested may have had poor parental role models and/or are young themselves (i.e., are developmentally immature themselves with limited life experiences as a responsible adult) with inadequate or non-existent familial and community supports. Alternatively, it was noted that there are numerous grandparents and great grandparents that are raising their children's or grandchildren's children within the community that need support in managing the developmental needs of children given unique generational issues and demands.

Team members collectively asserted that there is a need for enhancing knowledge of parenting and child development for many parents (and grandparents) in the community served by NSFRC. However, there was consensus that such should not be done via the use of formal parenting classes. Following a description of select alternative means, the team suggested that a more informal or supportive situation/activities, like Parenting Cafés, would be best to consider. Parent Cafés provide a safe, non-judgmental opportunity for parents and caregivers to build their protective factors while engaging in conversations about what it means to keep their children safe and families strong, while also building parent leadership (CSSP, 2015).

Regardless, two of the three items (see Table 2) for which there was consensus agreement among the SFSA team included the following:

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.

Although these items are related to questions associated with parenting classes, team members reflected that their ratings of these items were associated with a general assessment of staff in their interactions with patrons, including parents and children.

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.

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

3.6.4 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.

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.

Table 2: How Does NorthStar Family 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.	3.44		
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.	3.56		
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.	3.56		
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.	3.56		
3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).	3.56		
3.6.5 Classes and programs are delivered by staff with appropriate training and credentials for the program.	3.56		
3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.	4.11		
3.6.7 Child care is offered while parents are in classes.	3.78		
3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.	4.13		
3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.	3.89		
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.	3.78		
3.8.2 Reflect a diversity of racial and ethnic backgrounds and family structures.	3.89		
3.8.3 Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes.	3.89		

There was consensus agreement (see Table 2 Continued) among the SFSA Team that parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:

3.9.4 Regular postings on bulletin boards in public spaces.

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

- 3.9.1 Parenting classes.
- 3.9.2 Books and videos in a resource library.
- 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.

3.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.

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.

There was no consensus agreement for the remaining items of Table 2 (all receiving a consensus neither agree nor disagree rating). 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).

Again, the lack of consensus agreement on all (but one) of items 3.9.1 through 3.13, is primarily a byproduct of the fact that many of the listed resources and supports are not yet offered at NSFRC. However, to reiterate, SFSA team members see the value (and need) for relaying parenting and child development information to parents through alternative means/methods that are less stigmatizing and more empowering when compared to formal parenting classes. Toward this end, the team suggested some exploration of potential efforts of engagement of parents in a manner that is:

- Less focused on lecturing formats for disseminating information.
- More focused on promoting open discussions.
- Perceived as non-threatening, supportive and strength based.
- Possibly utilizes or integrates peer mentoring methods/opportunities.
- Uses small informal groups where parents can "...sit and talk with each other starting out just by sharing how they handle different situations..."
- Perceived as a social event/activity (e.g., have food, etc.) with an initial goal of promoting a level
 of comfort and support among and between parents, building relationships and increasing
 parenting skills.
- Focused on topics of primary interest to parents (i.e., "...parent-based discussions"), with
 practical significance (e.g., how to advocate for their kids in schools and for themselves);
 perhaps utilizing speakers from the community for select topics.

There was some discussion and support for exploring how Parent Cafés and other parent support group models can be utilized to respond to the above noted suggestions. Toward this end, there were statements of support for exploring resources that might already exist in the community that can be integrated into NSFRC activities and/or additional staff resources (including training of current and future staff, as well as collaborative partners that may facilitate these groups) needed to implement any such initiatives leading to the following action item:

Action Item #1: NorthStar FRC will explore the possibility of developing and integrating the use of informal parenting cafes as a support for parents and for enhancement of their child development and parenting knowledge and skill set.

Table 2 (Continued): How Does NorthStar Family 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.	3.67			
3.9.2 Parenting classes.	3.33			
3.9.3 Support groups.	3.34			
3.9.4 Regular postings on bulletin boards in public spaces.	4.25			
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	3.56			
care, nutrition, sleep patterns, Shaken Baby Syndrome, safe sleep, etc.				
3.9.6 Posting of information and links on a program website and/or social media pages accessed				
by participants.	3.78			
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).	3.67			
3.10.2 Counseling.	3.67			
3.10.3 Support groups.	3.78			
3.10.4 Mentors/coaches.	3.89			
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.	3.44			
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				
•Beeds and concerns of first time parents				
•Needs of parents who are parenting a child with a disability				
●Boncustodial 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	3.56			
sleeping patterns, separation issues, aggressive behavior).				
3.12.2 A parent appears to be frustrated or stressed and in need of support.	3.78			
3.12.3 A parent appears to be having difficulty relating to or communicating with their child.	3.78			
3.13 If the program serves expecting families and new mothers and fathers, the program provides				
opportunities for parents to learn about:				
•Brenatal and infant health and development	2.67			
•The birth process and what to expect	3.67			
• The needs of postnatal women and their families				
•The developing role of first time parents (including adolescent parents, if appropriate) •Elanning for the child's needs after birth (e.g, car seats, cribs).				

How Does NorthStar Family 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 2 of the 14 items/indicators that the NSFRC encourages parents to observe, ask questions, explore parenting issues, and try out new strategies, with 12 within the Neither Agree nor Disagree range.

Again, as with many items highlighted in Table 2, there was limited consensus agreement for the majority of assessment items denoted in Table 3 as many of the highlighted supports and activities are

not yet offered at NSFRC. There was a consensus rating of Neither Agree nor Disagree for the following items:

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.
- 3.14.2 Different parenting practices.
- 3.14.3 Parent/child relationships.
- 3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).
- 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.

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

3.15.2 Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.

3.15.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.

For the same question there were five items rated within the consensus of neither agree nor disagree:

- 3.15.1 Regularly checking in with parents about parenting issues.
- 3.15.3 Supporting parents in understanding appropriate developmental expectations for their children with special needs.

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

- 3.15.5 Being especially supportive at the time that special needs are initially identified.
- 3.15.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.

Reflection by team members on these assessment items reiterated thoughts and recommendations denoted earlier, especially on the need to engage parents in an informal and supportive manner. Staff suggested that there were enough parents wanting to improve their parenting and child development knowledge and become more effective parents that would warrant the development of

groups/initiatives that would allow parents to develop a support network and explore parenting issues and try new parenting strategies. This discussion led to the recommended action item:

Action Item #2: NorthStar FRC will explore opportunities and assess the feasibility for securing additional staff and/or other resources (including the training of staff and volunteers) to expand programming that enhances supports for parents related to increasing/promoting knowledge of parenting and child development topics.

It can be said that NSFRC staff strive to observe and ask questions to understand younger generations so they can both assist these youth and help build their connections with their families and communities. One high school youth receiving tutoring services would arrive once a week wearing pajamas. Although staff were perplexed by this dress, the non-judgmental question "help me understand" was asked to further build upon understanding. The SFSA team spoke of the importance of such a question with new generations and fads that come and go.

There was an expanded discussion on the ways several of the SFSA team members have connected with youth and their parents by establishing trust, identifying commonalities and showing/modeling care in every interaction.

Table 3: How Does NorthStar Family Resource Center Encourage Parents to Observe, Ask	Team Score
Questions, Explore Parenting Issues and Try Out New Strategies?	(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.	3.67
3.14.2 Different parenting practices.	3.56
3.14.3 Parent/child relationships.	3.67
3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).	3.56
3.14.5 Being especially supportive at the time that special needs are initially identified.	3.67
3.14.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	3.67
3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	3.56
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.	3.56
3.15.2 Being sensitive to parents' frustration, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.	4.00
3.15.3 Supporting parents in understanding appropriate developmental expectations for their children with special needs.	3.89
3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.	3.67
3.15.5 Being especially supportive at the time that special needs are initially identified.	3.78
3.15.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	4.00
3.15.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	3.67

How Does NorthStar Family 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 5 of the 12 items/indicators that the NSFRC addresses parenting issues from a strength-based prospective, with 7 within the Neither Agree nor Disagree range.

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.
- 3.16.6 Signals that development may not be on track.

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.

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.

The SFSA team discussed that one way these open-ended discussions take place at NSFRC is in speaking to caregivers about their child's behavioral issues during Homework Help. Negative behaviors such as rudeness or aggression were seen as opportunities for staff to discuss age-appropriate expectations regarding their children. Dr. Mobley stated, when speaking of conversations he's had with caregivers about children's behavioral issues or concerns and the need for consequences, "we try our best to be as fair as we can possibly be with the children." In this way, staff model appropriate knowledge of parenting and child development for parents involved in the Homework Help program.

Table 4: How Does NorthStar Family 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.	3.44	
3.16.2 Their children's growth and development patterns.	3.56	
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.	3.56	
3.16.4 Their children's independence and abilities.	3.56	
3.16.5 Activities families can use to enhance their children's skills and development.	3.67	
3.16.6 Signals that development may not be on track.	3.56	
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.	3.89	
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.	4.00	
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.	4.00	

"Staff model appropriate knowledge of parenting and child development for parents involved in the Homework Help program"

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)³ method recommendations—to binary/dichotomous scores where 1=Agree and Strongly Agree, and 0=Disagree, Strongly Disagree,

³ 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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

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.

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 17 (of a possible score of 70) or 24%, suggesting that the services and supports associated with the Knowledge of Parenting and Child Development were implemented with low 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 that the NSFRC does not yet directly provide. NSFRC, however, 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 NSFRC 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.

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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 selfassessment 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
- <u>Concrete Support in Times of Need</u>
- 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 <u>www.mosaic-network.com/gemslive/cssp/</u>. 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.

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

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 How do programs demonstrat		45	Stonely at	hee .	. Heither 28	Disagree	Stonely dis	aste thirteane Comments	
	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 visits are unexpected.								



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS

PARENTAL RESILIENCE: SELF How do programs demonstrat		5	Stoney age	e 8 3:14	either agree	Indisates	stoney dis	stee Amirane
				_	_		_	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 fanny memoers 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		- 55	HUNEW ASTREE	e 3: Heitler ?	2: 11:5880 1:	s Joney issee	& Comments
1.5 Staff show that they value fathers and are sensitive to their unique needed by	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.						
	1.5.5 Engaging male participants to greet other men at program activities.						
	1.5.6 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.						
	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.						



PARENTAL RESILIENCE: SELF	-ASSESSMENT ITEMS		diee	Neither aster	or disagles	after a
How do programs honor each culture, history and approach		5: Ston	A: Agree 3	Neither 28	artists asses 1. stonghi	3.84°
1.6 Program staff ensure that all families, regardless of family structure; socio- economic, racial, religious, and cultural backgrounds;	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
sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	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.					
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.					
appropriate. Materials are:	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.					



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS	/	ally agit	0	age the	allydie	licable	
How do programs demonstrat	e that parents are valued?	6 15:	Joney ages	es Aeith	0: Disab	Stone	aste land	
			/ v . /	3	V	•	Comments	
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	1.8.1 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:	1.8.2 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:	1.9.1 Building a staff that reflects the community and families served.							
Taninies it serves by.	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 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.							



How do programs encourage parents to manage stress effectively?

PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	43. 43.	Unev alles	3. Neither 25th	a ton tradies	Net Holeseee	
					//	Co	mments
 proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, military other family crises Changes or fluctuations in a challenging behavior, fearful 	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 through:	 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 or participate in other parent-only activities. 						



PARENTAL RESILIENCE: SELF- low do programs encourage	ASSESSMENT ITEMS parents to manage stress effectively?	5	Strongly 25	Jee Maree	Neither 28	as nor disati	Stongly dis	Autoricate Autoricate Comments
1.13 Staff know how to re- spond appropriately to family crises that come to their at- tention. Staff receive training and support 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	5	Storey age	e glee	heither age	ise nor disset	stongly dis	and the second s
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.							
	1.14.2 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	Stoney art	ee hetee 3.	Heine age	In tisatee	NOT POST OF PO	ji [®] 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.							



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	rents as decision-makers and help		Stoney as	80	Neither 285	e por disast	stonely dif	38688 J. Hupitcane
build decision-making and le	adership skills?	5	Stru. A:	Agree 3	Nett. 2	Disa. 1	SHO. N	1 APT
								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.							
	1.16.2 Parents are informed about the confidentiality policy and what it means to them.							
	1.16.3 Parents participate in the screen- ing 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.							
	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.							
	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.							
	1.17.2 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 involve- ment and leadership.							
	1.17.4 Are updated regularly.							



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS		all ^{ee}	3. Neither 250	e nor disagre	e iis ^a t	988 - 198
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	43- 43-	Intel ages	3: Neither 25	Jisagree I.	stongly disas	AND COMP.
							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.						
	1.18.4 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	1.19.1 Providing opportunities for families to volunteer and contribute to the program.						
and decision-makers by:	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.						
	1.19.4 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 How do programs support pa build decision-making and le	rents as decision-makers and help	43.	HUNEY ALLES	8 3. Halfer 2	8188 PUT 15-865 2: D5-8688	EE Strongly by	sages Lethnicale Comments
1.20 The program promotes participation in activities by:	1.20.1 Addressing topics, issues and skills that families identify as important to them.						
	1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).						
	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.						
	1.21.3 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:	1.22.1 Hosting or linking parents to com- munity 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS					nordisat	eee /	11 ²⁸
How do programs help parents understand how to buffer their child during stressful times?	45	Strongly 2	tie Agree 3	. Neither age	.Disaglee	Stoney di	
							Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.							
 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 							
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.							



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

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections?			Strongy ar	Lee Ages	Heither 25te	e nor disage	strongly dis	astre .
								Comments
2.1 Families have access to a construction of the second s	omfortable space where they can meet							
2.2 The program provides opportunities for families with similar interests, children's ages and/or circum-	2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses).							
stances (such as those with twins, parents of infants, parents with special-needs	2.2.2 Through parent mentoring and matching for one-on-one support.							
children or parents who speak the same language) to connect with one another:	2.2.3 Informally, by introducing parents to one another.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

DCIAL CONNECTIONS: SELF-/	ASSESSMENT ITEMS		5	88		e nor disagre	50 / S	ARCE . SE
ow do programs help familie se social connections?	es value, build, sustain and	5.	SHOREW 28	Agree 3.	Heither 28:	Jisagree	Stongly dis	asto Lehnicale
								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.							
	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.							
	2.3.6 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.							
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.							
	sitive relationships between families and nal social events where staff can interact with							
	cts families to resources to strengthen , healthy marriage skills, communication skills,							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

SOCIAL CONNECTIONS: SELF- low do programs help familio ise social connections?		5	Stonely al	BEE 3:	Heither Self	e nordisast	stone with	astres A. A. Phylicans Comments
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.							
ipate in program activities by:	2.6.2 Connecting with them on social media platforms through program pages or groups.							
	2.6.3 Offering support with transportation, child care or other barriers to participation.							
	2.6.4 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.							
	isolation or reluctance to participate can ue to differences in race, language, culture, tation, ability, etc.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs create an i			strongly as	heree 3:	Heither 25	e nordisagi	se Stongly dis	estes c. supicals	
1 0		45.	St A	Ne S	2		S. No		
2.8 The program and its staff model positive social skills and community building 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. 							Comments	
	 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:	 2.9.1 Modeling inclusive behavior among the staff. 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. 2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing the forther the statement of the forther the statement of the								
	 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. 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. 								

2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs facilitate m		5	Strongly age	Alles 3:	Heither agree	e nor disagree	se storey his	
		1						Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms nysitting co-ops, play groups, social media an communicate with one another).							
2.12 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:	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.							
the immediate neighborhood or le	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	staff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	ith issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, pport).							
	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.

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5: Strongly agree

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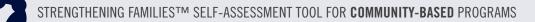
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Not Applicable

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs model developmentally appropriate interactions with children?

					Comments
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.				
	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 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.				
3.3 Physical discipline (i.e., spa by staff or parents.	nking or hitting) is not allowed in the program				

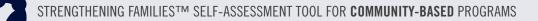


KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		5:5H	AT PRES	Heither 25:05	1: 510 84	aster A heriticalité Comments
3.4 When staff talk with parents about discipline, they:	3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.					
	3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.					
	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.					
	3.4.6 Recognize different parental and cul- tural 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.					



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

KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		1 25	le ⁸	215	se nor disast Disastee	Storey dis	astree at the
How do programs provide in parenting and child develop		5	Strongly 29	Astee 3.	Neither 2	Disagree	Strongly N	aste
								Comments
	s are offered as one among several strategies for f 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.							
	3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	3.6.4 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.							
	3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	3.6.7 Child care is offered while parents are in classes.							
	3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
3.7 Information is provided to p to expect of their children at eac	barents on stages of child development and what the stage.							



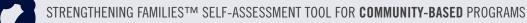
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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		35	J.e.e.	Heither 25	ee nor disage	ee di	allee ulle	
How do programs provide info on parenting and child develo		5	Strongly ar	heree 3	Neither 2	Disagree	Stoney di	aster and a second seco	
		(Ĺ		ĺ	Ĺ	Comments	
3.8 Parenting information and materials used by the program are culturally and	3.8.1 Are available in the language spoken by program families.								
linguistically appropriate, and:	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.								
3.9 Parenting and child development information is provided through multiple av-	3.9.1 Books and videos in a resource library.								
enues to meet diverse learning styles, including:	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	3.9.4 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.								
	3.9.6 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	3.10.1 Parent education groups (including fatherhood groups).								
different ways of parenting, such as:	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.								



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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	ormation and resources	5	Stonely as	, heree 3:	Neither 25th	e nor disaet	se Strongly dif	ages Lennicans	
to the needs of parents in differen • Different parenting styles of r • Needs and concerns of first t • Needs of parents who are pa • Noncustodial parents	nothers and fathers and the strengths of each ime parents							Comments	
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.								
 the program provides opportuniti Prenatal and infant health an The birth process and what t The needs of postnatal wome The developing role of first tin if appropriate) 	d development o expect								

XNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS low do programs encourage explore parenting issues and	5	Stoney 25	ee , heree 3	Heimer 28	bisages	se strongly disso	Asee hepitcale	
3.14 Parents and staff work together to design and orga-	3.14.1 Cultural/ethnic expectations and practices about parenting.							
nize opportunities for parent led discussions (such as a Community Café or Parent	3.14.2 Different parenting practices.							
Café series) to explore:	3.14.3 Parent/child relationships.							
	3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	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.							

NOWLEDGE OF PARENTING A ELF-ASSESSMENT ITEMS ow do programs encourage xplore parenting issues and	parents to observe, ask questions,	, 13	attorety age	ee helee 3.	Beitter age	insates	stonely dis	Pages L. Frinchis
								Comments
3.15 Staff recognize and support the parenting	3.15.1 Regularly checking in with parents about parenting issues.							
challenges experienced by families with children who have special needs by:	3.15.2 Being sensitive to parents' frustra- tion, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.							
	3.15.3 Supporting parents in understand- ing appropriate developmental expectations for their children with special needs.							
	3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.							
	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.							



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



					Comments
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.				
	3.16.2 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.				
	3.16.6 Signals that development may not be on track.				
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.				
	3.17.2 Sharing something positive with parents about their children's behavior and development.				
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.				
	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.				



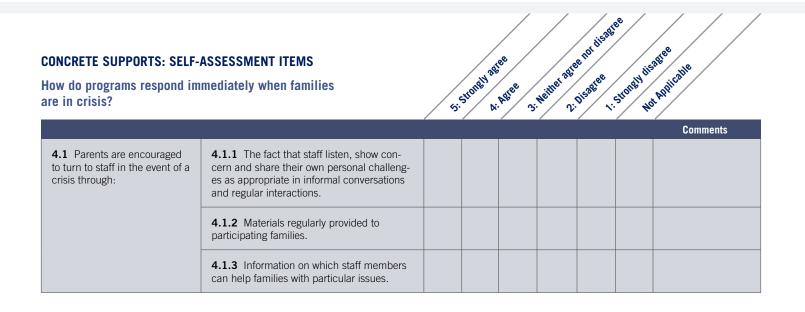
CONCRETE SUPPORT IN TIMES OF NEED

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.





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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		agre	,e	atte	enu	dis	agreete	
How do programs respond im are in crisis?	mediately when families	5	Stronghy 2818	Allee 3:	Neither 2:	Disagree 1:	Stonely dis	ASIE CAPICABLE	
				/	/	/		Comme	nts
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 experi- encing 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.								
	4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.								
	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.								



4.4 Staff proactively respond

to signs of parent or family

distress by:

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

help.



	resources, including help lines, community resources or public agencies.				
	4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.				
	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.				
0	hare 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?	5	Stonely as	Pares 3. W	2:11:2:15:25 ¹⁰	1:500000 HO	Applicable	
					· · · · ·		Comments
4.6 The program actively builds collaborative links with other service providers by:	4.6.1 Bringing services on site, when possible.						
other service providers by:	4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.						
	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.						



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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS				einer astee	nor disagree	aute	¢ / /	
How do programs help familie identify their needs and conn	es to develop skills they need to ect to supports?	5	Strongly agree	ASTER 3:	Neither 2816C	Sagree 1: St	onew disagre	hicale	
				/				Comments	
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.								
	4.7.5 Connecting parents to peer-to-peer navigation support.								
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.								
port family feadership of.	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).								



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 CON SELF-ASSESSMENT ITEMS How do programs help paren emotional development?		5	Stoney Ste	e stee 3.	setter agree	In disages	UNEW DISARS	
								Comments
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.							
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							



OCIAL AND EMOTIONAL CON ELF-ASSESSMENT ITEMS			Watter	e 3: Heitner?	Blee Int disat	Standy liss	10° calle
ow do programs model nurt	uring care to children?	13 ⁻¹³	Intel 28100	e 3: Heitne.	2: 0158951	Strong, Not	At the second second
							Comments
5.4 Staff nurture children and model nurturing for parents by:	5.4.1 Responding consistently to children in a warm, supportive manner.						
Cy.	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.						

OCIAL AND EMOTIONAL CON ELF-ASSESSMENT ITEMS ow do programs model nurt		45 ⁻⁵⁵	Inter after	3. Neither 2. 195	at 1:520 88	sates strainicale Comments
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	5.5.1 Fostering children's social and emotional development in the context of their culture and language.					
social emotional development, including:	5.5.2 Recognizing behavioral/emotional problems or developmental delays.					
	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.					
	5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.					
	5.5.6 Promoting positive relationships among children living in the same household.					
	5.5.7 Promoting positive relationships among children living in the same household.					
	5.5.8 Understanding how mental health and wellness affects family relationships and the developmental process of young children.					
	5.5.9 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.					
5.6 Families are invited to obser and/or staff in the program.	ve their children interacting with other children					



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs include chi development activities in pro	Idren's social and emotional	45 ^{, 63}	LINGH AFE	3. Neither all	se norisatee insatee	AN 15-2020 Not funitable Comments
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).					
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.					

							/ /		
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		att	e ^e		ee nor disate	je ^e	alles	
How do programs help childr identity and learn to interact	en develop a positive cultural in a diverse society?	45	Stoney ar	Agree 3	Neither 25	Disagree	Stongy di	agic light	
		ĺ						Comments	;
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.								
5.10 Staff receive training on how cultural differences affect social and emotional development especially	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.								
ment, especially differences in:	5.10.2 The extent to which nonverbal com- munication 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, languag-	5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.								
es 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.								
	tices support the preservation of home lan- ne languages and dialects of the children and								
	Ith consultant offers consultation that is ting behaviors and child behaviors that stem .								
5.14 Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.								

SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs respond pr emotional development need	roactively when social or	4	STOREN 25	, heree 3:	Neither aste	e not isse	Stonely dis	Applicable Comments
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.							
	5.15.2 Arranging for appropriate screenings and assessments.							
	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.							



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 RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

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HOW DO PROGRAMS RESPON Or neglect?	D TO POSSIBLE CHILD ABUSE	5:5101811	utres A: Astes 3: Neith	et 26152 10 10 10 10 10 10 10 10 10 10 10 10 10	Not Main Calle
					Comments
6.1 When children enter the program, staff discuss child abuse and neglect prevention with all parents and caretak-	6.1.1 The program's policies and practices that are designed to keep children safe from harm.				
ers. This discussion includes explanations of:	6.1.2 Staff members' responsibility as man- datory child abuse and neglect reporters.				
	6.1.3 How the state defines child abuse and neglect.				
	6.1.4 The program's protocols regarding child abuse and neglect reports.				
6.2 All staff members are trained abuse reporting laws.	d according to their state's mandatory child				
6.3 Staff receive additional training on child abuse and neglect including:	6.3.1 Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.				
	6.3.2 Following the program's protocols for reporting child abuse and neglect.				
	6.3.3 Understanding how cases are generally handled by the child protective services agency once a report is made.				
	6.3.4 The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.				
	6.3.5 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**?

HOW DO PROGRAMS RESPON Dr Neglect?	D TO POSSIBLE CHILD ABUSE	6	Stoney as	ABLES 3:	Heiline ages 1	or disaster	bisages Not heritable Comment	s
6.4 The program's protocols for reporting possible child abuse and neglect:	6.4.1 Are consistent with state child welfare reporting guidelines.							
	6.4.2 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	6.5.1 Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.							
responsibilities to both the child welfare agency and to families that include:	6.5.2 Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.							
	6.5.3 Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.							
	6.5.4 Striving to be calm, caring and supportive of the family during the reporting process.							
	6.5.5 Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.							
	6.5.6 Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.							
6.6 If a child is placed into child welfare custody, staff are trained to continue to support	6.6.1 Maintaining contact with the child and family, if possible.							
the child and the family by:	6.6.2 Advocating for the family with the Child Protective Services system, when possible.							
	6.6.3 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	6.7.1 Helping to maintain stability for children involved in the system.				
Protective Services staff to promote the child's ongoing healthy development by:	6.7.2 Engaging in co-case management practices, if possible.				
	6.7.3 Conducting joint home visits.				
	6.7.4 Attending Child Protective Services meetings to share information.				

Appendix B

Electronic Version of Knowledge of Parenting and Child Development Questions of SFSA Tool



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.

What 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
- O 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 development:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.1.1 Staff model developmentally appropriate responses to children's behavior, interests, temperaments and need for exploration and learning.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.1.2 Staff understand and can explain the development arc for young children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
3.1.3 Staff can explain to parents how various activities and interactions support their child's development.Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
						1
3.1.4 Staff participate in regular training that updates their knowledge on advances in understanding child development.Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

			Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N
gular communication,	common under nated action to	ship with parents to ensure rstanding of the child's provide each child with the opmental stage.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	C
omments								
screen for developmen		propriate assessment tools nd monitor development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Ļ
omments								
Strongly agree Not applicable	Agree	O Neither agree nor dis	agree	🔵 Disa	agree (Strong	ly disagre	e
,omment								

3.4 When staff talk with parents about discipline,	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.4.2 Provide information on age-appropriate positive discipline techniques and reasonable expectations.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
3.4.3 Offer ideas for alternate ways to manage children's behavior and to recognize and reinforce desired/appropriate behavior. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
3.4.4 Encourage parents to discuss behavior challenges they may have at home. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
3.4.5 Connect parents to other parents who can share or model positive parenting approaches. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
3.4.6 Recognize different parental and cultural approaches to discipline and discuss them with parents. Comments	0	0	0	0	0	
3.4.7 Make arrangements to have appropriate language and cultural interpreters to support difficult conversations with families.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						



How do programs provide information and resourdevelopment?	ces on j	paren	ting an	d child		
3.5 Parenting education classes are offered as of increasing parents' knowledge of parenting and increasing parents' knowledge of parenting and Strongly agree Agree Neither agree nor disa Not applicable Comment	child d	Disa	oment. agree (Strong	gly disagre	e
3.6 Parenting education classes are offered in a wather field, including:	ay that Strongly agree		Neither agree nor	-	es in Strongly e disagree	N/A
3.6.1 Parents go through a series of classes as a group - with other forms of contact between classes to maintain their engagement. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	
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. Comments	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right\rangle$
Comments						1

6.6 Staff exhibit warmth, genuineness, flexibility, empathy and ood communication skills with families.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
omments						
6.7 Child care is offered while parents are in classes.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
8.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
3.7 Information is provided to parents on stages expect of their children at each stage. Strongly agree Agree Neither agree nor disage		ld deve			what to	
3.7 Information is provided to parents on stages expect of their children at each stage.						
3.7 Information is provided to parents on stages expect of their children at each stage. Strongly agree Agree Not applicable						
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3.7 Information is provided to parents on stages expect of their children at each stage. Strongly agree Agree Not applicable						
3.7 Information is provided to parents on stages expect of their children at each stage. Strongly agree Agree Not applicable						

3.8.1 Are available in the language spoken by program families. O O Comments Image: Comments structures. Image: Comments structures. Image: Comments structure, rather than encouraging stereotypes. 3.8.3 Encourage parents to reflect on their own parenting history and culture, rather than encouraging stereotypes. Image: Comments structure structur		\bigcirc
2.8.2 Reflect a diversity of racial and ethnic backgrounds and amily structures. Comments 2.8.3 Encourage parents to reflect on their own parenting history nd culture, rather than encouraging stereotypes.		
Amily structures.		
3.8.3 Encourage parents to reflect on their own parenting history O O O	\bigcirc	þ
and culture, rather than encouraging stereotypes.		
Comments	\bigcirc	

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

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.9.1 Books and videos in a resource library.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.9.2 Parenting classes.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
3.9.3 Support groups.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.9.4 Regular postings on bulletin boards in public spaces.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

10.1 Parent education groups (including fatherhood groups). omments 10.2 Counseling. omments 10.3 Support groups. omments 10.4 Mentors/coaches. omments			O O	Disagree		
.10.2 Counseling. comments .10.3 Support groups. omments .10.4 Mentors/coaches.	0	0	0	0	0	¢
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.10.4 Mentors/coaches.				0	\bigcirc	
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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	Ĭ
.10.5 Parenting groups and organizations that promote social	\frown	\sim		\frown		
aclusion and host groups that correspond to different ethnic, altural and linguistic groups represented in the community.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
omments						
 3.11 Parent education offerings and staff coach the needs of parents in different circumstance Different parenting styles of mothers and fathers Needs and concerns of first time parents Needs of parents who are parenting a child with Noncustodial parents Nontraditional caregivers (e.g., grandparents, for Strongly agree Agree Neither agree nor d Not applicable Comment 	s. For exa and the s a disabilit ster paren	mple: strengt cy nts)	-	ch	sive to dy disagre	е

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

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:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
3.14.1 Cultural/ethnic expectations and practices about parenting.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.14.2 Different parenting practices.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
3.14.3 Parent/child relationships.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
3.14.5 Being especially supportive at the time that special needs are initially identified.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
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	\bigcirc	\bigcirc	\bigcirc	
Comments						
3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

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		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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.16.2 Their children's growth and development patterns.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.16.4 Their children's independence and abilities.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.16.5 Activities families can use to enhance their children's skills and development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
3.16.6 Signals that development may not be on track.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

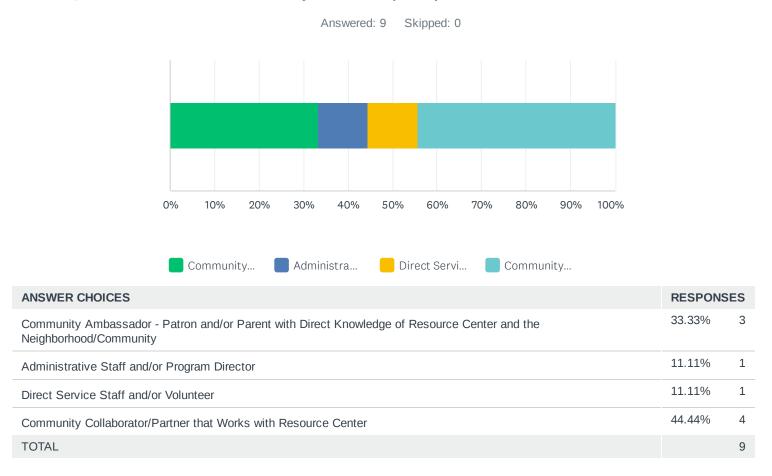
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dren's behavior and development. Inments A Staff proactively and respectfully address concerns about parenting techniques behavior by: Neither agree Strongly nor Strongly agree Agree disagree Disagree disagree Disagree disagree Disagree disagree Disagree disagree in the parent's perspective. Inments B.2 Acknowledging young children's frustrating behavior and ognizing parents' efforts to deal with it effectively. Inments B.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. Inments B.4 Connecting parents to resources and supports that may p to address parenting issues.	Comments						
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A Staff proactively and respectfully address concerns about parenting techniques behavior by: Neither agree Strongly nor Strongly agree Agree disagree Disagree disagree N/A 8.1 Asking open-ended questions to understand the behavior n the parent's perspective. B.2 Acknowledging young children's frustrating behavior and ognizing parents' efforts to deal with it effectively. B.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. B.4 Connecting parents to resources and supports that may p to address parenting issues.	3.17.2 Sharing something positive with parents about their children's behavior and development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right\rangle$
behavior by: Neither agree Strongly agree Nor Strongly agree Naree Agree disagree B.1 Asking open-ended questions to understand the behavior n the parent's perspective. Image: Construction of the parent's perspective. numents Image: Construction of the parent's perspective. Image: Construction of the parent's perspective. B.2 Acknowledging young children's frustrating behavior and ognizing parents' efforts to deal with it effectively. Image: Construction of the parent's perspective. B.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. Image: Construction of the parent's to resources and supports that may or to address parenting issues.	Comments						
n the parent's perspective.	.18 Staff proactively and respectfully address cor r behavior by:	Strongly		Neither agree nor	-	Strongly	N/A
nments B.2 Acknowledging young children's frustrating behavior and ognizing parents' efforts to deal with it effectively. Inments B.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. Inments B.4 Connecting parents to resources and supports that may o to address parenting issues.	3.18.1 Asking open-ended questions to understand the behavior from the parent's perspective.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
 8.2 Acknowledging young children's frustrating behavior and ognizing parents' efforts to deal with it effectively. nments 8.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. 8.4 Connecting parents to resources and supports that may o to address parenting issues. 							
ognizing parents' efforts to deal with it effectively. nments 8.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. nments 8.4 Connecting parents to resources and supports that may p to address parenting issues.	Comments						
8.3 Sharing concerns about a child's behavior and/or about the ents' parenting practices and respectfully offering alternatives. nments 8.4 Connecting parents to resources and supports that may p to address parenting issues.	3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right\rangle$
ents' parenting practices and respectfully offering alternatives.	Comments						
ents' parenting practices and respectfully offering alternatives.	3.18.3. Sharing concerns about a child's behavior and/or about the						
8.4 Connecting parents to resources and supports that may o o o o o o o	parents' parenting practices and respectfully offering alternatives.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
p to address parenting issues.	Comments						
p to address parenting issues.							
nments	3.18.4 Connecting parents to resources and supports that may help to address parenting issues.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	ϕ
	Comments						
	<u>-</u>						

Appendix C

NorthStar Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— Knowledge of Parenting and Child Development Results

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



Q2 3.1 Staff demonstrate a strong understanding of child development:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70%								
	60% 50% 40% 30% 20%								
	10% 0%	3.1.1 Staff model development appropriate	un ally car	2 Staff derstand and n explain the velopment a	31.3 Staff can explain 1 parents how various	regulai			
		Strongly ag Strongly dis	Agre N/A	ee 🧧	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.1.1 Staff r development appropriate r children's be interests, ter and need for and learning.	ally esponses to havior, nperaments exploration	44.44% 4	44.44% 4	11.11% 1	0.00% 0	0.00% 0	0.00% 0	9	4.33
3.1.2 Staff u and can expl development children.		22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
parents how	d interactions child's	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
3.1.4 Staff p regular trainin updates thein on advances understandin development	ng that r knowledge in ig child	22.22% 2	33.33% 3	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.78
#	RESPONSES	FOR "3.1.1 STA	'S BEHAVIO				ED	DATE	
1	FOR EXPLOR	RATION AND LE	ARNING."					10/17/2022	2 3:32 PM

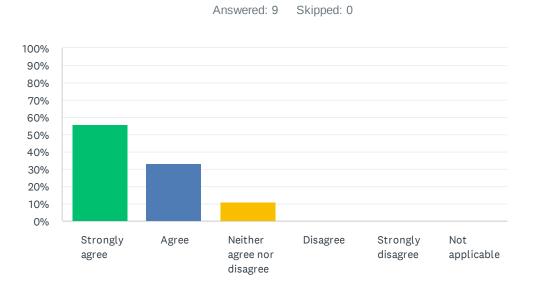
#	COMMENTS FOR "3.1.2 STAFF UNDERSTAND AND CAN EXPLAIN THE DEVELOPMENT ARC FOR YOUNG CHILDREN."	DATE
1	Unknown	10/17/2022 3:32 PM
#	COMMENTS FOR "3.1.3 STAFF CAN EXPLAIN TO PARENTS HOW VARIOUS ACTIVITIES AND INTERACTIONS SUPPORT THEIR CHILD'S DEVELOPMENT."	DATE
1	Unknown	10/17/2022 3:32 PM
#	COMMENTS FOR "3.1.4 STAFF PARTICIPATE IN REGULAR TRAINING THAT UPDATES THEIR KNOWLEDGE ON ADVANCES IN UNDERSTANDING CHILD DEVELOPMENT."	DATE
1	Unknown	10/17/2022 3:32 PM

Q3 3.2 Staff work collaboratively with parents to coordinate support for children's development:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	partnersł ensure re	develop an nip with par- gular comm understand	ents to nunication,	togethe assessr	aff and parents er use appropriate nent tools to scr omental concerns	een for		
		Strongly ag Strongly dis	Agre N/A	ee 🧧	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.2.1 Staff de ongoing partr parents to er communicati understandin child's develo coordinated a provide each appropriate e for their develo stage.	nership with asure regular on, common g of the opment and action to child with the xperiences	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
3.2.2 Staff at together use assessment screen for de concerns and development	appropriate tools to evelopmental d monitor	11.11% 1	55.56% 5	33.33% 3	0.00% 0	0.00% 0	0.00%	9	3.78
#	# COMMENTS FOR "3.2.1 STAFF DEVELOP AN ONGOING PARTNERSHIP WITH PARENTS DATE 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."								
1	Unknown							10/17/2022	2 3:32 PM
#	COMMENTS FOR "3.2.2 STAFF AND PARENTS TOGETHER USE APPROPRIATE DATE ASSESSMENT TOOLS TO SCREEN FOR DEVELOPMENTAL CONCERNS AND MONITOR DATE								

1	Unknown	10/17/2022 3:32 PM

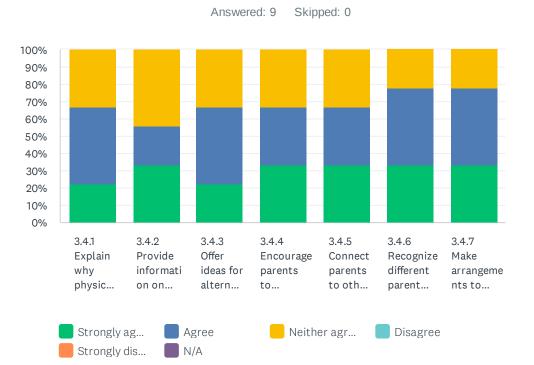
Q4 3.3 Physical discipline (i.e., spanking or hitting) is not allowed in the program by staff or parents.



ANSWER CHOICES	RESPONSES		
Strongly agree	55.56%		5
Agree	33.33%		3
Neither agree nor disagree	11.11%		1
Disagree	0.00%		0
Strongly disagree	0.00%		0
Not applicable	0.00%		0
TOTAL			9
# COMMENT		DATE	

There	are	no	responses.

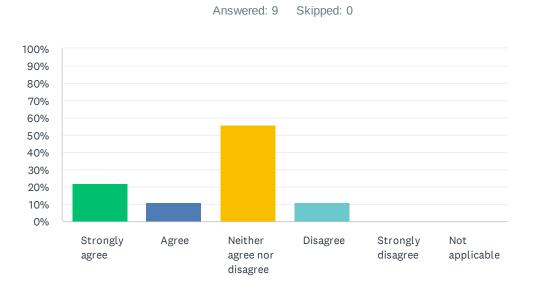




		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.4.1 Explai physical disc allowed in th even though different from approach to	cipline is not e program, this may be n the family's	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
3.4.2 Provide on age-appro positive disc techniques a expectations	opriate ipline and reasonable	33.33% 3	22.22% 2	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.89
	ys to manage havior and to id reinforce	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
to discuss b	irage parents ehavior hey may have	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.00
3.4.5 Conne other parents share or moo parenting ap	del positive	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.00
3.4.6 Recogn parental and approaches and discuss parents.	to discipline	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
to have appr language and interpreters t	d cultural	33.33% 3	44.44% 4	22.22% 2	0.00%	0.00% 0	0.00% 0	9	4.11
#	THE PROGR	FOR "3.4.1 EXI AM, EVEN THO TO DISCIPLINE	JGH THIS I				IN	DATE	
1	Unknown							10/17/2022	2 3:32 PM
#		FOR "3.4.2 PRO TECHNIQUES A				RIATE POSITIV	Έ	DATE	
1	Unknown							10/17/2022	2 3:32 PM
#	CHILDREN'S	For "3.4.3 ofi Behavior Ani Propriate Be	D TO RECO			MANAGE		DATE	
1	Unknown							10/17/2022	2 3:32 PM
#		FOR "3.4.4 ENG AVE AT HOME."		PARENTS TO	DISCUSS BEH	AVIOR CHALLE	INGES	DATE	
1	Unknown							10/17/2022	2 3:32 PM

#	COMMENTS FOR "3.4.5 CONNECT PARENTS TO OTHER PARENTS WHO CAN SHARE OR MODEL POSITIVE PARENTING APPROACHES."	DATE
	There are no responses.	
#	COMMENTS FOR "3.4.6 RECOGNIZE DIFFERENT PARENTAL AND CULTURAL APPROACHES TO DISCIPLINE AND DISCUSS THEM WITH PARENTS."	DATE
1	Unknown	10/17/2022 3:32 PM
#	COMMENTS FOR "3.4.7 MAKE ARRANGEMENTS TO HAVE APPROPRIATE LANGUAGE AND CULTURAL INTERPRETERS TO SUPPORT DIFFICULT CONVERSATIONS WITH FAMILIES."	DATE
1	Unknown	10/17/2022 3:32 PM

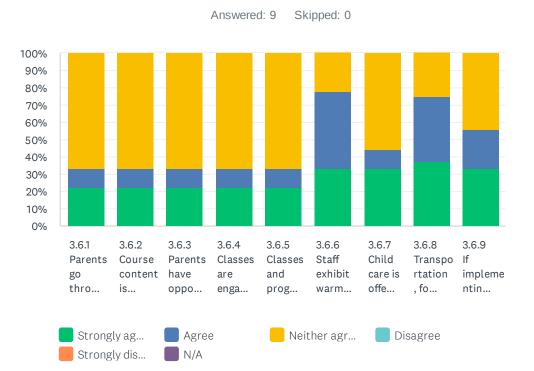
Q6 3.5 Parenting education classes are offered as one among several strategies for increasing parents' knowledge of parenting and child development.



ANSWER	CHOICES		RESPONSES		
Strongly a	gree		22.22%		2
Agree			11.11%		1
Neither ag	Neither agree nor disagree		55.56%		5
Disagree		11.11%		1	
Strongly o	Strongly disagree		0.00%		0
Not applic	able		0.00%		0
TOTAL					9
#	COMMENT			DATE	
1	Unknown			10/17/2022 3:38 PM	
2	None offered.			10/14/2022 11:30 AM	

98

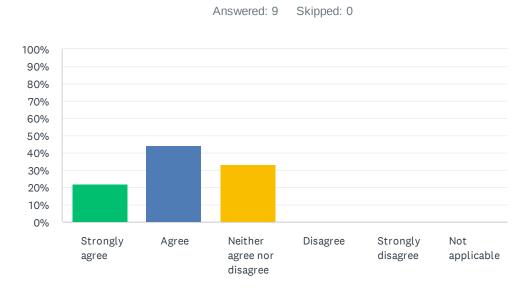
Q7 3.6 Parenting education classes are offered in a way that reflects best practices in the field, including:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.6.1 Parents go through a series of classes as a group - with other forms of contact between classes to maintain their engagement.	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
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.	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
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.	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
3.6.4 Classes are engaging and interactive with opportunities for discussion and reflection (rather than being overly reliant on lecture and written information).	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
3.6.5 Classes and programs are delivered by staff with appropriate training and credentials for the program.	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
3.6.7 Child care is offered while parents are in classes.	33.33% 3	11.11% 1	55.56% 5	0.00% 0	0.00% 0	0.00%	9	3.78
3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.	37.50% 3	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.13
3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.	33.33% 3	22.22% 2	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.89

#	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	10/17/2022 3:38 PM
#	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	10/17/2022 3:38 PM
#	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	10/17/2022 3:38 PM
#	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	10/17/2022 3:38 PM
#	COMMENTS FOR "3.6.5 CLASSES AND PROGRAMS ARE DELIVERED BY STAFF WITH APPROPRIATE TRAINING AND CREDENTIALS FOR THE PROGRAM."	DATE
1	Unknown	10/17/2022 3:38 PM
#	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	Unknown	10/17/2022 3:38 PM
#	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
1	Unknown	10/17/2022 3:38 PM

Q8 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	22.22%	2	2
Agree	44.44%	4	1
Neither agree nor disagree	33.33%	3	3
Disagree	0.00%	0)
Strongly disagree	0.00%	0)
Not applicable	0.00%	0)
TOTAL		9)
# COMMENT		DATE	

Unknown

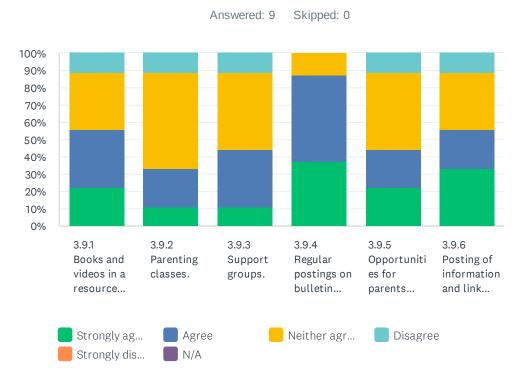
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10/17/2022 3:38 PM

Q9 3.8 Parenting information and materials used by the program are culturally and linguistically appropriate, and:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40%								
	30% 20% 10% 0%								
0%		3.8.1 Are av in the lang spoken by families.	uage program	3.8.2 Refl diversity and ethn backgrou	of racial ic ınds and	3.8.3 Encours parents to re their own pa history and o	eflect on renting		
		Strongly ag Strongly dis		ee 🦲	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.8.1 Are availat language spoken program families.	by	22.22% 2	33.33% 3	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.78
3.8.2 Reflect a d of racial and ethn backgrounds and structures.	ic	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
3.8.3 Encourage to reflect on their parenting history culture, rather tha encouraging stere	own and an	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
	OMMENTS MILIES."	FOR "3.8.1 AR	e availab	LE IN THE LAN	NGUAGE SPOR	KEN BY PROGR	RAM	DATE	
1 Un	Unknown							10/17/2022	2 3:38 PM
	# COMMENTS FOR "3.8.2 REFLECT A DIVERSITY OF RACIAL AND ETHNIC BACKGROUNDS AND FAMILY STRUCTURES."							DATE	
1 Un	Unknown							10/17/2022	2 3:38 PM
# COMMENTS FOR "3.8.3 ENCOURAGE PARENTS TO REFLECT ON THEIR OWN PARENTING HISTORY AND CULTURE, RATHER THAN ENCOURAGING STEREOTYPES."								DATE	
1 Un	known							10/17/2022	2 3:38 PM

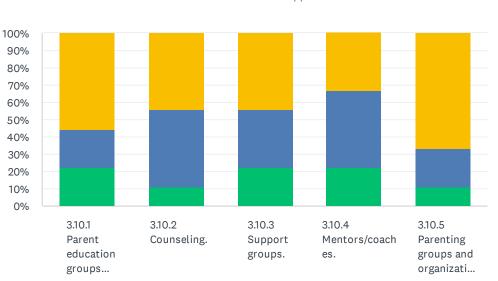
Q10 3.9 Parenting and child development information is provided through multiple avenues to meet diverse learning styles, including:



	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.9.1 Books and videos in a resource library.	22.22% 2	33.33% 3	33.33% 3	11.11% 1	0.00% 0	0.00% 0	9	3.67
3.9.2 Parenting classes.	11.11% 1	22.22% 2	55.56% 5	11.11% 1	0.00% 0	0.00% 0	9	3.33
3.9.3 Support groups.	11.11% 1	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	9	3.44
3.9.4 Regular postings on bulletin boards in public spaces.	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
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.	22.22% 2	22.22% 2	44.44% 4	11.11% 1	0.00% 0	0.00% 0	9	3.56
3.9.6 Posting of information and links on a program website and/or social media pages accessed by participants.	33.33% 3	22.22% 2	33.33% 3	11.11% 1	0.00% 0	0.00% 0	9	3.78

#	COMMENTS FOR "3.9.1 BOOKS AND VIDEOS IN A RESOURCE LIBRARY."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.9.2 PARENTING CLASSES."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.9.3 SUPPORT GROUPS."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.9.4 REGULAR POSTINGS ON BULLETIN BOARDS IN PUBLIC SPACES."	DATE
1	Unknown	10/17/2022 3:38 PM
#	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."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.9.6 POSTING OF INFORMATION AND LINKS ON A PROGRAM WEBSITE AND/OR SOCIAL MEDIA PAGES ACCESSED BY PARTICIPANTS."	DATE
1	Unknown	10/17/2022 3:38 PM

Q11 3.10 Parents are connected to a variety of resources that can help them explore different ways of parenting, such as:



Answered: 9 Skipped: 0

Strongly ag	Agree	Neither agr	Disagree
Strongly dis	N/A		

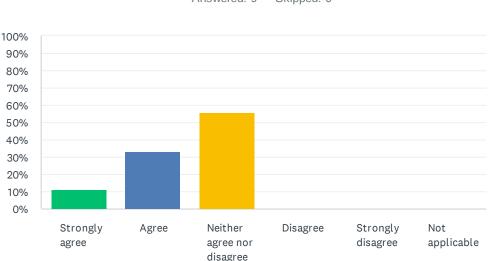
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.10.1 Parent education groups (including fatherhood groups).	22.22% 2	22.22% 2	55.56% 5	0.00% 0	0.00% 0	0.00% 0	9	3.67
3.10.2 Counseling.	11.11% 1	44.44% 4	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.67
3.10.3 Support groups.	22.22% 2	33.33% 3	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.78
3.10.4 Mentors/coaches.	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.89
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.	11.11% 1	22.22% 2	66.67% 6	0.00% 0	0.00% 0	0.00%	9	3.44

#	COMMENTS FOR "3.10.1 PARENT EDUCATION GROUPS (INCLUDING FATHERHOOD GROUPS)."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.10.2 COUNSELING."	DATE

NorthStar FRC-SFSA-Parenting and Child Development Knowledge

1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.10.3 SUPPORT GROUPS."	DATE
1	Unknown	10/17/2022 3:38 PM
#	COMMENTS FOR "3.10.4 MENTORS/COACHES."	DATE
1	Unknown	10/17/2022 3:38 PM
#	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	Unknown	10/17/2022 3:38 PM

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 11.11% Strongly agree 33.33% Agree 55.56% Neither agree nor disagree 0.00% 0 Disagree 0 0.00% Strongly disagree 0.00% 0 Not applicable TOTAL

1

3

5

9

#	COMMENT	DATE
1	Unknown	10/17/2022 3:38 PM

Answered: 9 Skipped: 0

Q13 3.12 Staff provide "just in time" parenting tips and discuss parenting issues with parents when:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	3.12.1 Child behavior or developmen arise (e.g., p	nt issues	3.12.2 A pa appears t frustrated stressed	o be	3.12.3 A paren appears to be difficulty rela to or commun	having ting		
		Strongly ag Strongly dis	Agree Agree	e 🧧	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.12.1 Child development (e.g., potty tr changes in e sleeping patt separation is aggressive b	issues arise aining, ating or erns, sues,	11.11% 1	44.44% 4	33.33% 3	11.11% 1	0.00% 0	0.00%	9	3.56
3.12.2 A par to be frustrat stressed and support.	ed or	11.11% 1	55.56% 5	33.33% 3	0.00% 0	0.00% 0	0.00%	9	3.78
3.12.3 A par to be having relating to or communicati child.	difficulty	11.11% 1	55.56% 5	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.78
	001012170						0	DATE	
#	POTTY TRAI	FOR "3.12.1 CH NING, CHANGES GRESSIVE BEH/	S IN EATING				.G.,	DATE	
1	Unknown							10/17/2022	2 3:38 PM
#		FOR "3.12.2 A F O OF SUPPORT."		PPEARS TO B	E FRUSTRATE	D OR STRESSE	ED	DATE	

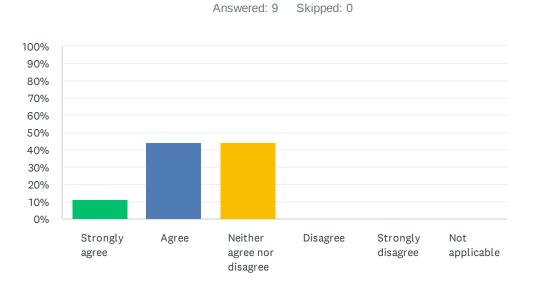
1 Unknown

10/17/2022 3:38 PM

NorthStar FRC-SFSA-Parenting and Child Development Knowledge

#	COMMENTS FOR "3.12.3 A PARENT APPEARS TO BE HAVING DIFFICULTY RELATING TO OR COMMUNICATING WITH THEIR CHILD."	DATE
1	Unknown	10/17/2022 3:38 PM

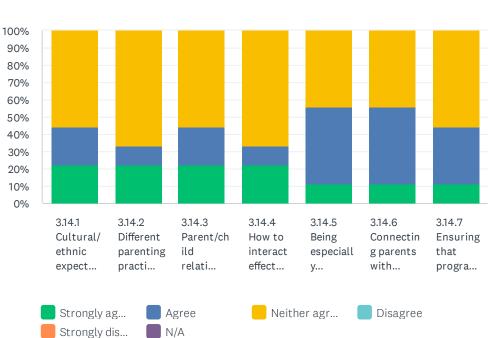
Q14 3.13 If the program serves expecting families and new mothers and fathers, the program provides opportunities for parents to learn about:• Prenatal and infant health and development• The birth process and what to expect• The needs of postnatal women and their families• The developing role of first 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	11.11%	1
Agree	44.44%	4
Neither agree nor disagree	44.44%	4
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		9

#	COMMENT	DATE
1	Unknown	10/17/2022 3:38 PM

Q15 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:



Answered: 9 Skipped: 0

NorthStar FRC-SFSA-Parenting and Child Development Knowledge

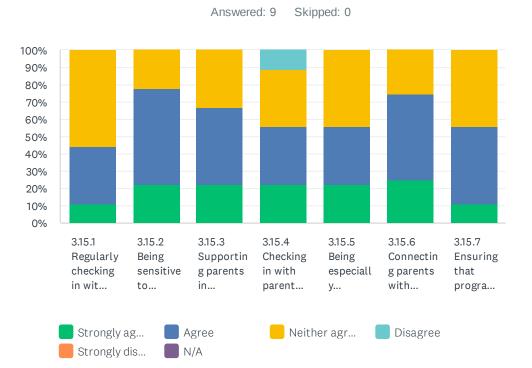
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.14.1 Cultural/ethnic expectations and practices about parenting.	22.22% 2	22.22% 2	55.56% 5	0.00% 0	0.00% 0	0.00% 0	9	3.67
3.14.2 Different parenting practices.	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
3.14.3 Parent/child relationships.	22.22% 2	22.22% 2	55.56% 5	0.00% 0	0.00% 0	0.00% 0	9	3.67
3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).	22.22% 2	11.11% 1	66.67% 6	0.00% 0	0.00% 0	0.00% 0	9	3.56
3.14.5 Being especially supportive at the time that special needs are initially identified.	11.11% 1	44.44% 4	44.44% 4	0.00% 0	0.00% 0	0.00%	9	3.67
3.14.6 Connecting parents with materials and websites, support groups, play groups and community resources specific to their children's special needs.	11.11% 1	44.44% 4	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.67
3.14.7 Ensuring that program parent-child activities are appropriate for families with children with special needs.	11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0	0.00% 0	9	3.56

#	COMMENTS FOR "3.14.1 CULTURAL/ETHNIC EXPECTATIONS AND PRACTICES ABOUT PARENTING."	DATE
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.2 DIFFERENT PARENTING PRACTICES."	DATE
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.3 PARENT/CHILD RELATIONSHIPS."	DATE
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.4 HOW TO INTERACT EFFECTIVELY WITH THEIR CHILDREN (E.G., LISTENING; APPRECIATING IDEAS, EFFORTS AND FEELINGS; CREATING A NON-THREATENING ENVIRONMENT)."	DATE
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.5 BEING ESPECIALLY SUPPORTIVE AT THE TIME THAT SPECIAL NEEDS ARE INITIALLY IDENTIFIED."	DATE
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.6 CONNECTING PARENTS WITH MATERIALS AND WEBSITES, SUPPORT GROUPS, PLAY GROUPS AND COMMUNITY RESOURCES SPECIFIC TO THEIR CHILDREN'S SPECIAL NEEDS."	DATE

NorthStar FRC-SFSA-Parenting and Child Development Knowledge

1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.14.7 ENSURING THAT PROGRAM PARENT-CHILD ACTIVITIES ARE APPROPRIATE FOR FAMILIES WITH CHILDREN WITH SPECIAL NEEDS."	DATE
1	Unknown	10/17/2022 3:40 PM

Q16 3.15 Staff recognize and support the parenting challenges experienced by families with children who have special needs by:



NorthStar FRC-SFSA-Parenting and Child Development Knowledge

		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.15.1 Regu in with paren parenting iss		11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0	0.00% 0	9	3.56
parents' frust protectivenes	ss, guilt, loss ated feelings, edging the amilies may	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.00
in understan	developmental for their	22.22% 2	44.44% 4	33.33% 3	0.00% 0	0.00% 0	0.00%	9	3.89
3.15.4 Check parents about their children needs may h dynamics an stress.	ut the impact I's special nave on family	22.22% 2	33.33% 3	33.33% 3	11.11% 1	0.00% 0	0.00% 0	9	3.67
3.15.5 Being supportive at special need identified.	t the time that	22.22% 2	33.33% 3	44.44% 4	0.00% 0	0.00% 0	0.00%	9	3.78
websites, su play groups a community r	materials and pport groups, and esources neir children's	25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.00
3.15.7 Ensu program pare activities are for families v with special	ent-child e appropriate vith children	11.11% 1	44.44% 4	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.67
#	COMMENTS PARENTING	For "3.15.1 re SSUES."	EGULARLY	CHECKING IN	WITH PARENT	'S ABOUT		DATE	
1	Unknown							10/17/2022	2 3:40 PM
#	PROTECTIVE	FOR "3.15.2 BE NESS, GUILT, I GING THE CHA	LOSS AND	OTHER RELAT	TED FEELINGS	S, AND		DATE	
1	Unknown							10/17/2022	2 3:40 PM
#		FOR "3.15.3 SU NTAL EXPECT						DATE	
1	Unknown							10/17/2022 3:40 PM	
#		FOR "3.15.4 CH SPECIAL NEEI					R	DATE	

	STRESS."	
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.15.5 BEING ESPECIALLY SUPPORTIVE AT THE TIME THAT SPECIAL NEEDS ARE INITIALLY IDENTIFIED."	DATE
1	Unknown	10/17/2022 3:40 PM
#	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
1	Unknown	10/17/2022 3:40 PM
#	COMMENTS FOR "3.15.7 ENSURING THAT PROGRAM PARENT-CHILD ACTIVITIES ARE APPROPRIATE FOR FAMILIES WITH CHILDREN WITH SPECIAL NEEDS."	DATE
1	Unknown	10/17/2022 3:40 PM

Q17 3.16 Home visitors share their observations of children with parents to help the parents recognize:

		-	Answered: 9	Skipped: 0	<u></u>			
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%								
	3.16.1 Their children's unique Strongly ag Strongly dis.		3.16.3 Their children's positive e	3.16.4 Their children's independ Neither agr	Activities families	3.16.6 Signals that developm		
	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.16.1 Their children's unique assets, temperament, personality, communication styles and behavioral cues.	11.11% 1	22.22% 2	66.67% 6	0.00% 0	0.00% 0		9	3.44
3.16.2 Their children's growth and development patterns.	11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0		9	3.56
3.16.3 Their children's positive social skills and developmentally appropriate emotional behavior.	11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0		9	3.56
3.16.4 Their children's independence and abilities.	11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0		9	3.56
3.16.5 Activities families can use to enhance their children's skills and development.	22.22% 2	22.22% 2	55.56% 5	0.00% 0	0.00% 0		9	3.67
3.16.6 Signals that development may not be on track.	11.11% 1	33.33% 3	55.56% 5	0.00% 0	0.00% 0		9	3.56

NorthStar FRC-SFSA-Parenting and Child Development Knowledge

#	COMMENTS FOR "3.16.1 THEIR CHILDREN'S UNIQUE ASSETS, TEMPERAMENT, PERSONALITY, COMMUNICATION STYLES AND BEHAVIORAL CUES."	DATE
1	Unknown	10/17/2022 3:41 PM
2	No home visitors.	10/14/2022 11:35 AM
#	COMMENTS FOR "3.16.2 THEIR CHILDREN'S GROWTH AND DEVELOPMENT PATTERNS."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.16.3 THEIR CHILDREN'S POSITIVE SOCIAL SKILLS AND DEVELOPMENTALLY APPROPRIATE EMOTIONAL BEHAVIOR."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.16.4 THEIR CHILDREN'S INDEPENDENCE AND ABILITIES."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.16.5 ACTIVITIES FAMILIES CAN USE TO ENHANCE THEIR CHILDREN'S SKILLS AND DEVELOPMENT."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.16.6 SIGNALS THAT DEVELOPMENT MAY NOT BE ON TRACK."	DATE
1	Unknown	10/17/2022 3:41 PM

Q18 3.17 Staff reinforce positive parent-child interactions by:

				Answered: 9	Skipped: 0				
	100%								
	90%								
	80%								
	70%								
	60%								
	50%								
	40%								
	30%								
	20%								
	10% 0%								
		attuned t	cing and dging when p o their child are commun	ren's icating	positiv their c	Sharing something ve with parents ab hildren's behavior pment.	out		
		Strongly dis		-					
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
3.17.1 Notic acknowledgi parents are a their children are commun effectively w children.	ng when attuned to I's needs or icating	11.11% 1	66.67% 6	22.22% 2	0.00% 0	0.00% 0	0.00%	9	3.89
		12.50% 1	75.00% 6	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.00
#		For "3.17.1 NC Their Childr Children."						DATE	
1	Unknown							10/17/2022	2 3:41 PM
#		FOR "3.17.2 SH REN'S BEHAVIO				PARENTS ABOU	Т	DATE	
1	Unknown							10/17/2022	2 3:41 PM

Q19 3.18 Staff proactively and respectfully address concerns about parenting techniques or behavior by:

			Answered: 9	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	3.18.1 Asking open-ended questions to understand t	you	3.2 knowledging ung children's strating	3.18.3 Sharing concerns abo child's behav and/or about	out a Connection Connection			
	Strongly ag Strongly dis	Agre	e 🧧	Neither agr	Disagree			
	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.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.00
3.18.2 Acknowledging young children's frustrating behavior and recognizing parents' efforts to deal with it effectively.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.00
3.18.3 Sharing concerns about a child's behavior and/or about the parents' parenting practices and respectfully offering alternatives.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00%	9	4.00
3.18.4 Connecting parents to resources and supports that may help to address parenting issues.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.00

#	COMMENTS FOR "3.18.1 ASKING OPEN-ENDED QUESTIONS TO UNDERSTAND THE BEHAVIOR FROM THE PARENT'S PERSPECTIVE."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.18.2 ACKNOWLEDGING YOUNG CHILDREN'S FRUSTRATING	DATE

	BEHAVIOR AND RECOGNIZING PARENTS' EFFORTS TO DEAL WITH IT EFFECTIVELY."	
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.18.3 SHARING CONCERNS ABOUT A CHILD'S BEHAVIOR AND/OR ABOUT THE PARENTS' PARENTING PRACTICES AND RESPECTFULLY OFFERING ALTERNATIVES."	DATE
1	Unknown	10/17/2022 3:41 PM
#	COMMENTS FOR "3.18.4 CONNECTING PARENTS TO RESOURCES AND SUPPORTS THAT MAY HELP TO ADDRESS PARENTING ISSUES."	DATE
	There are no responses.	



The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social and Emotional Competence of Children

Robin Perry (Lead Evaluator), Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator), Katrina Evans, Stephanie Harden, Keaven Jones, Philip Mobley, Bonnie O'Neal, Allen Pope, Narrie Smith, Patricia Perry, and Toni Spoliansky (NSFRC SFSA Team support)

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.

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Suggested Citation:

Perry, R., Lancaster, C., Evans, K., Harden, S., Jones, K., Mobley, P., O'Neal, B., Pope, A., Smith, N., Perry, P. & Spoliansky, T. (2023). *The NorthStar Family Resource Center (NSFRC) 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 NorthStar Family Resource Center (NSFRC) 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 NSFRC SFSA team with a specific focus on items/measures associated with supporting families by promoting the social and emotional development of children. The Social and Emotional Development 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 NorthStar Family Resource Center. Specific strengths associated with providing social and emotional development of children have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

The NorthStar Family Resource Center—History

Partnership for Strong Families (PSF) is 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. PSF 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 Families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

PSF's Family 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 safely reducing entries into foster care. One of the major strengths of the Family Resource Center Model utilized at the five existing sites (which includes the NorthStar Family Resource Center) is its focus on community collaborations as a means of addressing identified needs in the communities being served. There is a strong history of collaboration with each of the existing three Family 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 Family Resource Center reports (for each FRC and PSF), website and social media posts, Family 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 focus 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 Gainesville and Lake City communities who have historically had limited access to family support services.

The first Family Resource Center (FRC) developed by Partnership for Strong Families was the Library Partnership FRC (developed in collaboration with the Alachua County Library District, DCF, and Casey Family Programs), which opened its doors to the community in July 2009. Seeking to build upon the perceived success of PSF's first Family Resource Center, partnerships were established to open a second FRC. The Southwest Advocacy Group (SWAG) was an established entity in the community which works to improve the lives of residents in southwest Gainesville by advocating (to public and private organizations) to increase residents' access to resources, based upon community needs. In collaboration with the Southwest Advocacy Group (SWAG) and Alachua County, the SWAG FRC opened its doors to the community in June 2012 and since then has been providing continuous supports and services to individuals and families. Additionally, in 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, another community with historically limited access to resources. PSF was asked to partner with ACLD to open another co-located site 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. The Cone Park Library Family Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the Family Resource Center began operating full-time in May 2014. Though not a part of this evaluation, Tri-County Community Family Resource Center opened its doors in March 2015.

PSF had long known that Columbia County, the area directly north of Alachua County, could benefit from an increased level of intervention to combat a rising number of shelters and incidents of child maltreatment. While the population of the county is relatively low, progressively escalating maltreatment counts in Columbia County started rivaling Alachua's over the past 10 years. PSF perceived a need for the development of a Family Resource Center in Lake City, utilizing their RC Model and developing a service array specific to the needs of the Lake City community. With the assistance of funding from the Children's Bureau Community Collaborations to Strengthen and Preserve Families grant, Partnership for Strong Families opened their newest Family Resource Center serving the Greater Lake City area, in March 2021. Prior to opening, PSF staff, community partners, and community volunteers spent months conducting a community needs assessment to ensure the services and supports offered were what was most needed in the community. A visioning session with community leaders was also conducted in late 2020 to help in the better understanding of the community's needs.

NorthStar Family Resource Center (NSFRC) is co-located on the campus of the Richardson Community Center in the Fergusson Building. This location provides a central location with plenty of space for community events, programs, and family activities. NSFRC is staffed with a Family Resource Center Manager and a part-time Administrative Assistant, along with the support of community volunteers and commitment of a local Resource Center Advisory Council. The NSFRC offers a variety of no-cost services and supports such as a clothing closet, food distributions, afterschool homework help, community-wide events (e.g., May Day Festivals, Back to School events, Covid-19 Vaccination Drives, Community Health Summits, etc.), job search assistance, and referrals to community partners.

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

The basis of PSF's FRC Model is the Strengthening Families Approach and Protective Factors Framework developed by the Center for the Study of Social Policy (Brown, 2014)¹. The model is a collection of services and supports (stratified by protective factor classification) that may be utilized (at different

¹ Please see: Browne, C.H. (2014). The Strengthening Families Approach and Protective Factors Framework: Branching Out and Reaching Deeper. Washington, D.C.: The Center for the Study of Social Policy.

levels) by patrons at each FRC. Although there may be some common services and supports across FRCs, there can be variation in the service array based on variation in the target population needs within the geospatial target area for each FRC. 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 NorthStar Family Resource Center at promoting the social and emotional competence of children. 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 NorthStar Family 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 the social and emotional competence of children. 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 FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.)². The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family 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 Family Resource Center. Planned membership was to

² See: CSSP (n.d.) Strengthening Families Self-Assessment Tool for Community-Based Programs. Washington. D.C.: Center for the Study of Social Policy. Available at: <u>https://cssp.org/wp-content/uploads/2018/10/COMMUNITY-BASED-PROGRAM-SELF-ASSESSMENT.pdf</u>

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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons 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 following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons) with confirmation that they received services or participated in activities linked to protective factor and following consultation with NSFRC staff regarding those active in their participation. Unfortunately, one patron was unable to be a member of the team due to personal and parental constraints.

These processes were followed in the establishment of the NSFRC SFSA Team. Composition (see below) includes three direct service staff/volunteers (Philip Mobley, Patricia Perry and Narrie Smith), two community collaborators (Katrina Evans and Stephanie Harden) and three community ambassadors (Keaven Jones, Bonnie O'Neal, and Allen Pope). There is a great deal of overlap in roles throughout the team. Ms. Smith and Ms. Harden have also received services as patrons and Mr. Pope and Mr. Jones have also volunteered at the NSFRC. The term "Community Ambassador" was decided by earlier SFSA Teams (affiliated with the Gainesville FRCs) to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) and 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:

How Does NorthStar Family Resource Center Help Parents Foster Their Child's Social Emotional Development? (Items 5.1.1 through 5.3)

How Does NorthStar Family Resource Center Model Nurturing Care to Children? (Items 5.4.1 through 5.6)

How Does NorthStar Family Resource Center Include Children's Social and Emotional Development Activities in Programming? (Items 5.7.1 through 5.8.2)

How Does NorthStar Family 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 NorthStar Family 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 NorthStar Family 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 and Emotional 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 guestions related to the tool and associated processes and address any technical issues associated with tool/survey completion.

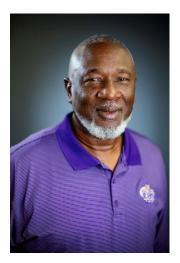
After individual team members completed their scores, these data were shared via a written summary report (see Appendix C for the SFSA Tool for Community-Based Programs—Social and Emotional Results) highlighting the distribution of responses by Team members for each item. Efforts were made through critical 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 NorthStar Family 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 orientation meeting of the NSFRC SFSA Team took place on October 6, 2022. Following a review of the SFSA, associated process, and expected deliverables, the team met for three half-day sessions in

November and December 2022. 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. Meetings that involved the discussion of Social and Emotional Competence of Children took place on December 5, 2022. The dates and times of meetings were in accordance with preferred times and schedules of all team members and attendees.

The NorthStar Strengthening Families Self-Assessment Team

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



Allen Pope Sr. has visited NorthStar 183 times since first coming in September 2021; much of this time includes regular attendance for the community walk. Allen has also helped with several community events hosted by NorthStar. He has lived in Columbia County since 1973 and graduated from Columbia High before joining the Army. Allen was in the service for three years as a Cannon Crewman then worked at Carlon PVC Pipe Co. He has experience with General Electric as a military policeman in Ocala, FL and as a correctional officer. Allen has been a volunteer coach in Columbia County for 18 years and volunteers at his church, New Bethel AME, in several capacities. Allen is a husband of 22 years to Beverly Pope and father of four biological children and three adopted children. The Popes have fostered over 15 children and provided respite care to other foster families. Mr. Pope shares that he loves the caring and inviting

atmosphere at NorthStar. He is glad that the SFSA team has identified many issues that are lacking in the community and the need for them to be addressed.



Bonnie O'Neal has been coming to NorthStar Family Resource Center since August 2021 as a patron to access services for herself and her family. She was raised in Kissimmee, FL and eventually moved to Lake City, FL in 2019 from Ocala, FL. Bonnie received her Associate of Science degree at Florida Metropolitan University and started schooling to become a medical assistant. Unfortunately, she had to leave the program early to be a caretaker for sick family members. Bonnie is a wife of 28 years to her husband Byron, is a mom to a son and daughter, and loves spending time with her family. She loves everything about NorthStar and was happy to join the SFSA team to be involved and share her experiences.



Keaven Jones is originally from White Springs, FL but has been a part of the Lake City community for 39 years and first started to connect with NorthStar Family Resource Center in May of 2021 as a patron. Keaven works for Career Source Florida Crown as a Workforce Innovation and Opportunity Act (WIOA) supervisor. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market. WIOA also matches employers with the skilled workers they need to compete in the global economy. While he and his two boys are not helping with his mother's yard beautification projects, he is spending time with them and his nieces and nephews at local parks and playgrounds. Keaven loves opportunities that Northstar provides and the support they provide to all cultures. He shares that he "was inspired by the staff and volunteers that I have encountered while attending the

community center" and that "kids that I have met while visiting help to remind me why the future looks so bright."



Dr. Philip Mobley is the NorthStar Family Resource Center Manager and the Senior Minister of the Northside Church of Christ, located in Lake City, FL. He was raised in Lake City but lived for many years in Jacksonville, FL developing his personal and professional skills. Phil received his Doctoral Degree in Education Leadership from the University of North Florida in 2019, his MBA from Jacksonville University in 2002, and a Bachelor's degree from the University of North Florida in 1975. Dr. Mobley served as a Board Member of the Suwanee Valley United Way and the Community Advisory Board for the Columbia/Hamilton County Health Department. He is currently a member of the Richardson Community Center Advisory Board. Phil is a husband of over 48 years to Lotonia (Toni). They have two children, seven grandsons, and two granddaughters. Phil loves that NorthStar provides services and resources to families to help prevent or

resolve crises and develop strategies to strengthen families. Dr. Mobley shared that he enjoyed hearing everyone's perspective through the Strengthening Families Self-Assessment meetings.



Narragansett "Narrie" Smith, sister of Phil Mobley, has been a longtime patron, supporter, and volunteer of the NorthStar Family Resource Center. She has lived all her life in Lake City, FL. Narrie has a bachelor's degree in Business Administration from the University of North Florida and a master's degree in Educational Leadership from Nova University. After 23 years as a teacher, Narrie became the Principal of Niblack Elementary school, raising their school score from an F to an A. Narrie has served as the Assistant Superintendent of the Columbia County School District and currently sits on the Columbia County School Board. She is a minister and director of Christian Education at New Bethel Missionary Baptist Church. She spends her time volunteering at NorthStar, with Columbia County Schools, and being with family. Narrie is a wife of 47 years to Johnny Smith, mother to two daughters, and proud grandmother of 6. She loves working with

children and models her life around serving God and His people. Narrie was glad to be a part of the SFSA team because it identified areas to grow and improve as a Family Resource Center.



Ms. Patricia A. Perry has been the Administrative Assistant at NorthStar Family Resource Center since before the doors opened to the public in March 2021. She was born and raised in Lake City, FL and has spent much of her life there. Patricia graduated from Columbia High School in 1974 and attended Florida A&M University in Tallahassee and Seattle Central College in Seattle, WA. Starting as a file clerk and working her way up through the Columbia County Clerk of Courts for 30 years, she retired as the Chief Deputy Clerk. Patricia is a wife of 35 years to Nathan Perry Jr. and mother to Joshua Perry. Her church family is a major part of her life, she has been a member of New Bethel Missionary Baptist Church since 1969. Patricia loves that NorthStar makes efforts to help the community in any way possible. She hopes her varied experience and familiarity with the people of Lake City will be a benefit to the community.



Katrina P. Evans, Director of the Columbia County Public Library, has supported the NorthStar Family Resource Center and been a member of the Lake City Resource Center Advisory Council since its inception. She was born and raised in Lake Placid, FL but has been a long-time resident of Lake City. Ms. Evans has a master's degree in Library and Information Studies from Florida State University. She began her career at the historic Walton-DeFuniak Library and was later hired as an Outreach and Youth Services Librarian at Columbia County Public library in 1997. After 18 years of service, Ms. Evans became the library director in 2016. She has experience on the Board of the Northeast Florida Library Information Network and has volunteered in various capacities with the Florida Library Association, Edward Rutledge Chapter, NSDAR. Ms. Evans has served on local school advisory committees and volunteers with her church. Her husband, Kevin,

is a school media specialist at the local elementary school and they have two sons, Drew (20) and Rhys (18), and two cats, Hazel and Jeff. Katrina joined the SFSA team to learn about local resources that she can take back and share with library staff and patrons. She loves that NorthStar is providing a "one-stop-shop" to our community where people can get assistance with a variety of needs. She shares, "I love that this need is now being met so compassionately by NorthStar Family Resource Center and its amazing staff."



Stephanie Harden began to connect with NorthStar Family Resource Center in January of 2021. Stephanie is a native of Philadelphia, PA, but she has lived in Florida for the last thirteen years, she began working in Lake City last year through a promotion to Hope Navigator II with the Department of Children and Family. Stephanie is working on her master's degree in Strategic Business from Northcentral University and plans to get her doctorate in Theology. She has 30 years of teaching background and over 20 years of customer service experience, along with over 20 years of Ministerial Leadership and Counseling, that she applies to assisting families in need. Stephanie is the business owner/CEO of Loving Arms Services and serves on several boards including the Partnership for Strong Families Children's Partnership Counsel. Stephanie is a wife of 20 years to Pastor Troy Harden, mother of 10 children (blended family), and a grandmother of

17 beautiful grandchildren. In addition to spending time with her family, she reads, loves to thrift store shop, and is completing her first book. Stephanie loves that NorthStar is in a central part of Lake City that needs resources and is working to create a service provision agreement to open a Hope Florida Navigator satellite station at the Family Resource Center. Stephanie was glad to be a part of the SFSA team because there were several wonderful action items to work on. With years of experience in various resource centers Stephanie appreciates the compassion and family atmosphere shown at NorthStar.

Although not formally members of the NSFRC SFSA Team, Dr. Robin Perry (Lead Evaluator) and Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator) attended each of the NSFRC SFSA Team meetings, and Toni Spoliansky (Project Director for the *Resource Center Model: Evaluation, Refinement, and Expansion* grant) who attended these meetings as well, 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 NSFRC. Christen Lancaster is the Community Research Coordinator for the NSFRC, 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 NSFRC. 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 NSFRC to community needs related to supporting families through the provision of social and emotional. 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. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (over three days) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in-between meetings.

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. 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.

How Does NorthStar Family 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 NSFRC helps parents foster their child's social and emotional development, with 5 of the 7 items/indicators in the agreement range and items 5.1.2 and 5.1.5 within the range of neither agree nor disagree.

Currently, the NSFRC does have a few services/activities exclusively targeting this protective factor. NSFRC is in its early stage of operation and has targeted (initially) most resources toward the more immediate needs of families associated with concrete supports and social connections, which represented 58.7% and 21.6%, respectively, of all service requests in 2021. In 2021, approximately 10% (163 of 1,646) of all service requests were deemed to focus on the social and emotional development of children/youth. These services were predominantly focused on group-based teen activities (n=75) and homework help (n=45), followed by individual tutoring (n=17), and family counselling (n=13, including outside referrals) (Perry et al., 2022). Although not a primary focus of most service initiatives, attention to the social and emotional development and wellbeing of children and youth is reportedly integrated into most of the work and engagement with families. Such led to the consensus agreement ratings on the following items:

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.

5.1.3 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.

5.2 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.

...NSFRC does have a few services/activities targeting this protective factor [social and emotional competence of children]. NSFRC is in its early stage of operation and has targeted (initially) most resources toward the more immediate needs of families associated with concrete supports and social connections...

NorthStar's Youth Leadership Council held group based teen activities over several months. Through the "Community Collaborations to Strengthen and Preserve Families Grant," a time-limited grant funded position (Nov 2021-September 2022) known as the "Community Leadership/Equity Coordinator" was created at NSFRC. This coordinator was responsible for the development and coordination of leadership and equity programming for youth and young adults by collaborating and consulting with Family Resource Center staff and other professionals to develop and implement a leadership curriculum. The "Let's Talk" events, hosted by The Proximity People, LLC. (2022), a non-profit out of Jacksonville, FL, gave all youth participants opportunities to speak on issues that were bothering them. Group gardening and professional bio creation were also among some of the activities of this group.

Homework Help at NorthStar is open to children from 1st to 8th grade between 2:45 PM and 4:45 PM Monday through Thursday. The children are provided a snack and spend the time doing their homework, receiving assistance as needed. Often during the same hours, individual tutoring is provided to middle and high school students as well as those studying to pass various educational exams. Many staff and volunteers have an abundance of experience working with children, youth, and families within the community. An involved discussion highlighted these experiences and how opportunities present themselves to address children and youth's social and emotional needs. Most NorthStar services/events provide opportunities for staff to support parents to build upon strengths (their children's and other family members') to best address their children's needs. For example, although homework help activities are centered on children and youth's educational needs, engagement with parents/caregivers is frequently made during pick up or drop off. These moments give staff an opening to discuss family circumstances and child/youth developmental issues of import. Here, connections are made to enhance a child's life, school success, and social and emotional development while providing parents/caregivers with needed support to meet their child's needs. Examples were provided of how children are benefitting academically (i.e., grades improved, etc.) from homework assistance—which is exciting and a source of pride for select parents—especially when informal supports and a caring disposition of staff to the family exists.

> ... discussion highlighted staff experiences and how opportunities present themselves to address children and youth's social and emotional needs and provide support and opportunities for parents to build upon strengths...to best address their children's needs. For example, although homework help activities are centered on children and youth's educational needs, engagement with parents/caregivers is frequently made and opportunities present themselves for staff to discuss family circumstances and child/youth developmental issues of import.

An example of staff involvement on these issues involved an 80+ year old woman that adopted her 9year-old twin great-grandchildren. The children required academic assistance, but staff knew she was struggling caring for the children and helping manage their behavior. The family is known to the program manager outside of NSFRC within the broader neighborhood and within a faith-based community/church. It was noted that this level of familiarity of families and the community with the staff "...makes [patrons] feel more comfortable...that they are accepted..." should they come into the NSFRC for assistance. The adoptive parent felt comfortable coming to NSFRC and was receptive to engagement efforts by the manager (and other staff and volunteers) to talk about her children. While the children receive help with their academics, staff "...have been working with her..." providing guidance and support on child development issues. The parent wanted the children to be exposed to positive male role models and have opportunities to interact with peers in a safe and age-appropriate manner; although academics mattered, she was primarily interested in the children's social and emotional development. The manager noted "...she wants them to come to homework help, not necessarily for homework but to have the interaction with me." Coming to the NSFRC and allowing her children to receive the support and guidance was a sort of "refuge" for the parent.

The manager and staff are aware of the function they serve as role models for children and parent/caregivers. They attempt to model through interactions with children and in dialog with parents/caregivers appropriate behavioral expectations for children (and with respect to parenting) that are developmentally appropriate. Supports provided within the context of NSFRC services and activities expands to other contexts within the community, which seems like a natural (and appreciated) occurrence given the multiple and integrated roles that the manager and select staff have (or have had) within the community. An example of this, with respect to the adoptive parent denoted above, is Ms. Smith, who volunteers with Homework Help and also holds leadership roles in the church that this patron began to attend. Opportunities were presented to the parent for her children to interact and play with other children (including Ms. Smith's grandchildren) and for other parent-child interactions as well. Discussions also ensued regarding the value of mentoring (including mirror-image and near-peer models) for the parent and child. The manager could empathize with the adoptive mother, highlighting for her his experiences when he assumed caregiver/parenting role for his grandson. He sought a role model/mentor for his grandson that was closer to his grandson's age that turned out to be a beneficial experience. This advice was taken by the mother, and the church's young deacon began to sit with them during church services. Though not a formal mentoring relationship, it is a strengthening of the community bond initiated at the FRC.

Table 1: How Does NorthStar Family 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.	4.13
5.1.2 Helping parents understand age-appropriate social and emotional skills and behaviors.	3.75
5.1.3 Providing opportunities to discuss social and emotional issues within a racial and cultural context.	4.13
5.1.4 Offering parents ideas on how to foster a child's social and emotional learning at home.	4.00
5.1.5 Asking about parents' observations of their child's social and emotional development.	3.75
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).	4.25
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.	4.38

How Does NorthStar Family 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 NorthStar Family 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:

5.5.1 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.

5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.

5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.

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:

5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.

5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.

5.5.6 Promoting positive relationships among children living in the same household.

5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.

There was a consensus agreement result for:

5.6 Families are invited to observe their children interacting with other children and/or staff in the program.

It is important to note that the discussion related to scored items in Table 2 on how the FRC models nurturing care to children was frequently denoted as relevant for scored items highlighted in Table 3, which includes how the FRC includes children's social and emotional development activities in programming. As suggested above, there was consensus agreement that all items detailing the means

and methods by which staff can nurture children and model nurturing for parents are manifested at NSFRC by staff and volunteers. Staff, community ambassadors, and collaborative partners on the SFSA team have witnessed firsthand the caring and empathetic attitude and actions of staff and volunteers. Again, the familiarity of staff and volunteers to patrons and community families appears to provide a foundation for trust and meaningful engagement with children, youth, and parents/caregivers. A series of case examples reinforcing these thoughts were presented by several members. Ms. Smith is a former Principal of a local elementary school (Niblack) and Assistant Superintendent of the Columbia County School District. She currently sits on the Columbia County School Board and volunteers at NSFRC. The commitment of staff and volunteers well-connected with and genuinely concerned about families in a community where they have a personal history is deemed an asset for NSFRC. Children attending literacy week events feel comfortable and confident in approaching Ms. Smith at the NSFRC and in other community events (e.g., school and church-based). She initiates engagement with them as well. She states that she volunteers to be visible in the community and have an impact with children and in the community; to serve as a role model to children and youth at NSFRC that they can be successful in life, be financially stable (and "have nice things") without doing anything illegal. She wants to reinforce through nurturance and example that they "...can do this."

> Staff, community ambassadors, and collaborative partners on the SFSA team have witnessed firsthand the caring and empathetic attitude and actions of staff and volunteers. Again, the familiarity of staff and volunteers to patrons and community families appears to provide a foundation for trust and meaningful engagement with children, youth, and parents/caregivers.

One of the community ambassadors (Mr. Allen) reiterated the importance of providing support, nurturance, and guidance to children and youth in the community and the value for modeling many of the attributes denoted in Table 2 and 3 (see items associated with 5.4 and 5.7 where there was agreement). It was noted that positive intentional actions and engagement with children and youth can have a potentially lasting impact and influence on children and youth. Mr. Allen, a long-time athletic coach in the community, recounted with pleasure a recent encounter with a local Lake City Police Department (LCPD) officer— whom he used to coach—who recounted that Mr. Allen inspired him. In his work with youth, he emphasized the value of self-determination, supporting one another, and self-care (i.e., the value in "looking sharp and being fit"). Two common phrases used with youth over the years (that youth repeat to others, including parents, and back to him) include: "you've got to see the vision" (for their life goals and aspirations) and "you don't have to be a product of your environment." These values/perspectives are embraced and are a commonality with staff and other members (including community served.

An expanded discussion on social and emotional developmental needs of children and youth identified a series of additional shared values among team members that staff reportedly integrate into their interactions (and modelling) with children and their family members that are seen as correlates with nurturance and promotion of children's social and emotional well-being. These include (but are not limited to):

- reinforcing self-confidence in children and self-determination in youth; inspiring them to do their best and expressing praise and pride to a child/youth (by staff, parents, coaches, role models, etc.) when the child makes progress (whether socially, academically, in sports, etc.) on tasks/goals they are focused on.
- letting each child know they are valued and "that they belong."
- the need for children to have a someone (especially a caring adult, role model, etc.) that "shows an interest" in them, "is there for them," and is encouraging and supportive; such can have a lasting impact on the motivation and inspiration of children/youth to do better and help them achieve developmental and personal goals now and later in life.
- the value in teaching and modelling mutual respect, appropriate social and civil interactions, and understanding of one another.

Staff (and collaborative partners) model the importance of responsible adults being supportive of children and youth while reinforcing/empowering children and youth to make decisions that are in their best interests. Staff highlighted how informal conversations and supportive exchanges have taken place with parents and caregivers who are under stress and/or whose children may demonstrate they are struggling academically or behaviorally. Staff report (and community ambassadors corroborated) efforts at parent engagement (regardless of the protective factor support/service being requested) in a supportive manner that have led to discussions about realistic expectations for children's behaviors. This includes appropriately redirecting misbehavior, the value of connectedness and patience (and allowing a child "...to be a child"), and the importance of seeking support to help address parent/caregiver and household needs. Staff perceive their work with parents as a collaboration, highlighting "...they [parents] know we are here to help..." where support is provided in a timely manner and without stigma. As an example, when a young adult disclosed his struggles and stress to the program manager resulting from unemployment, the program manager (Dr. Mobley) contacted Keaven Jones (who works for Career Source Florida Crown, a collaborative partner, and is a SFSA team member) who responded, "I'll be right there" and then travelled to NSFRC that day to meet with the youth and begin the planning process for obtaining employment. The immediacy of staff and the collaborative partner's response to a patron's

Staff report (and community ambassadors corroborated) efforts at parent engagement...in a supportive manner that have led to discussions about realistic expectations for children's behaviors, what is appropriate discipline or consequences for misbehavior, the value of connectedness and patience (and allowing a child "...to be a child"), and importance of seeking support to help address parent/caregiver and household needs. Staff perceive their work with parents as a collaboration where support is provided in a timely manner and without stigma. need reinforced a commitment to help and address the young patron's need in a caring, timely, and effective manner.

With children, any interaction is seen as an opportunity to model nurturing for parents and to attend/support a child's social and emotional development. Staff highlight that within the context of homework help (formal interactions) and other informal exchanges, staff can reinforce children asking questions, teach communication skills (e.g., when to ask questions, the value of not interrupting, active listening, etc.), explore problem solving skills, and reinforce respectful behavior. Staff spoke of the importance of "...taking a little bit of time" to connect with children that come to the Family Resource Center and in following up with children, youth, and parents after support has been received. Ms. Smith and Dr. Mobley highlighted a common phrase they use when following up with or meeting again in the future with youth or adults they helped is "where are you and what are you doing with your life now?" This question is asked with the intent to reinforce their interest in their well-being and with patrons being "successful" in their life goals and in having their needs met. Community ambassadors reiterated that the staff and volunteers were welcoming and supportive of children and their parents, showing patience and interacting in a helpful and caring manner.

There was no expanded discussion on specific ongoing training that staff receive on select topics associated with supporting children's social emotional development. The only ongoing trainings PSF staff are required to obtain and renew yearly are their Health Insurance Portability and Accountability Act "HIPPA" and Security Awareness trainings through the Department of Children and Families to maintain client confidentiality. Other trainings staff receive are provided as needs become evident such as Mental Health First Aid, Active shooter awareness, and Equity and Inclusion Training. Although primary staff and select volunteers have reportedly received additional trainings as part of their professional education, development, and experiences in other education, community, and child service settings.

Table 2: How Does NorthStar Family 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.	4.13
5.4.4 Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).	4.38
5.4.5 Responding sympathetically to help children who are upset, hurt or angry.	4.13
5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.	4.13
5.4.7 Modeling empathy and appropriate emotional responsiveness.	4.38
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting hildren's social emotional development, including:	
5.5.1 Fostering children's social and emotional development in the context of their culture and language.	4.00
5.5.2 Recognizing behavioral/emotional problems or developmental delays.	4.13
5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.	4.00
5.5.4 Recognizing the role of sensory awareness and integration in social emotional development and understanding how to promote it.	3.75
5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.	3.88
5.5.6 Promoting positive relationships among children living in the same house hold.	3.75
5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.	4.00
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.	3.88
5.6 Families are invited to observe their children interacting with other children and/or staff in the program.	4.13

How Does NorthStar Family 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 NSFRC includes children's social and emotional development activities in programming. As noted earlier, specific services for this protective factor primary focus on select teen-based activities and regular homework assistance. In addition, staff frequently engage with children who are accompanying parents that seek other services, including concrete supports. Staff, during formal and informal interactions with children (and their parents/caregivers) reportedly integrate several intention practices meant to support the social and emotional development of children. These observations led to consensus ratings among team members 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.

5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.

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).

Some comments and examples highlighted earlier (related to findings in Table 2) have applicability in understanding how intentional practices associated with these items are manifested at NSFRC. Staff and volunteers highlighted the importance of working collaboratively with parents in supporting their children's social and emotional development. Discussions suggested this involves helping parents/caregivers and children understand the importance of distinguishing emotions from behaviors/actions, the need to reinforce appropriate social skills, and the value of structure and personal vision. When there are behavior issues with children, these are seen by staff as opportunities for discussions with children/youth and their caregivers about clear expectations for behavior and the consequences (across settings) for disruptive behavior. It is important to note that these conversations are reportedly done in a supportive, strength-based manner. Staff highlighted the value of not dictating what is being done wrong but, instead, what opportunities exist to improve things; it was noted "...you need to turn things [behavior events and associated discussions] into something positive." Here, it was asserted, it is important that these conversations become a source of connection with parents/caregivers where staff are seen as a trusted support. The importance of the parent-child relationship is reinforced. Many children (team members report) across a variety of contexts want meaningful relationships with their parents, want their parents to show an interest in them, show up to their team/sporting events, etc.

> Staff and volunteers highlighted the importance of working collaboratively with parents in supporting their children's social and emotional development... [including]... helping parents/caregivers and children understand the importance of distinguishing emotions from behaviors/actions, the need to reinforce appropriate social skills, and the value of structure and personal vision. When there are behavior issues with children, these are seen by staff as opportunities for discussions with children/youth and their caregivers about clear expectations for behavior and the consequences (across settings) for disruptive behavior.

Some of the intentional practices (affiliated with 5.7 in Table 3) that the staff and volunteers engage in at NSFRC are enacted within a context of social stresses (experienced by children and caregivers) and generational differences. Team members (many with extensive experience working with children and youth) uniformly agreed that there have been adverse effects of social media upon children and youth's social and emotional development. Social media factors can compound typical stresses associated with peer influences/dynamics. Further, there are generational differences in communication styles and patterns that can impact the nature and quality of relationships between adults and children/youth. It was noted that enabling appropriate expression of thoughts and feelings and enhancing children's social

skills requires meaningful communication with children and youth. Staff, and other team members agreed that such is only possible when trust is established; one team member noted "trust is how we get them to open up." Trust is built with children and youth—staff and team members contend—when someone shows interest in them, listens, engages with them, and tries to understand their perspective (and/or confusion/uncertainty of perspective). As an example, Dr. Mobley spoke of how he initially engages with a child or youth when they do something disruptive or use language or phrases, he does not understand, by asking "...help me understand why you are doing this?... I want to understand, help me understand." This question serves as a non-judgmental foundation for a conversation/dialog where the child/youth express themselves, is listened to, and is presented with an opportunity for learning appropriate social skills. It was noted that children and youth sometimes don't fully understand themselves (examples were discussed) and the reasons for their thoughts, feelings, and behaviors. Providing children/youth an opportunity to connect with a caring adult role model genuinely interested in their development and well-being, it was held, is important for helping children/youth process their feelings, separate their emotions from actions (and/or better understand their relationship), and develop better problem-solving skills/processes.

These supportive exchanges are responsive to the child's social and emotional developmental needs and require an attentive and caring disposition by staff and/or any adult role model. As one team member noted "...sometimes bad behavior is a cry for help" where some one-on-one attention/help with a caring adult can have a positive impact on a child's development. Staff and team members agreed that most youth generally want to "...do better," have better relationships, take better care of themselves, and feel better about themselves. Adopting a non-judgmental attitude when first engaging with children and youth and building upon identified commonalities (e.g., of interests, and focus on child/youth need, etc.) can aid in building a trusting and meaningful relationship from which children/youth can learn appropriate expression, relationship, social, and problem-solving skills. Team members gave examples of how these processes led to meaningful role model relationships that children and youth sought out and valued. For example, youth still attended homework assistance sessions even when they didn't have homework so that they could interact with students and talk to staff about other matters. Other children and youth seek out the attention of staff and volunteers (at NSFRC and in other community settings) that showed a past (and continued) interest in them (their academics, family life, relationships with peers, etc.). Reportedly, some youth lacking male role models in their lives have claimed Dr. Mobley as a secondary grandfather.

In sum, team members assessed NSFRC staff as attentive, responsible, caring, trustworthy adults and role models that perceive all patrons (parents, children/youth, and adults) as valued persons deserving opportunities and hope for enhancing their well-being.

...team members assessed NSFRC staff as attentive, responsible, caring, trustworthy adults and role models that perceive all patrons (parents, children/youth, and adults) as valued persons deserving opportunities and hope for enhancing their well-being. Two items that approximated, but did not attain consensus agreement (receiving a consensus rating of neither agree nor disagree) included:

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.

Discussion related to these items was included in the assessment of select items denoted in Table 4 (see below), including Item 5.13.

Table 3: How Does NorthStar Family 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.	4.00
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).	3.75
5.7.4 Setting dear expectations and limits for behavior.	4.13
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).	4.25
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.	3.88
5.8.2 Providing support for individual staff in working with children and parents around social and emotional issues, including challenging behaviors.	3.88

How Does NorthStar Family 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 NorthStar Family 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 3 items (25%) with the remaining items approximating agreement (8 of 9 had weighted average scores exceeding 3.75). These three items for which there was consensus agreement included:

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.

Team members reiterated comments denoted earlier with respect to assessment related to this and other protective factors. There was no expanded discussion on these specific items as there was established consensus and praise for efforts of staff and volunteers to be inclusive and respectful of the different cultures of patrons, although limited resources exist to provide supports in languages other than English.

The remainder of items from Table 4 fall between the neither agree nor disagree range. These are:

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.

5.10.2 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 selfawareness of biases they may hold.

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.

5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.

There was an involved discussion of the above items in an integrated and infused manner. Consensus neither agree nor disagree ratings for items related to staff training (see Items 5.10.1 through 5.10.3, as well as 5.5.4 through 5.5.6 and 5.5.8 in Table 2) was discussed considering findings associated with items associated with 5.11 (i.e., staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages, and cultural expressions). Although select staff and volunteers are experienced professionals with past training on these efforts, continuous training and extra support was advocated on these topics, not just for staff but for other community professionals, stakeholders, and members (including those affiliated with faith-based organizations). Diversity was discussed in an expanded manner, integrating topic focus of assessment items (e.g., patron culture, race/ethnicity, languages, and sexual orientation) with broader mental health and socioeconomic factors, and the community-context (including social, political, and religious influences and status-quo in Lake City and Columbia County) impacting how these needs are (or are not) addressed. Some of these community context issues (and associated training needs) and their impact on efforts (whether current or desired) to address expanded diversity needs of patrons led, in part, to select team member ratings of the above assessment ratings.

... staff are knowledgeable and well-equipped to address many child development (social, emotional, cognitive) and parenting issues/needs. However, ...there are children in families that are dealing with major issues, including trauma resulting from exposure to violence and abuse, drug addiction (in the family) and struggling with sexual identity (and lack of support in their families and the community for LGBTQ+ populations). Staff, it was suggested, are not fully equipped/trained to address these issues and there is a "...continued need for knowledge..." on these topics.

Dr. Mobley (the FRC Manager) highlighted that staff are knowledgeable and well-equipped to address many child development (social, emotional, cognitive) and parenting issues/needs. However, it was noted that there are children in families that are dealing with major issues, including trauma resulting from exposure to violence and abuse, drug addiction (in the family) and struggling with sexual identity (and lack of support in their families and the community for LGBTQ+ populations). Staff, it was suggested, are not fully equipped/trained to address these issues and there is a "...continued need for knowledge..." on these topics. With respect to the children and youth dealing with sexual identity issues, it was noted that there are limited to no formal supports within the community. Staff spoke of a program/advocacy center in Jacksonville (JASMYN)³ that provides a variety of supports and services (including health, mental health, family engagement, housing, and other programming) for LGBTQIA+ teens/youth and young adults. However, there are no specific services in Lake City and Columbia County

³ For more information regarding JASMYN and their services, support, and advocacy initiatives, please see: <u>https://www.jasmyn.org/</u>

that teens can be referred to (or NSFRC can partner with) and local teens/youth do not have the resources to make the 60+ mile trip to Jacksonville. Other mental health supports for those dealing with trauma associated with exposure to abuse and family violence are limited, along with those children and youth exposed to chronic substance use and abuse in their families. The primary mental health service agency (that are consultant partners with the Partnership for Strong Families and NSFRC) used for referrals is Meridian Behavioral Healthcare⁴; however, team members reportedly note that this resource is currently "...getting slammed..." as needs within the community reportedly outweigh resources to address local mental health and addiction needs. It was noted that NSFRC can now make referrals (for adult patrons) to Wekiva Springs; a behavioral health and addictions service agency based in Jacksonville FL, but these services aren't local. Here, the team was unified in perspective that many needs of children and families struggling with the above noted issues (mental health, addiction, sexual identity) are not adequately addressed and that there is a priority for NSFRC, in concert with community partners and other professionals to receive training about, and to explore avenues for, enhancing supports for children, youth, and families to address these needs. This discussion led to the following action item:

Action Item #1: Increase staff and community partner training to better address and explore means to better support the needs of children, youth, adults, and families impacted by the effects of child maltreatment and chronic substance abuse/addiction, and the needs of youth and young adults within the LGBTQ+ community.

Discussion continued regarding the steps moving forward for addressing the above proposed action item. Team members suggested that there would be a lot of challenges/barriers moving forward with this action item given select community context factors, including a historical response/perspective of community leaders (e.g., political, religious, etc.) to matters related to gender and sexual identity. Regardless, team members reiterated that there are many youths that are "struggling" and in need of support; there is a need, it was asserted, to respond to these youth and prevent self-harm or suicide resulting from these struggles.

For those experiencing stress and limited support given their gender and/or sexual identity, team members noted the importance of providing support in a non-stigmatizing manner using "best practices" for addressing their needs (including their social and emotional development needs). It was noted that there are limited supports for these youth in the community and that such has led to more youth that ".... are closeted and are struggling." Although it was noted that referrals to the county/public health center can be made for children and youth dealing with stress (including because of gender/sexual identity issues), it was thought by some that the public health office was not adequately equipped to best address these needs. It was noted by several team members that the guidance counselors in schools are not equipped or supported to address the specific needs of these children/youth, there are no social or peer groups at Columbia High for these students, and parents lack support in aiding their children on these matters.

⁴ For more information regarding Meridian and their services, please see: <u>https://www.mbhci.org/</u>

Brainstorming efforts led to several suggested tasks for moving forward with the above action item, where NSFRC could have a role. These include (but are not limited to):

- Possible consultation with JASMYN representatives on steps moving forward
- Conducting a focus group(s) with concerned professionals and community partners regarding ideas for increasing services and supports for children and youth
- Consider the development of support groups for parents to discuss their children's needs and their needs as parents
- Engage with the faith community on these issues; have an open dialog (perhaps a summit) and conversation from a strength-based perspective where the focus is on the children and youths' needs

Emphasis was placed on the importance of having thoughtful conversations and training (for staff and community partners) on these issues, where there is "...real education on these topics," where emphasis is placed on people identifying personal biases and different perspectives influenced by tradition, generational norms, and religious beliefs. Although different community members (and faith organizations) may have different perspectives on these issues, team members highlighted the importance of identifying common values, especially as such relates to helping children and youth within the community. As one team member (Dr. Mobley) noted: "...we have to love everyone, as a community of faith. We have kids that are struggling or suffering. How do we help children that are going through challenges in life and be that bridge for them?" adding that the goal is to "...come up with a plan on how to help these families." It was asserted that discussions with community members (including the faithbased community) and stakeholders that focus on identified needs and a common goal (as opposed to defending a specific faith-based perspective on a topic) or "...basic discussions on what's happening" with children, youth, and families in the community are needed. Caution was expressed, highlighting a need to avoid discussions that "...cause more harm than help" and to focus more on issues from an education and knowledge standpoint. Here, it was asserted, there is no need to engage in discussions of religious differences within the community but rather on what can be learned about how best to help those children and families that are struggling, where (as one team member noted) it can be acknowledged that "...our faith...keeps us grounded [but] our ignorance will be a drawback." In sum, there was consensus among team members that collective efforts are needed among community stakeholders that share a common interest in enhancing the well-being of all children and families (across all diversity elements) to ensure that neglected needs are addressed in a non-stigmatized manner and from a strength-based and knowledge guided perspective. These efforts, given historical context, will need to be addressed in a manner that builds upon commonalities and introduces topics of concern and strategies that can effectively aid all children/youth and families of different races/ethnicities, cultures, religions, genders, sexual orientations, languages, and social classes.

... there was consensus among team members that collective efforts are needed among community stakeholders that share a common interest in enhancing the well-being of all children and families (across all diversity elements) to ensure that neglected needs are addressed in a non-stigmatized manner and from a strength-based and knowledge guided perspective. These efforts...need to be addressed in a manner that builds upon commonalities and introduces topics of concern and strategies that can effectively aid all children/youth and families of different races/ethnicities, cultures, religions, genders, sexual orientations, languages, and social classes.

Table 4: How Does NorthStar Family 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.	4.25
5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.	4.00
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.	4.25
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.	3.88
5.10.2 The extent to which nonverbal communication is predominant across cultures.	3.86
5.10.3 Diverse cultural views success and appropriate child development.	3.75
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.	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.	3.75
5.11.3 Being trained in how to sensitively ask questions about each family's specific experience and cultural perspectives.	3.75
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.	3.88
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.	3.38
5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.	3.75

How Does NorthStar Family 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 3 of the 6 items/indicators that NSFRC responds proactively when social or emotional development needs extra support, with 3 (5.15.1, 5.15.2, and 5.16.1) 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:

5.15.3 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:

5.16.2 Talk respectfully with parents about the child's development, needs or challenges.

There was no expanded discussion on these individual item ratings as the team thought that conversations, observations, and recommendations related to other items (especially in relation to items denoted in Tables 2 through 4) had relevance for Table 5 item scores.

Table 5: How Does NorthStar Family 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.	3.88					
5.15.2 Arranging for appropriate screenings and assessments.	3.75					
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).	4.13					
5.15.4 Helping parents develop strategies for addressing the issue at home.	4.00					
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.	3.88					
5.16.2 Talk respectfully with parents about the child's development, needs or challenges.	4.25					

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)⁵ method recommendations—to

⁵ 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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

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 27** (of a possible score of 48) or 56.3%, suggesting that the services and supports associated with the Social and Emotional Competence of Children were implemented with <u>moderate fidelity</u> to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

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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 selfassessment 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
- <u>Concrete Support in Times of Need</u>
- 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 <u>www.mosaic-network.com/gemslive/cssp/</u>. 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.

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

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 How do programs demonstrat		5	Strongly ag	Agree 2	. Heither 28	Disagles	stonely dis	aste Applicable Comments	
	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 visits are unexpected.								



PARENTAL RESILIENCE: SELF How do programs demonstrat		5.	Stoney age	e 8 3:W	sitter agree	Indisates	stoney dis	stee Amirane
								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 fanny memoers 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		- 55	HUNEW ASTREE	e 3: Heitler ?	2: 11:5880 1:	s Joney issee	& Comments
1.5 Staff show that they value fathers and are sensitive to their unique needed by	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.						
	1.5.5 Engaging male participants to greet other men at program activities.						
	1.5.6 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.						
	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.						



PARENTAL RESILIENCE: SELF	-ASSESSMENT ITEMS		diee	Neither aster	or lissues	after a
How do programs honor each culture, history and approach		5: Ston	A: Agree 3	Neither 28	artists asses 1. stonghi	2.84°
1.6 Program staff ensure that all families, regardless of family structure; socio- economic, racial, religious, and cultural backgrounds;	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
sexual orientation; abilities; or preferred language are included in all aspects of the program, including volunteer opportunities.	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.					
1.7 An effort is made to ensure program information and outreach materials are linguistically and culturally	1.7.1 Translated, whenever possible, into the language(s) spoken by all families in the community served.					
appropriate. Materials are:	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.					



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS	/	ally agit	0	age the	allydie	licable	
How do programs demonstrat	e that parents are valued?	6 15:	Joney ages	es Aeith	0: Disab	Stone	aste land	
			/ v . /	3	V	•	Comments	
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni- ties to develop skills and knowledge to work effectively with diverse families. Staff development may include:	1.8.1 Inviting partner organizations to provide workshops for staff on working with diverse families.							
	1.8.2 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:	1.9.1 Building a staff that reflects the community and families served.							
Taninies it serves by.	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 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.							



How do programs encourage parents to manage stress effectively?

PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	43. 43.	Unev alles	3. Neither 25th	a ton tradies	Net Holeseee	
					//	Co	mments
 proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, military other family crises Changes or fluctuations in a challenging behavior, fearful 	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 through:	 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 or participate in other parent-only activities. 						



PARENTAL RESILIENCE: SELF- low do programs encourage	ASSESSMENT ITEMS parents to manage stress effectively?	5	Strongly 25	Jee Maree	Neither 28	e nordisati	Stongly dis	Autoricate Autoricate Comments
1.13 Staff know how to re- spond appropriately to family crises that come to their at- tention. Staff receive training and support 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	5	Storey age	e glee	heither age	ise nor disset	se strongly dis	and the second s
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.							
	1.14.2 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	Stoney art	ee hetee 3.	Heine age	In tisatee	NOT POPER PROPERTY OF THE POPERTY OF	ji [®] 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.							



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	rents as decision-makers and help		Stoney as	e e	Neither 285	e por disast	stonely dif	38688 J. Hupitcane
build decision-making and le	adership skills?	5	Stru. A:	Agree 3	Nett. 2	Disa. 1	SHO. N	1 APT
								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.							
	1.16.2 Parents are informed about the confidentiality policy and what it means to them.							
	1.16.3 Parents participate in the screen- ing 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.							
	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.							
	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.							
	1.17.2 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 involve- ment and leadership.							
	1.17.4 Are updated regularly.							



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS		all ^{ee}	3. Neither 250	e nor disagre	e iis ^a t	988 - 198
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	43- 43-	Intel ages	3: Neither 25	Jisagree I.	stongly disas	AND COMP.
							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.						
	1.18.4 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	1.19.1 Providing opportunities for families to volunteer and contribute to the program.						
and decision-makers by:	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.						
	1.19.4 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 How do programs support pa build decision-making and le	rents as decision-makers and help	43.	HUNEY ALLES	8 3. Halfer 2	8188 PUT 15-865 2: D5-8688	EE SIMPLY OF	sages L. Hupitcalle Comments
1.20 The program promotes participation in activities by:	1.20.1 Addressing topics, issues and skills that families identify as important to them.						
	1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).						
	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.						
	1.21.3 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:	1.22.1 Hosting or linking parents to com- munity 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS					nordisat	je ^e	11 ²⁸
How do programs help parents understand how to buffer their child during stressful times?	45	Strongly 2	tie Agree 3	. Neither age	ee Disagree	Stonewill	
							Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.							
 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 							
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.							



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

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections?			Strongy ar	Lee Ages	Heither 25te	e nor disage	strongly dis	astre .
								Comments
2.1 Families have access to a construction of the second s	omfortable space where they can meet							
2.2 The program provides opportunities for families with similar interests, children's area and/or circum-	2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses).							
dren's ages and/or circum- stances (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:	2.2.2 Through parent mentoring and matching for one-on-one support.							
	2.2.3 Informally, by introducing parents to one another.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

DCIAL CONNECTIONS: SELF-/	ASSESSMENT ITEMS		5	88		e nor disagree	50 / S	ARCE . SE
ow do programs help familie se social connections?	es value, build, sustain and	5.	SHOREW 28	Agree 3.	Heither 28:	Jisagree	Stongly dis	asto Lehnicale
								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.							
	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.							
	2.3.6 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.							
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.							
	sitive relationships between families and nal social events where staff can interact with							
	cts families to resources to strengthen , healthy marriage skills, communication skills,							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

SOCIAL CONNECTIONS: SELF- low do programs help familio ise social connections?		5	Stoney ar	BEE 3:	Heither Self	e nor disast	stone with	astres A. A. Phylicans Comments
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.							
	2.6.2 Connecting with them on social media platforms through program pages or groups.							
	2.6.3 Offering support with transportation, child care or other barriers to participation.							
	2.6.4 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.							
	isolation or reluctance to participate can ue to differences in race, language, culture, tation, ability, etc.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs create an i			strongly as	heree 3:	Heither 251	e nordisagi	se Stongly dis	estes c. supicals	
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2.8 The program and its staff model positive social skills and community building 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. 							Comments	
	 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:	 2.9.1 Modeling inclusive behavior among the staff. 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. 2.9.4 Intervening appropriately to counteract prejudicial or discriminatory statements from children or other adults (e.g., discussing similarities and differences; establishing a background of the folderbackground of the provided of the provide								
	 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. 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. 								

2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs facilitate m		5	Strongly age	Alles 3:	Heither agree	e nor disagree	se storey his	
		1						Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms nysitting co-ops, play groups, social media an communicate with one another).							
2.12 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:	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.							
the immediate neighborhood or le	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	staff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	ith issues of concern to the community and are nunity 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).								
	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.

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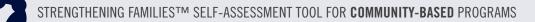
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KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs model developmentally appropriate interactions with children?

					Comments
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.				
	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 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.				
3.3 Physical discipline (i.e., spa by staff or parents.	nking or hitting) is not allowed in the program				

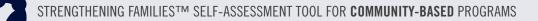


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3.4 When staff talk with parents about discipline, they:	3.4.1 Explain why physical discipline is not allowed in the program, even though this may be different from the family's approach to discipline.					
	3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.					
	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.					
	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.					



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

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS			1 25	le ⁸	215	se nor disat	Stoney di	astree at the
How do programs provide in parenting and child develop		5	Strongly 29	Astee 3.	101000 2: 105000 1		Strongly N	aste
								Comments
	s are offered as one among several strategies for f 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.							
	3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	3.6.4 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.							
	3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	3.6.7 Child care is offered while parents are in classes.							
	3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
3.7 Information is provided to p to expect of their children at eac	barents on stages of child development and what ch stage.							



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KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs provide information and resources on parenting and child development?			35	J.e.e.	255	se nor disat	NO DESERT		
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		(Ĺ	Ĺ	ĺ.	ĺ	Comments	
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.								
3.9 Parenting and child development information is provided through multiple av- enues to meet diverse learning styles, including:	3.9.1 Books and videos in a resource library.								
	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	3.9.4 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.								
	3.9.6 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:	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.								



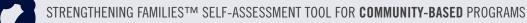
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KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS How do programs provide information and resources on parenting and child development?		5	Stonely as	Pee 3:	Neither 25th	e nor disaet	se Strongly dif	ages Lennicans	
 3.11 Parent education 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) 								Comments	
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). 									

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

XNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS low do programs encourage explore parenting issues and	5	Stoney 25	ee , heree 3	Heimer 28	bisages	se strongly diss hot	Asee hepitcale	
3.14 Parents and staff work together to design and orga- nize 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.							
	3.14.2 Different parenting practices.							
	3.14.3 Parent/child relationships.							
	3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	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.							

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

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								Comments
3.15 Staff recognize and support the parenting	3.15.1 Regularly checking in with parents about parenting issues.							
	3.15.2 Being sensitive to parents' frustra- tion, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.							
	3.15.3 Supporting parents in understand- ing appropriate developmental expectations for their children with special needs.							
	3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.							
	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.							



KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

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



					Comments
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.				
	3.16.2 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.				
	3.16.6 Signals that development may not be on track.				
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.				
	3.17.2 Sharing something positive with parents about their children's behavior and development.				
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.				
	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.				



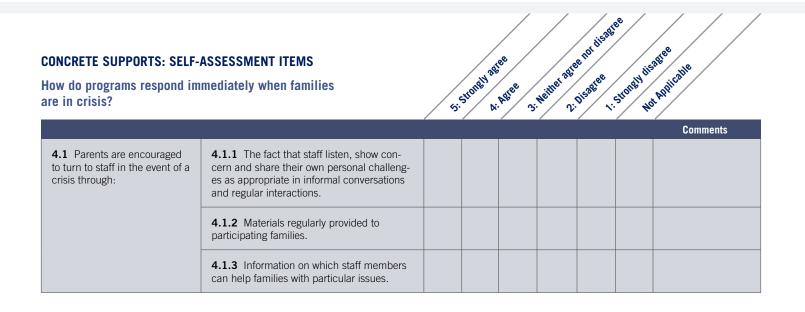
CONCRETE SUPPORT IN TIMES OF NEED

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.





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



4.4 Staff proactively respond

to signs of parent or family

distress by:

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

help.



	resources, including help lines, community resources or public agencies.				
	4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.				
	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.				
0	hare information about community resources s, play lots, family activities), as well as more				
 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 					



CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS How do programs provide information and connections to services in the community?			Stonely as	Pares 3. W	2:11:2:15:25 ¹⁰	1:500000 HO	Applicable
					· · · · ·		Comments
4.6 The program actively builds collaborative links with	4.6.1 Bringing services on site, when possible.						
other service providers by:	4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.						
	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.						



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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS				einer astee	nor disagree	aute	¢ / /	
How do programs help familie identify their needs and conn	es to develop skills they need to ect to supports?	5	Strongly agree	ASTER 3:	Neither 2816C	Sagree 1: St	onew disagre	hicale	
				/				Comments	
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.								
	4.7.5 Connecting parents to peer-to-peer navigation support.								
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.								
port family feadership of.	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).								



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 CON SELF-ASSESSMENT ITEMS How do programs help paren emotional development?		5	Stoney Ste	e stee 3.	setter agree	In disages	UNEW DISARS	
								Comments
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.								



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ow do programs model nurt	uring care to children?	13 ⁻⁴³	Intel 28100	e 3: Heitne.	2: 0158951	Strong, Not	At the second second
							Comments
5.4 Staff nurture children and model nurturing for parents by:	5.4.1 Responding consistently to children in a warm, supportive manner.						
Cy.	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.						

OCIAL AND EMOTIONAL CON ELF-ASSESSMENT ITEMS ow do programs model nurt		45 ⁻⁵⁵	Inter after	3. Neither 2. 195	at 1:520 88	sates strainicale Comments
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	5.5.1 Fostering children's social and emotional development in the context of their culture and language.					
social emotional development, including:	5.5.2 Recognizing behavioral/emotional problems or developmental delays.					
-	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.					
	5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.					
	5.5.6 Promoting positive relationships among children living in the same household.					
	5.5.7 Promoting positive relationships among children living in the same household.					
	5.5.8 Understanding how mental health and wellness affects family relationships and the developmental process of young children.					
	5.5.9 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.					
5.6 Families are invited to obser and/or staff in the program.	ve their children interacting with other children					



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs include chi development activities in pro	Idren's social and emotional	45 ^{, 63}	LINGH AFE	3. Neither all	se norisatee insatee	AN 15-2020 Not funitable Comments
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.					
practices that include:	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).					
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.					

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		ĺ						Comments	;
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.								
5.10 Staff receive training on how cultural differences affect social and emotional develop-	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.								
how cultural differences affect social and emotional develop- ment, especially	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.								
differences in:	5.10.2 The extent to which nonverbal com- munication 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, languag-	5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.								
es 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.								
	tices support the preservation of home lan- ne languages and dialects of the children and								
	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.								
5.14 Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.								

SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs respond pr emotional development need	roactively when social or	4	STOREN 25	, heree 3:	Neither aste	e not isse	Stonely dis	Applicable Comments
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.							
	5.15.2 Arranging for appropriate screenings and assessments.							
	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.							



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 RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

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					Comments
6.1 When children enter the program, staff discuss child abuse and neglect prevention with all parents and caretak-	6.1.1 The program's policies and practices that are designed to keep children safe from harm.				
ers. This discussion includes explanations of:	6.1.2 Staff members' responsibility as man- datory child abuse and neglect reporters.				
	6.1.3 How the state defines child abuse and neglect.				
	6.1.4 The program's protocols regarding child abuse and neglect reports.				
6.2 All staff members are trained abuse reporting laws.	d according to their state's mandatory child				
6.3 Staff receive additional training on child abuse and neglect including:	6.3.1 Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.				
	6.3.2 Following the program's protocols for reporting child abuse and neglect.				
	6.3.3 Understanding how cases are generally handled by the child protective services agency once a report is made.				
	6.3.4 The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.				
	6.3.5 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**?

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6.4 The program's protocols for reporting possible child abuse and neglect:	6.4.1 Are consistent with state child welfare reporting guidelines.							
	6.4.2 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:	6.5.1 Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.							
	6.5.2 Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.							
	6.5.3 Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.							
	6.5.4 Striving to be calm, caring and supportive of the family during the reporting process.							
	6.5.5 Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.							
	6.5.6 Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.							
6.6 If a child is placed into child welfare custody, staff are trained to continue to support	6.6.1 Maintaining contact with the child and family, if possible.							
the child and the family by:	6.6.2 Advocating for the family with the Child Protective Services system, when possible.							
	6.6.3 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 healthy development by:	6.7.1 Helping to maintain stability for children involved in the system.				
	6.7.2 Engaging in co-case management practices, if possible.				
	6.7.3 Conducting joint home visits.				
	6.7.4 Attending Child Protective Services meetings to share information.				

Appendix B

Electronic Version of Social and Emotional Competence of Children Questions of SFSA Tool



NorthStar FRC - Strengthening Families Self-Assessment - Social and Emotional Competence of Children

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.

What 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
- O Direct Service Staff and/or Volunteer
- () Community Collaborator/Partner that Works with Resource Center



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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	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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.1.2 Helping parents understand age-appropriate social and emotional skills and behaviors.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
Comments						
5.1.3 Providing opportunities to discuss social and emotional issues within a racial and cultural context.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.1.4 Offering parents ideas on how to foster a child's social and emotional learning at home.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
5.1.5 Asking about parents' observations of their child's social and emotional development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

guines of make a	elieve, coo	oking, making an art proje	ct together).	
Strongly agree	O Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				
	6			
—		knowledge and expertise a s they share information a		—
competence.	0	-		
O Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				



NorthStar FRC - Strengthening Families Self-Assessment - Social and Emotional Competence of Children

How do programs model nurturing care to children?

5.4 Staff nurture children and model nurturing for parents by:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
5.4.1 Responding consistently to children in a warm, supportive manner.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.4.2 Creating an environment in which children feel safe to comfortably express their emotions without fear of judgment.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
5.4.3 Showing warmth through appropriate physical contact.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.4.4 Demonstrating mutual respect between children and adults (e.g., listening attentively, making eye contact, treating children fairly).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
5.4.5 Responding sympathetically to help children who are upset, hurt or angry.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.4.7 Modeling empathy and appropriate emotional responsiveness.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

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
5.5.1 Fostering children's social and emotional development in the context of their culture and language.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.5.2 Recognizing behavioral/emotional problems or developmental delays.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	φ
Comments						
5.5.3 Understanding the impact of loss or trauma on children and how to respond appropriately.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
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	
Comments						
5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
5.5.6 Promoting positive relationships among children living in the same household.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	

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



NorthStar FRC - Strengthening Families Self-Assessment - Social and Emotional Competence of Children

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	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	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	$\left \right $
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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
5.7.4 Setting clear expectations and limits for behavior.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

	Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N
8.1 Providing coaching on how to support social and emotional earning for all children.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	C
omments						
8.2 Providing support for individual staff in working with hildren and parents around social and emotional issues, including hallenging behaviors.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
omments						



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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	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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	\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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						

1.1.1 How the sense of identity is fostered as an individual and/or as part of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or clain in different cultures. Image: Constraint of a family or clain in different cultures. Somments Image: Constraint of a family or claint or cultures. Somments Image: Constraint of a family or claint of a family or claint or cultures. Strongly agree Agree disagree disagree disagree family or claint or cultures. Strongly agree Agree disagree disagree d		Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N
1.10.2 The extent to which nonverbal communication is readominant across cultures. Image: Comment is iteration is iteration. 1.1.1 Staff are encouraged to enhance their own understanding and appreciation for fferent races, ethnicities, sexual orientations, languages and cultural expressions rough: 1.1.1 Being encouraged to share and reflect on their own cultural ackground, including self-awareness of biases they may hold. Image: Comment is iteration is iteration is iteration is iteration. 1.1.1 Being provided with professional development opportunities hat allow them to learn more about the history and experiences of iteration. Image: Comment is iteration. 1.1.2 Being provided with professional development opportunities hat allow them to learn more about the history and experiences of iteration. Image: Comment iteration. Image: Comment iteration. 1.1.3 Being trained in how to sensitively ask questions about each analy's specific experience and cultural prospectives. Image: Comment is iteration. Image: Comment is iteration.		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	(
redominant across cultures.	comments						
10.3 Diverse cultural views of success and appropriate child <td></td> <td>\bigcirc</td> <td>\bigcirc</td> <td>\bigcirc</td> <td>\bigcirc</td> <td>\bigcirc</td> <td>(</td>		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	(
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.11.2 Being provided with professional development opportunities nat allow them to learn more about the history and experiences of ifferent racial and cultural groups. Image: Comments in the image: Comments	fferent races, ethnicities, sexual orientations, la	nguages	s and	cultura Neither agree		sions	
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11.3 Being trained in how to sensitively ask questions about each mily's specific experience and cultural perspectives.	fferent races, ethnicities, sexual orientations, la rough: .11.1 Being encouraged to share and reflect on their own cultura ackground, including self-awareness of biases they may hold.	nguages Strongly agree	s and	cultura Neither agree nor	l expres	sions Strongly	1
amily's specific experience and cultural perspectives.	fferent races, ethnicities, sexual orientations, lar rough: .11.1 Being encouraged to share and reflect on their own cultura ackground, including self-awareness of biases they may hold. 	Strongly agree	s and	cultura Neither agree nor	l expres	sions Strongly	1)
omments	fferent races, ethnicities, sexual orientations, later rough: .11.1 Being encouraged to share and reflect on their own cultural ackground, including self-awareness of biases they may hold. .00000000000000000000000000000000000	Strongly agree	s and	cultura Neither agree nor	l expres	sions Strongly	1))
	fferent races, ethnicities, sexual orientations, lar rough: .11.1 Being encouraged to share and reflect on their own cultural ackground, including self-awareness of biases they may hold. 	Strongly agree	s and	cultura Neither agree nor	l expres	sions Strongly	1)))
	fferent races, ethnicities, sexual orientations, later rough: 11.1 Being encouraged to share and reflect on their own cultural ackground, including self-awareness of biases they may hold. omments 11.2 Being provided with professional development opportunities at allow them to learn more about the history and experiences of a fferent racial and cultural groups. omments 11.3 Being trained in how to sensitively ask questions about each mily's specific experience and cultural perspectives.	Strongly agree	s and	cultura Neither agree nor	l expres	sions Strongly	1

serve.				
O Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				
		l health consultant offers (
and cultural root		behaviors and child behav	lors that stel	n from traditions
Strongly agree	Agree	Neither agree nor disagree	O Disagree	Strongly disagree
 Not applicable 	J	0	0	0 11 3, 113
Comment				
Johnment				
5.14 Staff are tr	ained in ho	ow to address children exh	ihiting verba	l or nonverbal
ndicators of rac				
Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
 Not applicable 	0	0	<u> </u>	\bigcirc
Comment				
Johnment				



NorthStar FRC - Strengthening Families Self-Assessment - Social and Emotional Competence of Children

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:

Strongly agree		Neither agree nor disagree	Disagree	Strongly disagree	N/A
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
			agree agree agree nor agree inor agree inor	Strongly Agree nor Disagree Image: Strongly Image: Strongly </td <td>Strongly agree Agree Strongly disagree ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···</td>	Strongly agree Agree Strongly disagree ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···· ···

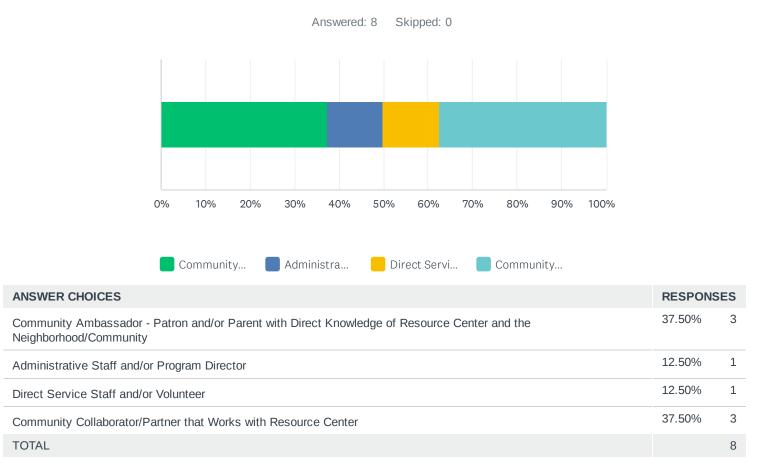
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N
16.1 Identify and receive additional resources and/or training to ork effectively with individual children and parents.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\langle
omments						
16.2 Talk respectfully with parents about the child's velopment, needs or challenges.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	(
omments						

Appendix C

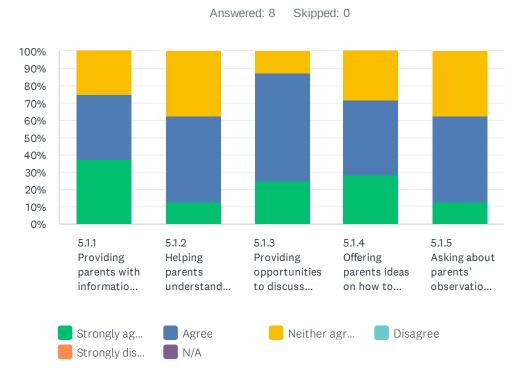
NorthStar Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— Social and Emotional Competence of Children Results

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



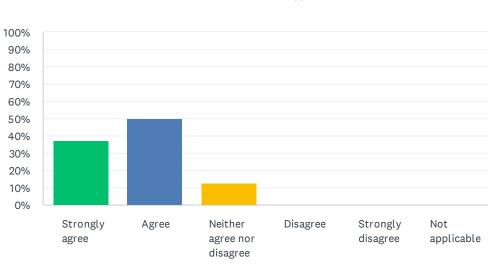
Q2 5.1 The program introduces family members to social and emotional development by:



NorthStar FRC - Strengthening Families Self-Assessment - Social and Emotional Competence of Children

		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE		
5.1.1 Provid with informat importance of children's here and emotionat development connection to school and li	tion on the of supporting althy social al t and its o success in	37.50% 3	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.13		
5.1.2 Helpin understand a appropriate s emotional sk behaviors.	age- social and	12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75		
5.1.3 Provid opportunities social and er issues within cultural conte	to discuss motional n a racial and	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.13		
5.1.4 Offerir ideas on how child's social emotional lea home.	v to foster a I and	28.57% 2	42.86% 3	28.57% 2	0.00% 0	0.00% 0	0.00% 0	7	4.00		
5.1.5 Asking parents' obse their child's s emotional de	ervations of social and	12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75		
#	IMPORTANCE	For "5.1.1 pro 5 of support NT and its co	ING CHILD	REN'S HEALTI	HY SOCIAL AN	D EMOTIONAL		DATE			
	There are no r	esponses.									
#	COMMENTS FOR "5.1.2 HELPING PARENTS UNDERSTAND AGE-APPROPRIATE DATE SOCIAL AND EMOTIONAL SKILLS AND BEHAVIORS." DATE										
1	Not known	10/20/2022	2 8:29 AM								
#	COMMENTS FOR "5.1.3 PROVIDING OPPORTUNITIES TO DISCUSS SOCIAL AND EMOTIONAL ISSUES WITHIN A RACIAL AND CULTURAL CONTEXT."								DATE		
1	Not known							10/20/2022	2 8:29 AM		
#		FOR "5.1.4 OFI EMOTIONAL L			ON HOW TO F	OSTER A CHIL	_D'S	DATE			
1	Not known							10/20/2022	2 8:29 AM		
#		FOR "5.1.5 ASI EMOTIONAL D			OBSERVATION	S OF THEIR CH	HLD'S	DATE			
1	Not known							10/20/2022	2 8:29 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).

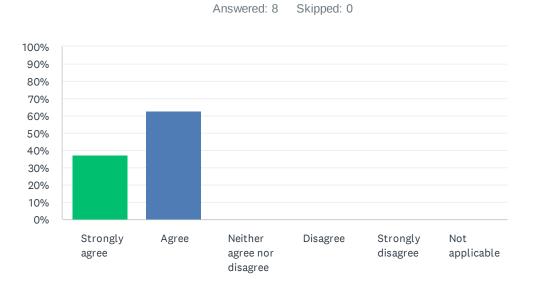


ANSWER CHOICES RESPONSES 37.50% 3 Strongly agree 50.00% 4 Agree 12.50% 1 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 0.00% 0 Not applicable TOTAL 8 # COMMENT DATE

There are no responses.

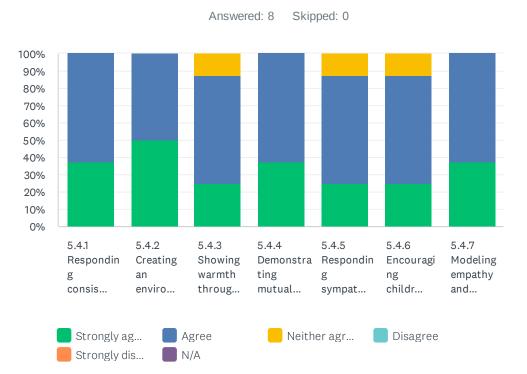
Answered: 8 Skipped: 0

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 a	gree	37.50%		3
Agree		62.50%		5
Neither ag	ree nor disagree	0.00%		0
Disagree		0.00%		0
Strongly d	isagree	0.00%		0
Not applic	able	0.00%		0
TOTAL				8
#	COMMENT		DATE	
	There are no responses.			

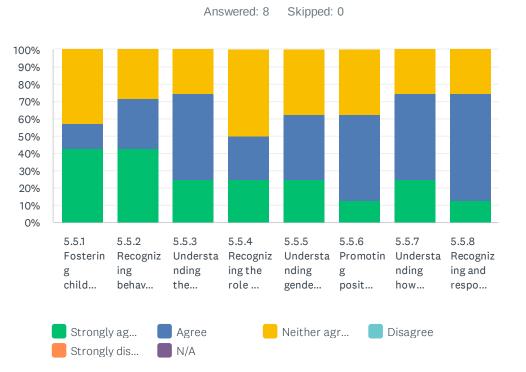
Q5 5.4 Staff nurture children and model nurturing for parents by:



Children									
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.4.1 Respor consistently a warm, supp manner.	to children in	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
5.4.2 Creatin environment children feel comfortably emotions wit judgment.	in which safe to express their	50.00% 4	50.00% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.50
5.4.3 Showing through appropriate the second	opriate	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.13
5.4.4 Demon mutual respe children and listening atte making eye o treating child	ect between adults (e.g., entively, contact,	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
5.4.5 Responding sympathetically to help children who are upset, hurt or angry.		25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.13
5.4.6 Encouraging children to express their feelings through words, artwork and expressive play.		25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.13
5.4.7 Modeli and appropria responsivene	ate emotional	37.50% 3	62.50% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	8	4.38
#	COMMENTS SUPPORTIVE	FOR "5.4.1 RES MANNER."	PONDING	CONSISTENT	Y TO CHILDRE	EN IN A WARM,		DATE	
	There are no r	esponses.							
#		For "5.4.2 Cri Mfortably Ex					-	DATE	
	There are no r	esponses.							
#	COMMENTS CONTACT."	FOR "5.4.3 SH	owing wa	RMTH THROU	GH APPROPRI	ATE PHYSICAL	-	DATE	
1	Not known							10/20/2022	2 8:32 AM
#	AND ADULTS	COMMENTS FOR "5.4.4 DEMONSTRATING MUTUAL RESPECT BETWEEN CHILDREN DATE AND ADULTS (E.G., LISTENING ATTENTIVELY, MAKING EYE CONTACT, TREATING CHILDREN FAIRLY)."							
	There are no r	esponses.							
#		FOR "5.4.5 RES HURT OR ANGI		SYMPATHETI	CALLY TO HEL	P CHILDREN \	NHO	DATE	
1	Not known							10/20/2022	2 8:32 AM

#	COMMENTS FOR "5.4.6 ENCOURAGING CHILDREN TO EXPRESS THEIR FEELINGS THROUGH WORDS, ARTWORK AND EXPRESSIVE PLAY."	DATE
1	Not known	10/20/2022 8:32 AM
#	COMMENTS FOR "5.4.7 MODELING EMPATHY AND APPROPRIATE EMOTIONAL	DATE
	RESPONSIVENESS."	

Q6 5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's social emotional development, including:

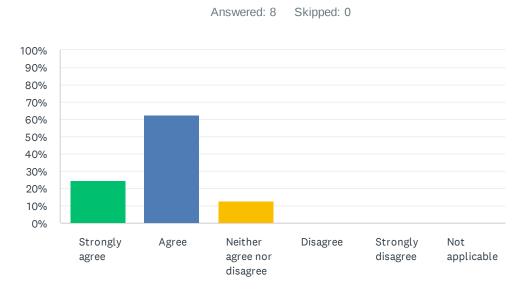


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				Children	en				
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
social and er development		42.86% 3	14.29% 1	42.86% 3	0.00% 0	0.00% 0	0.00% 0	7	4.00
5.5.2 Recog behavioral/er problems or development	motional	42.86% 3	28.57% 2	28.57% 2	0.00%	0.00% 0	0.00%	7	4.14
5.5.3 Unders impact of los on children a respond app	ss or trauma and how to	25.00% 2	50.00% 4	25.00% 2	0.00%	0.00% 0	0.00%	8	4.00
of sensory a integration in emotional de		25.00% 2	25.00% 2	50.00%	0.00% 0	0.00% 0	0.00% 0	8	3.75
5.5.5 Unders gender differ rearing and it social and er development	ences in child ts impact on motional	25.00% 2	37.50% 3	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.88
5.5.6 Promo relationships children livin household.		12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00%	8	3.75
5.5.7 Understanding how mental health and wellness affects family relationships and the developmental process of young children.		25.00% 2	50.00% 4	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	4.00
5.5.8 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.		12.50% 1	62.50% 5	25.00% 2	0.00% 0	0.00% 0	0.00% 0	8	3.88
#		For "5.5.1 Fo						DATE	
1	Not known							10/20/2022	2 8:32 AM
#	COMMENTS FOR "5.5.2 RECOGNIZING BEHAVIORAL/EMOTIONAL PROBLEMS OR DATE DEVELOPMENTAL DELAYS."							DATE	
1	Not known 10/20/2						10/20/2022	2 8:32 AM	
#		COMMENTS FOR "5.5.3 UNDERSTANDING THE IMPACT OF LOSS OR TRAUMA ON DATE CHILDREN AND HOW TO RESPOND APPROPRIATELY."							
1	Not known							10/20/2022	2 8:32 AM
#	COMMENTS	COMMENTS FOR "5.5.4 RECOGNIZING THE ROLE OF SENSORY AWARENESS AND							

	INTEGRATION IN SOCIAL EMOTIONAL DEVELOPMENT AND UNDERSTANDING HOW TO PROMOTE IT."	
1	Not known	10/20/2022 8:32 AM
#	COMMENTS FOR "5.5.5 UNDERSTANDING GENDER DIFFERENCES IN CHILD REARING AND ITS IMPACT ON SOCIAL AND EMOTIONAL DEVELOPMENT."	DATE
1	Not known	10/20/2022 8:32 AM
#	COMMENTS FOR "5.5.6 PROMOTING POSITIVE RELATIONSHIPS AMONG CHILDREN LIVING IN THE SAME HOUSEHOLD."	DATE
1	Not known	10/20/2022 8:32 AM
#	COMMENTS FOR "5.5.7 UNDERSTANDING HOW MENTAL HEALTH AND WELLNESS AFFECTS FAMILY RELATIONSHIPS AND THE DEVELOPMENTAL PROCESS OF YOUNG CHILDREN."	DATE
1	Not known	10/20/2022 8:32 AM
#	COMMENTS FOR "5.5.8 RECOGNIZING AND RESPONDING TO THE IMPACT OF CHILD OR PARENTAL TRAUMA ON PARENT-CHILD RELATIONSHIPS."	DATE
1	Not known	10/20/2022 8:32 AM

Q7 5.6 Families are invited to observe their children interacting with other children and/or staff in the program.



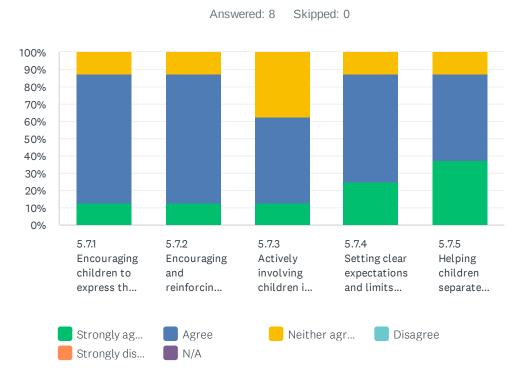
ANSWER CHOICES	RESPONSES				
Strongly agree	25.00%		2		
Agree	62.50%		5		
Neither agree nor disagree	12.50%		1		
Disagree	0.00%		0		
Strongly disagree	0.00%		0		
Not applicable	0.00%		0		
TOTAL			8		
# COMMENT		DATE			

1

Not known

10/20/2022 8:32 AM

Q8 5.7 The program supports children's social and emotional development with intentional practices that include:



Children									
		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.		12.50% 1	75.00% 6	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.00
5.7.2 Encouraging and reinforcing social skills such as sharing, taking turns and cooperative play.		12.50% 1	75.00% 6	12.50% 1	0.00% 0	0.00% 0	0.00% 0	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% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
5.7.4 Setting expectations behavior.	g clear and limits for	25.00% 2	62.50% 5	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.13
5.7.5 Helping children separate emotions from actions (e.g., not reacting by hitting even when angry).		37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00%	8	4.25
#		FOR "5.7.1 ENG ARE THE MOST				HEIR FEELING	GS IN	DATE	
1	Not known							10/20/2022	8:33 AM
#		For "5.7.2 EN KING TURNS A				L SKILLS SUC	H AS	DATE	
1	Not known							10/20/2022	8:33 AM
#	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	Not known 10,						10/20/2022	8:33 AM	
#	COMMENTS FOR "5.7.4 SETTING CLEAR EXPECTATIONS AND LIMITS FOR BEHAVIOR."					DATE			
1	Not known							10/20/2022	8:33 AM
#		FOR "5.7.5 HEI EACTING BY HI				S FROM ACTIC	ONS	DATE	

1

Not known

Q9 5.8 Mental health consultants assist staff in integrating social emotional development into everyday work by:

				Answered: 8	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	how to	oviding coad	cial and	individu	oviding support f ual staff in workin	g		
		emotion children Strongly ag Strongly dis STRONGLY	Agre			ildren and parent social and emotion Disagree STRONGLY		TOTAL	WEIGHTED
		AGREE	AGREE	AGREE NOR DISAGREE	DISAGREE	DISAGREE	N/A	TOTAL	AVERAGE
5.8.1 Providi on how to su and emotion all children.		37.50% 3	12.50% 1	50.00% 4	0.00% 0	0.00% 0	0.00% 0	8	3.88
5.8.2 Provic for individual working with parents arou emotional iss including cha behaviors.	staff in children and nd social and sues,	37.50% 3	12.50% 1	50.00% 4	0.00% 0	0.00% 0	0.00% 0	8	3.88
#		FOR "5.8.1 PRO LEARNING FOF			IOW TO SUPP	ORT SOCIAL A	ND	DATE	
1	Not known							10/20/2022	2 8:33 AM
#	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	Not known							10/20/2022	2 8:33 AM

Q10 5.9 The program welcomes and affirms the cultures of families it serves by:

				Answered: 8	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	5.9.1 Impler meaningful relevant ac stories and	and tivities,	5.9.2 Invi families t and expr ethnicity	o define	5.9.3 Includin appropriate instructiona resources su	l		
		Strongly ag Strongly dis	Agree N/A	e 🧧	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.9.1 Impler meaningful a activities, sto discussions cultural and I differences.	nd relevant pries and regarding	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
5.9.2 Inviting families to define and express their ethnicity or culture, including the experiences and values they hold to be most important.		37.50% 3	25.00% 2	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	4.00
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.		37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25
#		FOR "5.9.1 IMP D DISCUSSION: ES."					ES,	DATE	

1	Library Books	10/24/2022 10:21 AM
#	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."	
	There are no responses.	
#	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
	There are no responses.	

Q11 5.10 Staff receive training on how cultural differences affect social and emotional development, especially differences in:

				Answered: 8	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	5.10.1 How sense of id fostered as individual	lentity is s an and/or		verbal	5.10.3 Divers cultural view success and appropriate	vs of		
		Strongly dis	_	_					
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
5.10.1 How to identity is fost individual and of a family or different cultu	tered as an d/or as part clan in	25.00% 2	37.50% 3	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.88
5.10.2 The extent to which nonverbal communication is predominant across cultures.		14.29% 1	57.14% 4	28.57% 2	0.00% 0	0.00%	0.00% 0	7	3.86
5.10.3 Diverse cultural views of success and appropriate child development.		12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
#	COMMENTS	FOR "5.10.1 H	OW THE SF	ENSE OF IDEN	TITY IS FOSTF	RED AS AN		DATE	
	INDIVIDUAL	AND/OR AS PAI							
1	Not known	FOR "5.10.2 TH					19	10/20/2022 DATE	2 8:34 AM
17		NT ACROSS CL			WERDAL CU		13	DATE	

1	Not known	10/20/2022 8:34 AM
#	COMMENTS FOR "5.10.3 DIVERSE CULTURAL VIEWS OF SUCCESS AND APPROPRIATE CHILD DEVELOPMENT."	DATE

105

Q12 5.11 Staff are encouraged to enhance their own understanding and appreciation for different races, ethnicities, sexual orientations, languages and cultural expressions through:

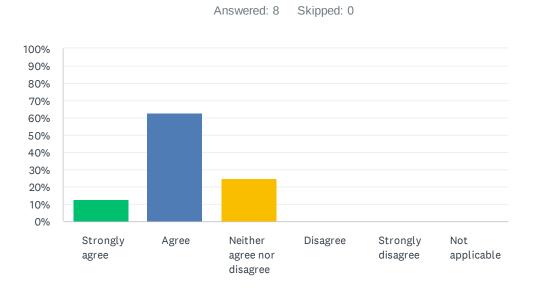
Skipped: 0

Answered: 8

				Answered: 8	Skipped: U				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	5.11.1 Being encouraged and reflect own cultur	on their	5.11.2 B provide profess develop	ed with	5.11.3 Being tr in how to ser ask questions each family's	isitively s about		
		Strongly ag Strongly dis	Agre N/A	e 🧧	Neither agr	Disagree			
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
to share and their own cul background,		12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
professional opportunities them to learr the history a experiences	n more about nd	12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
5.11.3 Being how to sensi questions ab family's spec experience a perspectives	tively ask out each :ific nd cultural	12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
#		FOR "5.11.1 BE						DATE	
1	Not known							10/20/2022	2 8:34 AM

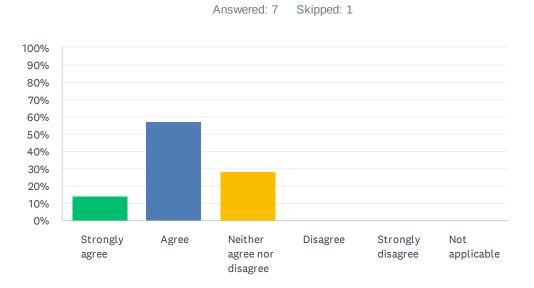
#	COMMENTS FOR "5.11.2 BEING PROVIDED WITH PROFESSIONAL DEVELOPMENT OPPORTUNITIES THAT ALLOW THEM TO LEARN MORE ABOUT THE HISTORY AND EXPERIENCES OF DIFFERENT RACIAL AND CULTURAL GROUPS."	DATE
1	Not known	10/20/2022 8:34 AM
#	COMMENTS FOR "5.11.3 BEING TRAINED IN HOW TO SENSITIVELY ASK QUESTIONS ABOUT EACH FAMILY'S SPECIFIC EXPERIENCE AND CULTURAL PERSPECTIVES."	DATE
1	Not known	10/20/2022 8:34 AM

Q13 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.



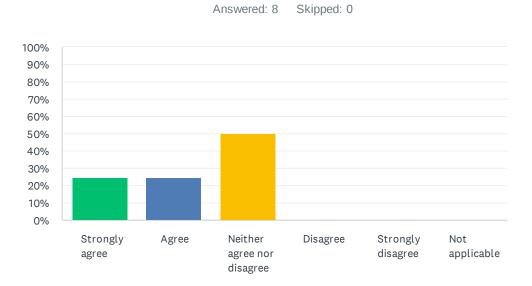
ANSWER	CHOICES	RESPONSES	
Strongly a	ree	12.50%	1
Agree		62.50%	5
Neither agr	ee nor disagree	25.00%	2
Disagree		0.00%	0
Strongly di	sagree	0.00%	0
Not applica	ble	0.00%	0
TOTAL			8
#	COMMENT		DATE
1	Flyers and Memo in English and Spanish		10/24/2022 10:21 AM
2	Not known		10/20/2022 8:34 AM

Q14 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 ag	ree	14.29%		1	
Agree		57.14%		4	
Neither agr	ee nor disagree	28.57%		2	
Disagree		0.00%		0	
Strongly disagree		0.00%		0	
Not applicable		0.00%		0	
TOTAL				7	
#	COMMENT		DATE		
1	Not known		10/20/2022 8:34 AM		

Q15 5.14 Staff are trained in how to address children exhibiting verbal or nonverbal indicators of racism or intolerance.



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

1

Not known

10/20/2022 8:34 AM

Q16 5.15 When staff are concerned about a child's social and emotional development, they respond by:

			Answered: 8	Skipped: 0				
100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	5.15.1 Discussing concerns (including Strongly ag Strongly dis	Ar ap sci	5.2 ranging for propriate reenings an	5.15.3 Connecting t family to resources th Neither agr	strateg	s develop		
	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	37.50% 3	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.88
5.15.2 Arranging for appropriate screenings and assessments.	12.50% 1	50.00% 4	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.75
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	37.50% 3	25.00% 2	0.00% 0	0.00% 0	0.00%	8	4.13
5.15.4 Helping parents develop strategies for addressing the issue at home.	37.50% 3	25.00% 2	37.50% 3	0.00% 0	0.00% 0	0.00%	8	4.00

#

DATE

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 known	10/20/2022 8:35 AM
#	COMMENTS FOR "5.15.2 ARRANGING FOR APPROPRIATE SCREENINGS AND ASSESSMENTS."	DATE
1	Not known	10/20/2022 8:35 AM
#	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
1	Not known	10/20/2022 8:35 AM
#	COMMENTS FOR "5.15.4 HELPING PARENTS DEVELOP STRATEGIES FOR ADDRESSING THE ISSUE AT HOME."	DATE
1	Not known	10/20/2022 8:35 AM

Q17 5.16 Staff have access to a mental health consultant to help them:

				Answered: 8	Skipped: 0					
	100%									
	90%									
	80%									
	70%									
	60%									
	50% 40%									
	40% 30%									
	20%									
	10%									
	0%							_		
		addition	entify and re al resource to work effe	s and/or	parent	Falk respectfully v s about the child' pment, needs or				
		-	ividual child		challer	•				
		Strongly ag	Agre	ee 🧧	Neither agr	Disagree				
		Strongly dis	_							
		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE	
5.16.1 Identif receive addition resources and to work effect individual chilo parents.	onal d/or training ively with	25.00% 2	37.50% 3	37.50% 3	0.00% 0	0.00% 0	0.00% 0	8	3.88	
5.16.2 Talk re with parents a child's develo needs or chall	about the pment,	37.50% 3	50.00% 4	12.50% 1	0.00% 0	0.00% 0	0.00% 0	8	4.25	
#		FOR "5.16.1 IDI D WORK EFFEC						DATE		
1	Not known							10/20/2022	2 8:35 AM	
#		FOR "5.16.2 TA ENT, NEEDS OR			H PARENTS A	Bout the Chii	LD'S	DATE		
1	Conversation when concern about skills and abilities when working with children through tutoring program								10/24/2022 10:24 AM	
	tatoning progra									



The NorthStar Family Resource Center (NSFRC) Strengthening Families Self-Assessment (SFSA) Team's Findings and Recommendations/Action Items Associated with Supporting Families by Promoting Social Connections

Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator), Robin Perry (Lead Evaluator), Katrina Evans, Stephanie Harden, Keaven Jones, Philip Mobley, Bonnie O'Neal, Allen Pope, Narrie Smith, Patricia Perry, and Toni Spoliansky (NSFRC SFSA Team support)

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.

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Suggested Citation:

Lancaster, C., Perry, R., Evans, K., Harden, S., Jones, K., Mobley, P., O'Neal, B., Pope, A., Smith, N., Perry, P. & Spoliansky, T. (2022). *The NorthStar Family Resource Center (NSFRC) 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 findings from, and recommendations developed by the NorthStar Family Resource Center (NSFRC) 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 NSFRC 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 NorthStar Family Resource Center. Specific strengths associated with promoting Social Connections have been identified along with recommended action items for enhancing/strengthening responsiveness to address this protective factor.

The NorthStar Family Resource Center—History

Partnership for Strong Families (PSF) is 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. PSF 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 Families approach while utilizing a Protective Factors Framework to provide prevention services and supports to families.

PSF's Family 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 safely reducing entries into foster care. One of the major strengths of the Family Resource Center Model utilized at the five existing sites (which includes the NorthStar Family Resource Center) is its focus on community collaborations as a means of addressing identified needs in the communities being served. There is a strong history of collaboration with each of the existing three Family 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 Family Resource Center reports (for each FRC and PSF), website and social media posts, FRC 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 focus 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 Gainesville and Lake City communities who have historically had limited access to family support services.

The first Family Resource Center (FRC) developed by Partnership for Strong Families was the Library Partnership FRC (developed in collaboration with the Alachua County Library District, DCF, and Casey Family Programs), which opened its doors to the community in July 2009. Seeking to build upon the perceived success of PSF's first Family Resource Center, partnerships were established to open a second FRC. The Southwest Advocacy Group (SWAG) was an established entity in the community which works to improve the lives of residents in southwest Gainesville by advocating (to public and private organizations) to increase residents' access to resources, based upon community needs. In collaboration with the Southwest Advocacy Group (SWAG) and Alachua County, the SWAG FRC opened its doors to the community in June 2012 and since then has been providing continuous supports and services to individuals and families. Additionally, in 2012, the Alachua County Library District (ACLD) began making plans to open a new branch to serve southeast Gainesville, another community with historically limited access to resources. PSF was asked to partner with ACLD to open another co-located site 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. The Cone Park Library Family Resource Center opened part-time in December 2013, and with early indicators of high service utilization, the family resource center began operating full-time in May 2014. Though not a part of this evaluation, Tri-County Community Family Resource Center opened its doors in March 2015.

PSF had long known that Columbia County, the area directly north of Alachua County, could benefit from an increased level of intervention to combat a rising number of shelters and incidents of child maltreatment. While the population of the county is relatively low, progressively escalating maltreatment counts in Columbia County started rivaling Alachua's over the past 10 years. PSF perceived a need for the development of a Family Resource Center in Lake City, utilizing their FRC Model and developing a service array specific to the needs of the Lake City community. With the assistance of funding from the Children's Bureau Community Collaborations to Strengthen and Preserve Families grant, Partnership for Strong Families opened their newest Family Resource Center serving the Greater Lake City area, in March 2021. Prior to opening, PSF staff, community partners, and community volunteers spent months conducting a community needs assessment to ensure the services and supports offered were what was most needed in the community. A visioning session with community leaders was also conducted in late 2020 to help in the better understanding of the community's needs.

NorthStar Family Resource Center (NSFRC) is co-located on the campus of the Richardson Community Center in the Fergusson Building. This location provides a central location with plenty of space for community events, programs, and family activities. NSFRC is staffed with a Family Resource Center Manager and a part-time Administrative Assistant, along with the support of community volunteers and commitment of a local Resource Center Advisory Council. The NSFRC offers a variety of no-cost services and supports such as a clothing closet, food distributions, afterschool homework help, community-wide events (e.g., May Day Festivals, Back to School events, Covid-19 Vaccination Drives, Community Health Summits, etc.), job search assistance, and referrals to community partners.

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

The basis of PSF's FRC model is the Strengthening Families Approach and Protective Factors Framework developed by the Center for the Study of Social Policy (Browne, 2014)¹. 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 FRC. Although there may be some common services and supports across FRCs,

¹ Please see: Browne, C.H. (2014). The Strengthening Families Approach and Protective Factors Framework: Branching Out and Reaching Deeper. Washington, D.C.: The Center for the Study of Social Policy.

there can be variation in the service array based on variation in the target population needs within the geospatial target area for each FRC. The five protective factors include:

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

This report focuses specifically upon services, supports, and efforts of the NorthStar Family 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 NorthStar Family 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 social connections 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 FRCs have implemented services/activities to engage and strengthen families with respect to each of the protective factors (CSSP; Harnar and Tarr, n.d.)². The assessment criteria and protocol for self-assessment is standardized. The criteria and indicators for fidelity assessment relate to the extent to which each Family 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

² See: CSSP (n.d.) Strengthening Families Self-Assessment Tool for Community-Based Programs. Washington. D.C.: Center for the Study of Social Policy. Available at: <u>https://cssp.org/wp-content/uploads/2018/10/COMMUNITY-BASED-PROGRAM-SELF-ASSESSMENT.pdf</u>

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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

parties/members). There is one Team per project Family Resource Center. Planned membership was to include a minimum of eight representatives from each site including (but not limited to) administrative and direct service staff/volunteers, community collaborators, and at least three parents/patrons 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 following a review of data obtained from the Community Module Data System (which tracks service requests and utilization trends for individual patrons) with confirmation that they received services or participated in activities linked to protective factor and following consultation with NSFRC staff regarding those active in their participation. Unfortunately, one patron was unable to be a member of the team due to personal and parental constraints.

These processes were followed in the establishment of the NSFRC SFSA Team. Composition (see below) includes three direct service staff/volunteers (Philip Mobley, Patricia Perry and Narrie Smith), two community collaborators (Katrina Evans and Stephanie Harden) and three community ambassadors (Keaven Jones, Bonnie O'Neal, and Allen Pope). There is a great deal of overlap in roles throughout the team. Mr. Jones' son is enrolled in the homework help program. Mrs. Smith, Mrs. Harden, Mr. Jones and Mr. Pope have received services as patrons. Ms. Smith, Mr. Pope, and Mr. Jones have also volunteered at the NSFRC. The term "community ambassador" was decided by earlier SFSA Teams (affiliated with the Gainesville FRCs) to better represent the status and role of patrons participating in this process given their potential knowledge (content and experiential) and 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 Connection services/activities), responses to these assessment items are meant to respond to the following questions:

How Does NorthStar Family Resource Center Help Families Value, Build, Sustain and Use Social Connections? (Items 2.1 to 2.7)

How Does NorthStar Family Resource Center create an Inclusive Environment? (Items 2.8 to 2.10)

How Does NorthStar Family Resource Center facilitate Mutual Support? (Items 2.11 to 2.18)

Team members received an orientation to the CSSP Protective Factors Framework, its relationship to the NorthStar Family 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

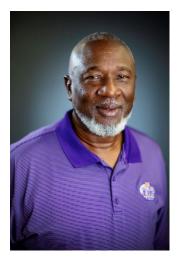
preferences, electronic versions of the tool were stratified by section/protective factor. See **Appendix B** for a copy of the electronic version of the tool associated with Social Connections questions/items (the focus of this report). For the electronic versions, each team member was provided a unique (and secure) web link and 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 NorthStar Family 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 orientation meeting of the NSFRC SFSA Team took place on October 6, 2022. Following a review of the SFSA, associated process, and expected deliverables, the team decided to meet for two half-day sessions in November, however a third day was added to cover the material. 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. Meetings that involved the discussion of Social Connection items took place on November 17, 2022. The dates and times of meetings were in accordance with preferred times and schedules of all team members and attendees.

The NorthStar Strengthening Families Self-Assessment Team

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



Allen Pope Sr. has visited NorthStar 183 times since first coming in September 2021; much of this time includes regular attendance for the community walk. Allen has also helped with several community events hosted by NorthStar. He has lived in Columbia County since 1973 and graduated from Columbia High before joining the Army. Allen was in the service for three years as a Cannon Crewman then worked at Carlon PVC Pipe Co. He has experience with General Electric as a military policeman in Ocala, FL and as a correctional officer. Allen has been a volunteer coach in Columbia County for 18 years and volunteers at his church, New Bethel AME, in several capacities. Allen is a husband of 22 years to Beverly Pope and father of four biological children and three adopted children. The Popes have fostered over 15 children and provided respite care to other foster families. Mr. Pope shares that he loves the caring and inviting

atmosphere at NorthStar. He is glad that the SFSA team has identified many issues that are lacking in the community and the need for them to be addressed.



Bonnie O'Neal has been coming to NorthStar Family Resource Center since August 2021 as a patron to access services for herself and her family. She was raised in Kissimmee, FL and eventually moved to Lake City, FL in 2019 from Ocala, FL. Bonnie received her Associate of Science degree at Florida Metropolitan University and started schooling to become a medical assistant. Unfortunately, she had to leave the program early to be a caretaker for sick family members. Bonnie is a wife of 28 years to her husband Byron, is a mom to a son and daughter, and loves spending time with her family. She loves everything about NorthStar and was happy to join the SFSA team to be involved and share her experiences.



Keaven Jones is originally from White Springs, FL but has been a part of the Lake City community for 39 years and first started to connect with NorthStar Family Resource Center in May of 2021 as a patron. Keaven works for Career Source Florida Crown as a Workforce Innovation and Opportunity Act (WIOA) supervisor. WIOA is designed to help job seekers access employment, education, training, and support services to succeed in the labor market. WIOA also matches employers with the skilled workers they need to compete in the global economy. While he and his two boys are not helping with his mother's yard beautification projects, he is spending time with them and his nieces and nephews at local parks and playgrounds. Keaven loves opportunities that Northstar provides and the support they provide to all cultures. He shares that he "was inspired by the staff and volunteers that I have encountered while attending the

community center" and that "kids that I have met while visiting help to remind me why the future looks so bright."



Dr. Philip Mobley

is the NorthStar Family Resource Center Manager and the Senior Minister of the Northside Church of Christ, located in Lake City, FL. He was raised in Lake City but lived for many years in Jacksonville, FL developing his personal and professional skills. Phil received his Doctoral Degree in Education Leadership from the University of North Florida in 2019, his MBA from Jacksonville University in 2002, and a Bachelor's degree from the University of North Florida in 1975. Dr. Mobley served as a Board Member of the Suwanee Valley United Way and the Community Advisory Board for the Columbia/Hamilton County Health Department. He is currently a member of the Richardson Community Center Advisory Board. Phil is a husband of over 48 years to Lotonia (Toni). They have two children, seven grandsons, and two granddaughters. Phil loves that NorthStar provides services and resources to families to help prevent or resolve crises and

develop strategies to strengthen families. Dr. Mobley shared that he enjoyed hearing everyone's perspective through the Strengthening Families Self-Assessment meetings.



Narragansett "Narrie" Smith, sister of Phil Mobley, has been a longtime patron, supporter, and volunteer of the NorthStar Family Resource Center. She has lived all her life in Lake City, FL. Narrie has a bachelor's degree in Business Administration from the University of North Florida and a master's degree in Educational Leadership from Nova University. After 23 years as a teacher, Narrie became the Principal of Niblack Elementary school, raising their school score from an F to an A. Narrie has served as the Assistant Superintendent of the Columbia County School District and currently sits on the Columbia County School Board. She is a minister and director of Christian Education at New Bethel Missionary Baptist Church. She spends her time volunteering at NorthStar, with Columbia County Schools, and being with family. Narrie is a wife of 47 years to Johnny Smith, mother to two daughters, and proud grandmother of 6. She loves working with

children and models her life around serving God and His people. Narrie was glad to be a part of the SFSA team because it identified areas to grow and improve as a Family Resource Center.



Ms. Patricia A. Perry has been the Administrative Assistant at NorthStar Family Resource Center since before the doors opened to the public in March 2021. She was born and raised in Lake City, FL and has spent much of her life there. Patricia graduated from Columbia High School in 1974 and attended Florida A&M University in Tallahassee and Seattle Central College in Seattle, WA. Starting as a file clerk and working her way up through the Columbia County Clerk of Courts for 30 years, she retired as the Chief Deputy Clerk. Patricia is a wife of 35 years to Nathan Perry Jr. and mother to Joshua Perry. Her church family is a major part of her life, she has been a member of New Bethel Missionary Baptist Church since 1969. Patricia loves that NorthStar makes efforts to help the community in any way possible. She hopes her varied experience and familiarity with the people of Lake City will be a benefit to the community.



Katrina P. Evans, Director of the Columbia County Public Library, has supported the NorthStar Family Resource Center and been a member of the Lake City Resource Center Advisory Council since its inception. She grew up in Lake Placid, FL but has lived in Lake City for more than 25 years. Ms. Evans has a master's degree in Library and Information Studies from Florida State University and a bachelor's degree in literature and history from the University of North Florida. She began her career at the historic Walton-DeFuniak Library and was later hired at Columbia County Public library in 1997. After 19 years of service as Outreach and Youth Services Librarian and Assistant Director, Ms. Evans became the library director in 2016. She has served on the Board of the Northeast Florida Library Information Network and has volunteered in various capacities with the Florida Library Association and Edward Rutledge Chapter, NSDAR. Ms.

Evans has served on local school advisory committees and volunteers with her church. Her husband, Kevin, is a school media specialist at a local elementary school and they have two sons, Drew and Rhys. Katrina joined the SFSA team to learn about local resources that she can take back and share with library staff and patrons. She loves that NorthStar is providing a "one-stop-shop" to our community where people can get assistance with a variety of needs. She shares, "I love that this need is now being met so compassionately by NorthStar Family Resource Center and its amazing staff."



Stephanie Harden began to connect with NorthStar Family Resource Center in January of 2021. Stephanie is a native of Philadelphia, PA, but she has lived in Florida for the last thirteen years. She began working in Lake City last year through a promotion to Hope Navigator II with the Department of Children and Families. Stephanie is working on her master's degree in Strategic Business from Northcentral University and plans to get her doctorate in Theology. She has 30 years of teaching background and over 20 years of customer service experience, along with over 20 years of Ministerial Leadership and Counseling, that she applies to assisting families in need. Stephanie is the business owner/CEO of Loving Arms Services and serves on several boards including the Partnership for Strong Families Children's Partnership Counsel. Stephanie is a wife of 20 years to Pastor Troy Harden, mother of 10 children (blended family), and a grandmother of

17 beautiful grandchildren. In addition to spending time with her family, she reads, loves to thrift store shop, and is completing her first book. Stephanie loves that NorthStar is in a central part of Lake City that needs resources and is working to create a service provision agreement to open a Hope Florida Navigator satellite station at the family resource center. Stephanie was glad to be a part of the SFSA team because there were several wonderful action items to work on. With years of experience in various resource centers Stephanie appreciates the compassion and family atmosphere shown at NorthStar.

Although not formally members of the NSFRC SFSA Team, Dr. Robin Perry (Lead Evaluator) and Christen Lancaster (NorthStar Family Resource Center Community Research Coordinator) attended each of the NSFRC SFSA Team meetings. They, and Toni Spoliansky (Project Director for the Resource Center Model: Evaluation, Refinement, and Expansion grant) who attended these meetings as well, 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 NSFRC. Christen Lancaster is the Community Research Coordinator for the NSFRC, 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 NSFRC. 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 NSFRC to community needs related to supporting families through the provision of concrete supports in times of need. 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. Feedback and recommended edits to documented discussion items and decisions could be provided within scheduled meetings (over three days) or in dialog/e-mails to Robin Perry and/or Christen Lancaster in between meetings.

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 Social Connections. For a more detailed itemization/descriptive profile of all responses, please see **Appendix C** for the *SFSA Tool for Community-Based Programs—Social Connections 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.

How Does NorthStar Family Resource Center Help Families Value, Build, Sustain and Use Social Connections?

Table 1 (see below) provides a detailed summary of the items/questions associated with a measure showing how the NSFRC 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 which most team members thought to not be applicable. In 2021, services requests linked to the social connections protective factor accounted for 28.5% (n=469) of all requests at NSFRC; the second highest rate among all protective factors, with more requests made for concrete supports (Perry, Lancaster, Mobley, Merritt, Spoliansky, & Edelman, 2022). The team scores (weighted average) cells are color coded 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 12 of the 21 items/indicators of how (NSFRC) helps families value, build, sustain and use social connections.

Community ambassadors and providers agree that the environment of NSFRC is one that is caring, friendly, and accepting. One community ambassador shared "NorthStar provides good support and is a safe place to bring my son, and the staff are friendly". With positive social relationships, NorthStar can be a trusted channel to access resources in the community.

"NorthStar provides good support and is a safe place to bring my son, and the staff are friendly"

Several social connection events happened throughout the past year at NorthStar FRC, allowing patrons to get to know each other and build positive community connections, thus contributing to several consensus agreement ratings in Table 1 (see below). On January 17, 2022, NorthStar FRC hosted a Martin Luther King Neighborhood Beatification Day, which included 11 participants, 5 of which were youth. Celebrating the holiday's motto, "a day on, not a day off," participants walked through nearby neighborhoods, picking up trash along the way.

In the same month, planning sessions began for the Remembering Richardson High School event that took place on February 26th, 2022. In total, eleven planning sessions allowed community ambassadors and stakeholders to align in a common goal to build up social connections with each other while planning for this community event.

In preparation for this event, two additional days were set aside to collect video footage of Richardson High School students recalling their fond memories of the school. This footage was shared at the event, along with other memorabilia, photos, a recitation of the school anthem, the unveiling of the historic marker, and proclamations from the City of Lake City, Columbia County, Columbia County School Board, US Representative Al Lawson, and FL House of Representative Charles Brannen. The event was a great success with 125 participants reminiscing about their shared history of family, friends, teachers, and principals (Chase, 2022). The group of event planners came together for a follow-up meeting to remark on what went well and what could have gone better, celebrating each other for their shared accomplishment of bringing such a meaningful event to the community.

NorthStar FRC partnered with Another Way³ to plan and host the "Walk a Mile in their Shoes" event on October 17th, 2022. This is an international walk where individuals lead the way on the road to ending domestic violence and included a candlelight vigil, guest speakers, food, and music to bring awareness to domestic violence.

In 2022 NorthStar FRC was involved with two social connection events oriented around kids and their families. On April 23rd, 2022, NorthStar FRC partnered with the Kiwanis Club of Lake City to participate in its annual fundraising event Kiwanis Kid's Day. This event was a day of fun, food, and sights for all children. A month later, NorthStar FRC held its Family Fun Day on May 28, 2022, which included

³ Another Way is an organization that provides a 24-hour phone hotline and domestic violence and sexual assault services in Columbia (with an office in Lake City, where NSFRC is located), Dixie, Levy, Gilchrist, Hamilton and Lafayette Counties, and sexual assault services in Suwannee County. For more information regarding Another Way, please see: https://www.anotherwayinc.net/index.html

cornhole, volleyball, and kickball, along with a bounce house, shaved ice, and more. This was an opportunity for families and children to get to know each other and build healthy relationships.

NorthStar also held two social connection events focused on financial success. One event was held on May 16, 2022, provided patrons with information about building good credit and the other event was held on July 8, 2022, provided general financial information and advice.

As a connection hub, NorthStar brings people together to plan community events. Three planning meetings proceeded the Columbia and Hamilton World's Greatest Baby Shower event on October 13, 2022. This annual event is run by Healthy Start, which works with community providers like NorthStar to reach local pregnant women and new mothers of infants up to one year of age, as well as caregivers and family members. This event includes door prizes, games, refreshments, a photo booth, and vendor tables representing many organizations and agencies in our community.

Throughout the year, NorthStar has been used as a community space for the meetings of the Children's Partnership council, Resource Center Advisory Council, and the Strengthening Families Self-Assessment Team.

Both formal events and informal planning sessions provide patrons with opportunities to get to know one another and foster a sense of community. Community building in this way encourages positive relationships between families and staff members and welcomes newcomers and patrons that may feel isolated. This is shown in the consensus agreement that staff help families value, build, sustain and use social connections. A few of the ways the team agreed that NorthStar does this include:

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).

2.2.3 Informally, by introducing parents to one another.

2.3 The program provides opportunities for families to socialize and foster a sense of community by organizing/ hosting:

2.3.3 Celebrations, graduations, and holidays.

2.3.4 Field trips and community events.

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.

2.3.6 Affordable family activities.

2.3.8 Social media groups or web pages where parents can get program information and interact with one another.

2.4 The program encourages positive relationships between families and staff members by planning informal social events where staff can interact with families.

2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:

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.

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.

Though there are opportunities for social connections, there are also several reported barriers. One barrier as mentioned in all the SFSA Team meetings includes NorthStar being "...new on the scene" in other words, an organization in its early stages of development and acceptance within the community. Team members shared their experience that it takes time to build social trust in a community like Lake City, a community built on social and personal relationships. A new organization must invest the time and resources to build solid relationships. One community ambassador shared their knowledge of individuals and groups in the community that "...hold on to things that happened over 50 years ago," and how this adversely affects current relationships and the quality and nature of social connections among groups/sectors in the community. One community ambassador shared that he has seen the distrust of certain people lead to the rejection of good advice. Another SFSA team member stated that you may find "...the kind of connection you are looking for in a church, but not in general society." In sum, there are reportedly social elements and influences associated with Lake City's past—including those associated with social, political, racial, and religious views/differences among community subgroups, and discriminatory treatment of marginalized groups/populations—that serve as a potential source of division (whether explicitly or implicitly manifested) and barrier to social connectedness within the community.

Regardless, staff and volunteers at NorthStar FRC are committed to building community relationships and providing opportunities for families to build and sustain social connections. Dr. Phil Mobley is the Manager at NorthStar FRC but also serves as a local pastor and community leader in the area and is committed to building social capital within the community. His sister, Narrie Smith (a volunteer at NorthStar FRC) is a longtime educator and faith leader within the community and currently serves on the Columbia County School Board. Staff member Patricia Perry has been a committed community member, known to many in Lake City given her 30 years of employment at the Clerk of Court office. Dr. Mobley and Ms. Smith's father was also known in the community as a principal at a one-room schoolhouse Kings Welcome, a Baptist Pastor, and a teacher at Richardson High School. These staff, volunteers, and many community partners supporting NorthStar FRC efforts have an established history within the community. Just as historical barriers to trust within the community exist, SFSA team members acknowledge positive counter influences among many community members, stakeholders,

NorthStar FRC is ... an important step toward connecting with marginalized or isolated groups by being a conduit of support...

service professionals, and leaders working with NorthStar to improve the quality of relationships in the community and improving things for children and families. NorthStar FRC works to create space for connecting and establishing trust despite above noted barriers. Team members agreed that one of NorthStar FRC's values is that it represents an important step toward connecting with marginalized or isolated groups by being a conduit of support for children and families within these groups.

Table 1 also highlights a series of items for which the consensus ratings represent scores in a range of neither agree nor disagree. These include:

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:

2.2.2 Through parent mentoring and matching for one-on-one support.

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.

2.3.2 Periodic events like coffee breaks and breakfasts.

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.

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).

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.

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.

Although the rating for 2.2.1 (p.12)—that focuses on the provision of "parent support groups" as opportunities for parents and families to connect with one another—received a consensus agreement rating, this rating was not meant to imply that formal parenting groups or "classes" are provided at NorthStar FRC. Select team members perceived informal parent supports and community events, denoted above, as supporting parents.

Although NorthStar FRC does not currently have formal parenting groups, the SFSA team identified a need for such supports. Some discussion ensued regarding the possible use of the word "parenting" in

any description of supports to be provided to families at NorthStar FRC. There was consensus, that paralleled other SFSA Teams at other PSF FRCs, that cautioned against the use of wording "parenting classes" or "parenting groups." These phrases, it was noted, represent practices within other contexts that are perceived as stigmatizing and likely to make parents feel undervalued and judged.

In addition to parental supports including mentoring, advisory groups, and a focus on father engagement, the SFSA team identified a need for supports covering topics such as teen pregnancy, substance use and abuse, and issues related to youth involvement with drugs and gangs.

These groups may enhance parental resilience, along with knowledge and skills related to parenting and child development while providing patrons with an opportunity to get to know each other and develop social relationships. The SFSA team asserted that these supports and associated events could be opportunities for patrons and parents/caregivers to gain friends and build a social support network.

The need for engagement of and support for fathers permeated much discussion with findings related to this protective factor. Assessment findings specific to fathers are highlighted in the section of this publication related to Table 3 findings.

One specific marginalized group the team discussed is that of teen parents. Although NorthStar FRC staff report there have not been any patrons that identify themselves as teen parents, the team believes this is a large issue in the surrounding neighborhoods and broader community served. This need was not identified in NorthStar's Community Strengths and needs assessment in 2020⁴. Teen parents have not been specifically targeted by NorthStar FRC for specific services and supports. Discussion ensued on possible resources that are available within the community and the ability of NorthStar FRC to provide support to this fragile and often isolated population. Although teen parents could benefit from general parenting support, they have unique struggles that often create special needs. In a similar light, parents and grandparents also need help to support teen parents in their life, encouraging them to take responsibility/accountability for their child. Community provider Stephanie Harden (with the Office of Economic Self-Sufficiency at Florida DCF) shared that the Department of Children and Families does provide support to teen parents, working with them to develop better self-esteem and planning for the future. There is also a teen pregnancy program at the local high school, along with a daycare facility called "Tiger Tots Child Development Center." Healthy Start has a local program office in Lake City at the Florida Department of Health offices in Columbia County. Healthy Start is a free program that provides an array of services and supports including, but not limited to, "...education and support in childbirth, breastfeeding, women's health, parenting and more..." to help any expectant mother and families with infants and children up to age 3 "...who are at risk for poor birth outcomes and need help with healthy child development."⁵ NorthStar FRC has provided help every year since opening with facilitation of the World's Greatest Baby Shower for Hamilton and Columbia County parents. As part of

⁴ NorthStar's Strength and Needs Assessment can be found within the presentation of community indicators as shared at the NorthStar visioning session at: <u>https://www.pfsf.org/wp-content/uploads/NFRC-Vision-Session-Presentation.pdf</u>

⁵ Source and more information regarding Healthy Start services and supports in Columbia County (a member of the North Central Florida Coalition) can be found at: https://columbia.floridahealth.gov/programs-and-services/wellness-programs/healthy-start/index.html Additional information regarding the Florida Association of Healthy Start Coalitions, can be found at: https://www.healthystartflorida.com/

the experience, expecting parents, or those with children under the age of one, receive resources, and baby supplies and have an opportunity to win prizes.

Despite the above noted community resources, SFSA team members report general concerns regarding familial supports and relationships across generations within a family where there is a teen parent. It was thought that there are frequent disconnects in communication between younger and older generations that subsequently increase conflict and make it difficult to establish a holistic approach to supporting a teen parent that includes the entire family. A family-based approach that enhances engagement of family supports was perceived as a necessity for obtaining the resources needed for teen parents and their children. The value of family supports and connecting with teens to help them make meaningful life decisions was acknowledged by team members, including one member that clearly empathizes with the stresses encountered by teens parents (having been a teen parent) and engages with girls and youths about these topics. Here, it was noted how important it is that youth are engaged with caring adults on these topics, highlighting "...much of the life-changing work to be done in young people's lives starts with social connections and building a rapport [with them]." Toward this end, this member spoke of the value of organizations like Girls, Incorporated (for which this member has worked and/or been affiliated with)—which has seven sites in Florida but not in Lake City or Columbia County (the closest is in Jacksonville)—for engaging females through the use of "evidence-based programming...delivered by trained professionals who focus on the development of the whole girl, supporting, mentoring, and guiding girls in an affirming, pro-girl environment...girls learn to value their whole selves, discover and develop their inherent strengths, and receive the support they need to navigate the challenges they face."⁶

Within the context of discussing needed supports for teen parents, their families, and their children, the SFSA team highlighted the need within the community for more effective pregnancy prevention programs. Unfortunately, it was reported that there are no pregnancy prevention programs targeting teens in Lake City or Columbia County that are not solely focused on abstinence as a form of prevention. NorthStar FRC can assist with specific concrete supports, as available, for expectant and new parents (including, but not limited to, diapers, infant clothes, etc.). They can also provide referrals to other local resources/supports (some denoted above) but do not specifically target support for teen parents or pregnancy prevention efforts. Although no action items were identified given the above discussion, interest was expressed in exploring possible communication with Columbia High School to learn more about the needs of the pregnant teen population.

⁶ Source and more information regarding Girls Incorporated can be found at: https://girlsinc.org/what-we-do/

Table 1: How Does NorthStar Family Resource Center Help Families Value, Build, Sustain and Use Social Connections?	Team Score (Weighted Average)
	4.44
2.1 Families have access to a comfortable space where they can meet informally.	
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	4.00
focuses).	2.00
2.2.2 Through parent mentoring and matching for one-on-one support.	3.89
2.2.3 Informally, by introducing parents to one another.	4.00
2.3 The program provides opportunities for families to socialize and foster a sense of community by	
organizing/hosting:	0.50
2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.	3.56
2.3.2 Periodic events like coffee breaks and breakfasts.	3.56
2.3.3 Celebrations, graduations and holidays.	4.00
2.3.4 Field trips and community events.	4.11
2.3.5 Events celebrating cultural customs, potlucks, and other opportunities for parents to	4.00
share and learn about each other's home lives and cultural backgrounds.	
2.3.6 Affordable family activities.	4.11
2.3.7 Special programs for dads, grandparents, teen moms, teen dads and other caregivers	3.75
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	4.11
interact with one another.	
2.4 The program encourages positive relationships between families and staff members by planning	4.22
informal social events where staff can interact with families.	
2.5 The program offers or connects families to resources to strengthen relationships between adults	3.56
(e.g., healthy marriage skills, communication skills, conflict resolution, co-parenting).	
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.	3.75
2.6.2 Connecting with them on social media platforms through program pages or groups.	3.88
2.6.3 Offering support with transportation, child care or other barriers to participation.	3.56
2.6.4 Making special efforts to connect them with other families who share similar interests.	3.50
2.6.5 Connecting them with resources (including mental health consultation) that can help	4.33
them explore difficulties with forming social connections.	
2.6.6 Matching families with staff or other families who can help them feel welcome and	4.00
valued in program activities.	
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,	4.25
ibility, etc.	

How Does NorthStar Family Resource Center Create an Inclusive Environment?

Table 2 highlights a group consensus of agreement for all items associated with NSFRC's efforts to create an inclusive environment. The SFSA team strongly agreed that the NorthStar staff were friendly and open to everyone, and the family resource center had a positive atmosphere. Staff was seen as modeling positive interactions during social events and making newcomers feel welcome.

In an effort to continue bolstering an inclusive and connected family resource center, NorthStar has a goal to increase relationships with faith-based community groups and members in the area. This will

allow an expansion of services to communities of marginalized and vulnerable populations that are known to religious leaders and members in select neighborhoods and communities.

NorthStar FRC staff are constantly striving to increase these social interactions on a personal and community level. On October 30th, 2022, the NorthStar FRC manager (Phil Mobley) met with local religious leaders to discuss issues of crime, drugs, and other issues affecting the community. There was an expanded discussion regarding these efforts that were supported by the SFSA Team. These efforts were considered a good start, but it was thought that more could be done to connect with these faith-based organizations that provide supports and services to marginalized populations. These considerations led to the following action item:

Action Item #1: NorthStar will make a deliberate effort to connect with and ask for involvement from places of worship that serve marginalized populations.

The SFSA Team spoke extensively of NorthStar FRC's welcoming stance to all people and the supportive environment exemplified by the actions and interactions of staff and volunteers with patrons and families. This assessment led to the team's consensus agreement that staff help create an inclusive environment by all items in Table 2.

Table 2: How Does NorthStar Family 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.	4.78
2.8.2 Inviting all families to program parties or social events.	4.56
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.	4.44
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.	4.25
2.9 The program helps staff learn how to reduce stereotyping and bias by:	
2.9.1 Modeling inclusive behavior among the staff.	4.44
2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).	4.25
2.9.3 Providing training and support for helping families and children resolve conflicts effectively.	4.38
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).	4.38
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.	4.00
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.	4.22
2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.	4.44

How Does NorthStar Family Resource Center Facilitate Mutual Support?

Findings in Table 3 highlight a team assessment (consensus) of agreement (reaching an average threshold score of 4.0 or higher) with 6 of the 9 items/indicators of how (NSFRC) facilitates mutual support.

When discussing the parental resilience protective factor, the team identified a relevant action item to explore opportunities for structuring parenting support groups including parenting issues and education, and father and mother-specific groups for engagement and support. Value for parent support groups (including those that facilitate mutual support) was highlighted while keeping in mind the barriers and social stigma surrounding these topics. The importance of parent engagement (especially fathers) was discussed within the context of neither agree nor disagree ratings for select items denoted in Table 3 (see items 2.11, 2.13.1, and 2.13.2) and Table 1 (see items 2.2.1, 2.2.2, and 2.6.1 through 2.6.4). NorthStar FRC has already begun planning activities and events meant to enhance engagement of fathers that will, in part, explore issues impacting children and youth in the community, reinforce and explore the establishment of peer parenting mentoring initiatives, help establish mutual support mechanisms, value the roles of parents (including fathers) in their children's lives, and reinforce the importance of children having positive adult (including male) role models.

NorthStar FRC is planning a "Boys to Men" summit in March of 2023 that is dedicated to address issues impacting males within the community. Successful male role models from Lake City who are now professional athletes and community mentors will be included to lead workshops to draw in kids and families. Planned workshops (planning was still in progress at the time of the writing of this report) will focus on a variety of topics, including supports needed for young men, experiences of and resources needed for single parents (mother and fathers), the value and importance of fathers, and the growing drug epidemic in the area. Dr. Mobley plans to identify and utilize positive role models to facilitate the workshops who "walk the talk and live the life like Keaven...," highlighting the experiences and commitment of Keaven Jones; a SFSA team member and Workforce Innovation and Opportunity Act (WIOA) supervisor with Career Source Florida Crown, a collaborative partner with NorthStar FRC. Mr. Jones is described as a dedicated and caring father, has been a member of the community for almost 40 years, and has reportedly made a personal and professional commitment to help individuals and families in the community. One community ambassador agreed that we need to bring in people who are successful in life and in their careers who can tell the children, "You can do it, you can be someone, and you can do it without selling drugs".

"Success would look like parents having a place to come to say (hey, I have a problem.""

There was expanded discussion regarding these issues and the proposed event. Fathers and young boys, it was held, have unique challenges they face, so events like these are an opportunity to build capacity for further familial engagement while providing support to this population. One highlighted issue included men not being connected or engaged in their children's lives. Another issue included the barriers that adult males/fathers may encounter that adversely impact their success in family relationships and careers. Team members identified the importance of portraying to fathers, no matter what challenges they experience, that they, "...still have an obligation to be involved in these children's lives." Some fathers, it was noted, have no social context for how to be fathers. Some may experience "roadblocks" from their child's mother, causing them to feel disengaged and disempowered. One member noted that interpersonal stressors can cause fathers to disengage from their children's lives and say, "okay I'm done." Fathers may require guidance on how to deal with the roadblocks they encounter and need encouragement to stay involved with their child(ren). To do this, team members asserted fathers need a "safe space" to seek out these supports, in a non-stigmatized manner. The NorthStar FRC manager (Dr. Mobley) reiterated that in terms of any planned, future engagement efforts of fathers "...success would look like parents having a place to come to say, 'hey, I have a problem.'"

In addition, there are specific needs of young males lacking a present, positive male role model. Staff and select SFSA team members noted that there are "many young boys" in the community who do not know their fathers, or their fathers are in prison. It was noted that children suffer without a positive role model in their lives and will seek out sources of approval that are not good for them, like gangs. In Lake City, there is an increase in violence and drug activity among young men, for which Dr. Mobley noted (with uniform agreement of other team members), "there is a real issue with the young men in this community."

Following an expanded discussion of the planned "Boys to Men" summit, it was thought that some exploration of an annual event would be of value and can serve as a foundation for developing and sustaining different mentoring and support group opportunities and connecting parents to additional peer/mutual and professional resources and supports. The following action item was generated as a result of these discussions:

Action Item #2: NorthStar FRC will work on developing an annual summit focused on reclaiming the community's youth and males that include workshops targeted towards parents and young men and feature successful athletes and professionals from this area with the goal of developing mentorship programs and support groups.

The planned Boys to Men summit, other social connection events throughout the year, and a general willingness of NorthStar FRC staff and volunteers to be responsive to the needs of the community, reportedly resulting, in part, to the SFSA team consensus of agreement for the following items associated with facilitating mutual support among patrons:

2.12 There is time built into program activities for parents to network and share with each other.

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).

In addition to the social barriers listed above, select team members discussed the impact of barriers within and between families (in the community) in establishing mutual trust and the subsequent impact such may have on facilitating mutual support systems between parents and families. There was an open and free-floating discussion on these issues. One community ambassador shared that there are

fundamental differences in what people believe is "right and wrong." Different family values on these issues may impact the extent to which select parents/families want to explore social relationships with others. It was asserted that there are concerns with connecting socially with other families, even in their neighborhoods, due to crime, fear of pedophiles, and drugs. One community ambassador recounted that when his daughter was growing up, his wife would background check the members of the family she was planning on visiting. There was general agreement among the group that "you can't be too careful," while agreeing that it is good to have social connections to help each other with shared needs and support. The group discussed what role the family resource center may be able to play in making these needed connections and facilitating mutual support systems among responsible and trustworthy parents. One community ambassador said that "getting the resources out into the community is a good start." Providing needed resources (e.g., concrete resources and parenting supports) helps "build trust in the community" and with families that may eventually contribute to a foundation for enhancing mutual support among families.

Getting the resources out into the community is a good start. Providing needed resources (e.g., concrete resources and parenting supports) helps "build trust in the community" and with families that may eventually contribute to a foundation for enhancing mutual support among families.

Efforts at expanding meaningful mutual support systems, it was held, can be hindered by social media influences upon children of families in the community. While children may be connecting through social media, they may not be connecting to the local community and/or available supports within and between families. The team agreed that it would be good to try and help people learn to connect in their homes and communities. Toward this end, Dr. Mobley suggested initial efforts could focus on providing resources to help parents develop skills for engaging with their children and becoming a trusted agent with their children, in their neighborhood, and in the broader community. Offering programming from an overall/general perspective that covers the big picture/timely issues related to parenting may be more successful in engaging parents initially, which can lead to developing more targeted programs over time related to parenting knowledge and skills.

Even general support groups, it was suggested, may help bridge the generational gaps that exist between caregivers/parents and children. In lieu of formal support groups, staff reportedly are sensitive to and are focused on assisting families dealing with generational issues. As an example, NorthStar FRC staff have worked to bridge identified generation gaps/issues in one family. A grandmother who is raising her grandchild continues to bring them to Homework Help because she appreciates the influence staff are having on her child. Homework Help, a program targeted to providing the social and emotional protective factor, can be an opportunity to bridge these intergenerational gaps in a safe non-judgmental space. This program has already begun to help NorthStar FRC be a trusted agent that leads to positive word of mouth within the community. Slowly NorthStar FRC is developing a track record in the community so people know they can trust the Family Resource Center with their children.

Table 3: How Does NorthStar Family 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, carpools, babysitting co-ops, play groups, social media groups or pages where parents can communicate with one another).	3.71
2.12 There is time built into program activities for parents to network and share with each other.	4.00
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, gathering at playgrounds, fun fairs or libraries).	3.67
2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.	3.78
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).	4.44
2.15 The program encourages staff and families to participate together in community improvement or advocacy projects.	4.44
2.16 Staff are visibly engaged with issues of concern to the community and are actively involved with other community organizations.	4.56
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).	4.44
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).	4.38

Fidelity of Social Connections 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 Social Connection 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)⁷ 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 Social Connection 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 31 (of a possible score of 43) or 72%, suggesting that the services and supports associated with the Social Connection Protective 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

⁷ 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: <u>https://www.strengtheningfamiliesevaluation.com/national/</u>

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.

recommended by the NSFRC SFSA Team are appropriately targeted to enhance the fidelity score of provided supports and services addressing social connections.

...the services and supports associated with the Social Connection Protective Factor were implemented with <u>moderate</u> <u>fidelity</u> to the Center for the Study of Social Policy's Strengthening Families' Protective Factor Framework.

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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 selfassessment 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
- <u>Social Connections</u>
- Knowledge of Parenting and Child Development
- <u>Concrete Support in Times of Need</u>
- 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 <u>www.mosaic-network.com/gemslive/cssp/</u>. 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.

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

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 How do programs demonstrat		5	Strongly ag	Agree 2	. Heither 28	Disagles	stonely dis	aste Applicable Comments	
	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 visits are unexpected.								



PARENTAL RESILIENCE: SELF How do programs demonstrat		5.	Stoney age	e 8 3:W	sitter agree	Indisates	stoney dis	stee Amirane
								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		- 55	HUNEW ASTREE	e 3: Heitler ?	2: 11:5880 1:	s Joney issee	& 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.						
	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.						
	1.5.6 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.						
	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.						



PARENTAL RESILIENCE: SELF	-ASSESSMENT ITEMS		diee	Neither aster	or lissues	after a
How do programs honor each culture, history and approach		5: Ston	A: Agree 3	Neither 28	artiste assee 1. stonghill	3.84°
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.					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.					
	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.					
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.					



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS	/	ally agit	0	age the	allydie	licable	
How do programs demonstrat	e that parents are valued?	6 15:	Joney ages	es Aeith	0: Disab	Stone	aste land	
			/ v . /	3	V	•	Comments	
1.8 As a part of staff orientation and ongoing staff development, program staff regularly have opportuni-	1.8.1 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:	1.8.2 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:	1.9.1 Building a staff that reflects the community and families served.							
Taninies it serves by.	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 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.							



How do programs encourage parents to manage stress effectively?

PARENTAL RESILIENCE: SELF How do programs encourage	-ASSESSMENT ITEMS parents to manage stress effectively?	43. 43.	Unev alles	3. Neither 25th	a ton tradies	Net Holeseee	
					//	Co	mments
 proactively and supportively. S Parents' acknowledgement Unusual parental behavior Repeated unexplained abse Repeated tardiness or miss Divorce, separation, military other family crises Changes or fluctuations in a challenging behavior, fearful 	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 through:	 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 or participate in other parent-only activities. 						



PARENTAL RESILIENCE: SELF- low do programs encourage	ASSESSMENT ITEMS parents to manage stress effectively?	5	Strongly 25	Jee Maree	Neither 28	e nordisati	Stongly dis	Autoricate Autoricate 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	5	Storey age	e glee	heither age	ise nor disset	stongly dis	and the second s
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.							
	1.14.2 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	Stoney art	ee helee 3.	Heine age	In tisatee	NOT POPER PROPERTY OF THE POPERTY OF	ji [®] 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.							



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	rents as decision-makers and help	/	Stoney at		Neither 255	ee nor disaet	stonely dif	38688 IL MUNICABLE	
build decision-making and le	adership skills?	45.	Stru A	Agree	Net 2	Dist. 1	STU N	J. AP.	
1.16 Parents are engaged as partners in developmental screenings or assessments of	1.16.1 All staff are trained in the program's confidentiality policy regarding screening and results.							Comments	
their child:	1.16.2 Parents are informed about the confidentiality policy and what it means to them.								
	1.16.3 Parents participate in the screen- ing 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.								
	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.								
	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.								
	1.17.2 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 involve- ment and leadership.								
	1.17.4 Are updated regularly.								



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PARENTAL RESILIENCE: SELF	ASSESSMENT ITEMS		all ^{ee}	3. Neither 250	a nor disagre	e iisat	988 - 198
How do programs support par build decision-making and le	rents as decision-makers and help adership skills?	43- 43-	Intel ages	3: Neither 25	Jisagree	stonely disar	AND COMPANY OF COMPANY OF COMPANY
							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.						
	1.18.4 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	1.19.1 Providing opportunities for families to volunteer and contribute to the program.						
and decision-makers by:	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.						
	1.19.4 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 How do programs support pa build decision-making and le	rents as decision-makers and help	45.	HUNEY ALLES	8 3. Halfer 2	8188 PUT HIS SEE	EE SIMPLY OF	sages Lethnicale Comments
1.20 The program promotes participation in activities by:	1.20.1 Addressing topics, issues and skills that families identify as important to them.						
	1.20.2 Designing activities to address interests of different family members (e.g., fathers, mothers, other family members).						
	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.						
	1.21.3 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:	1.22.1 Hosting or linking parents to com- munity 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.						
	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.						



PARENTAL RESILIENCE: SELF-ASSESSMENT ITEMS					nordisat	je ^e	11 ²⁸
How do programs help parents understand how to buffer their child during stressful times?	45	Strongly 2	tie Agree 3	. Neither age	.Disaglee	Stonewill	
							Comments
1.23 Staff receive training on talking with parents about helping children in times of family crisis.							
 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 							
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.							



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

SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS How do programs help families value, build, sustain and use social connections?			Strongy ar	Lee Ages	Heither 25te	e nor disage	strongly dis	astre .
								Comments
2.1 Families have access to a construction of the second s	omfortable space where they can meet							
2.2 The program provides opportunities for families with similar interests, children's ages and/or circum-	2.2.1 Formally, through parent support groups (including those with both broad and narrow focuses).							
stances (such as those with twins, parents of infants, parents with special-needs	2.2.2 Through parent mentoring and matching for one-on-one support.							
children or parents who speak the same language) to connect with one another:	2.2.3 Informally, by introducing parents to one another.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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ow do programs help familie se social connections?	es value, build, sustain and	5.	SHOREW 28	Agree 3.	Heither 28:	Jisagree	Stongly dis	asto Lehnicale
								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.							
	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.							
	2.3.6 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.							
	2.3.8 Social media groups or web pages where parents can get program information and interact with one another.							
	sitive relationships between families and nal social events where staff can interact with							
	cts families to resources to strengthen , healthy marriage skills, communication skills,							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

SOCIAL CONNECTIONS: SELF- low do programs help familio ise social connections?		5	SHOREW 24	BEE 3:	Heither 251	e nur disast	stonewait	astres A Heriticans Comments
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.							
	2.6.2 Connecting with them on social media platforms through program pages or groups.							
	2.6.3 Offering support with transportation, child care or other barriers to participation.							
	2.6.4 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.							
	isolation or reluctance to participate can ue to differences in race, language, culture, tation, ability, etc.							



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs create an i			Stonely 25	, hypee 3:	Heither age	e nor disagree	se storely dis	egee , puissie	
		5	5' A	N ^t 3	r v	v ~	NO.		1.
2.8 The program and its staff model positive social skills and community building 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 					_		Commen	
	 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:	 2.9.1 Modeling inclusive behavior among the staff. 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. 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). 2.9.5 Regularly reviewing policies, forms and documents to ensure that all content discourages beliefs and practices that stereotype, marginalize or discriminate against families. 2.9.6 Ensuring that any instances of prejudice are quickly and explicitly addressed, 								
	udice are quickly and explicitly addressed, and that staff use any such incidents as opportunities to demonstrate program values of inclusion and respect.								
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2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



SOCIAL CONNECTIONS: SELF-ASSESSMENT ITEMS

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SOCIAL CONNECTIONS: SELF- How do programs facilitate m		5	Strongly 28	Alles 3:	Heither age	e nordisaet	se strong wiss	
								Comments
(e.g., phone trees, car pools, bab	parents to set up mutual support mechanisms nysitting co-ops, play groups, social media an communicate with one another).							
2.12 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:	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.							
the immediate neighborhood or le	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	staff and families to participate together in cacy projects.							
2.16 Staff are visibly engaged w actively involved with other comm	ith issues of concern to the community and are nunity organizations.							
	receives support from the local community services, volunteer service, tangible gifts, pport).							
	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.

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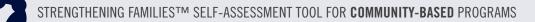
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KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

How do programs model developmentally appropriate interactions with children?

					Comments
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.				
	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 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.				
3.3 Physical discipline (i.e., spa by staff or parents.	nking or hitting) is not allowed in the program				



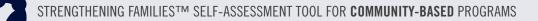
KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT: SELF-ASSESSMENT ITEMS

KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs model deve interactions with children?		5:5H	AT PRES	481118 28188 1 2:115	1: 510 84	aster A heriticalité Comments
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.					
	3.4.2 Provide information on age- appropriate positive discipline techniques and reasonable expectations.					
	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.					
	3.4.6 Recognize different parental and cul- tural 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.					



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

KNOWLEDGE OF PARENTING SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		1 25	le ⁸	215	se nor disast Disastee	Storey dis	astree at the
How do programs provide in parenting and child develop		5	Strongly 29	Astee 3.	Neither 2	Disagree	Strongly N	aste
								Comments
	s are offered as one among several strategies for f 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.							
	3.6.3 Parents have opportunities to try out new parenting techniques in the context of parent-child activities and/or as "homework" assignments between classes.							
	3.6.4 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.							
	3.6.6 Staff exhibit warmth, genuineness, flexibility, empathy and good communication skills with families.							
	3.6.7 Child care is offered while parents are in classes.							
	3.6.8 Transportation, food or other supports are provided as appropriate to enable parents to participate.							
	3.6.9 If implementing an evidence-based or proven program, the program is delivered with fidelity to the original course design and content.							
3.7 Information is provided to p to expect of their children at eac	barents on stages of child development and what the stage.							



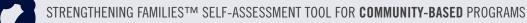
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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS	AND CHILD DEVELOPMENT:		35	J.e.e.	Heither 25	ee nor disage	ee di	allee ulle	
How do programs provide info on parenting and child develo		5	Strongly ar	heree 3	Neither 2	Disagree 1	Stoney di	aster and a second seco	
		(Ĺ		ĺ	Ĺ	Comments	
3.8 Parenting information and materials used by the program are culturally and	3.8.1 Are available in the language spoken by program families.								
linguistically appropriate, and:	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.								
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.								
	3.9.2 Parenting classes.								
	3.9.3 Support groups.								
	3.9.4 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.								
	3.9.6 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	3.10.1 Parent education groups (including fatherhood groups).								
different ways of parenting, such as:	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.								



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KNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS How do programs provide info on parenting and child develo	5	Stonely as	Pee 3:	Neither 25th	e nor disaet	se Strongly dif	ages Lennicans		
to the needs of parents in differen • Different parenting styles of r • Needs and concerns of first t • Needs of parents who are pa • Noncustodial parents	nothers and fathers and the strengths of each ime parents							Comments	
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.								
 the program provides opportuniti Prenatal and infant health an The birth process and what t The needs of postnatal wome The developing role of first tin if appropriate) 	d development o expect								

XNOWLEDGE OF PARENTING A SELF-ASSESSMENT ITEMS low do programs encourage explore parenting issues and	5	Stoney 25	ee , heree 3	Heimer 28	bisages	se strongly disso	Asee hepitcale	
3.14 Parents and staff work together to design and orga-	3.14.1 Cultural/ethnic expectations and practices about parenting.							
nize opportunities for parent led discussions (such as a Community Café or Parent Café series) to explore:	3.14.2 Different parenting practices.							
	3.14.3 Parent/child relationships.							
	3.14.4 How to interact effectively with their children (e.g., listening; appreciating ideas, efforts and feelings; creating a non-threatening environment).							
	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.							

NOWLEDGE OF PARENTING A ELF-ASSESSMENT ITEMS ow do programs encourage xplore parenting issues and	parents to observe, ask questions,	, 13	attorety age	ee helee 3.	Beitter age	instead	stonely dis	Pages L. Frinchis
								Comments
3.15 Staff recognize and support the parenting	3.15.1 Regularly checking in with parents about parenting issues.							
challenges experienced by families with children who have special needs by:	3.15.2 Being sensitive to parents' frustra- tion, protectiveness, guilt, loss and other related feelings, and acknowledging the challenges families may be experiencing.							
	3.15.3 Supporting parents in understand- ing appropriate developmental expectations for their children with special needs.							
	3.15.4 Checking in with parents about the impact their children's special needs may have on family dynamics and parental stress.							
	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.							



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



					Comments
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.				
	3.16.2 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.				
	3.16.6 Signals that development may not be on track.				
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.				
	3.17.2 Sharing something positive with parents about their children's behavior and development.				
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.				
	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.				



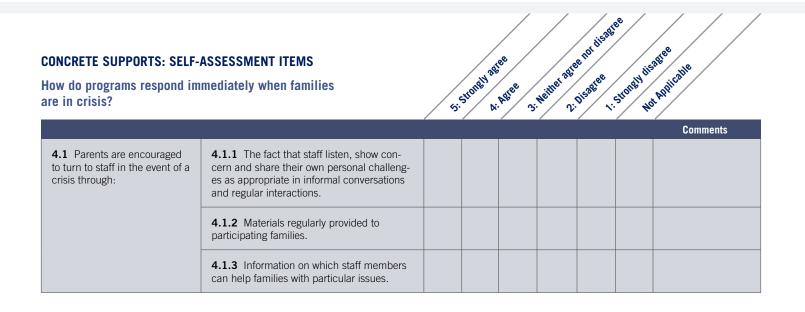
CONCRETE SUPPORT IN TIMES OF NEED

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.





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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS		agre	,e	atte	enu	dis	agreete	
How do programs respond im are in crisis?	mediately when families	5	Stronghy 2818	Allee 3:	Neither 2:	Disagree 1:	Stonely dis	ASIE CAPICABLE	
				/	/	/		Comme	nts
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 experi- encing 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.								
	4.3.4 The program has flexible hours of operation to accommodate families outside of regular business hours.								
	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.								



4.4 Staff proactively respond

to signs of parent or family

distress by:

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

help.



	resources, including help lines, community resources or public agencies.				
	4.4.3 Making themselves and/or other designated home visitors available to parents if parents need to talk.				
	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.				
0	hare information about community resources s, play lots, family activities), as well as more				
	e services dults and children)				



CONCRETE SUPPORTS: SELF-ASSESSMENT ITEMS How do programs provide information and connections to services in the community?			Stonely as	Pares 3. W	2:11:2:15:25 ¹⁰	1:500000 HO	Applicable
					· · · · ·		Comments
4.6 The program actively builds collaborative links with	4.6.1 Bringing services on site, when possible.						
other service providers by:	4.6.2 Easing the referral process by ensuring the workers in different programs know each other and work together.						
	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.						



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CONCRETE SUPPORTS: SELF-	ASSESSMENT ITEMS				einer astee	nor disagree	aute	¢ / /	
How do programs help familie identify their needs and conn	es to develop skills they need to ect to supports?	5	Strongly agree	ASTER 3:	Neither 2816C	Sagree 1: St	onew disagre	hicale	
				/				Comments	
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.								
	4.7.5 Connecting parents to peer-to-peer navigation support.								
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.								
port family feadership of.	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).								



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 CON SELF-ASSESSMENT ITEMS How do programs help paren emotional development?	5	Stoney Ste	e stee 3.	setter agree	In disages	UNEW DISARS		
								Comments
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).								
	edge and expertise about their children's as they share information about social and							



OCIAL AND EMOTIONAL COMPETENCE OF CHILDREN: ELF-ASSESSMENT ITEMS ow do programs model nurturing care to children?			Watter	e 3: Heitner?	Blee Int disat	Standy liss	10° calle
ow do programs model nurt	uring care to children?	13 ⁻¹³	Intel 28100	e 3: Heitne.	2: 0158951	Strong, Not	At the second second
							Comments
5.4 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.						

OCIAL AND EMOTIONAL CON ELF-ASSESSMENT ITEMS ow do programs model nurt		45 ⁻⁵⁵	Inter after	3. Neither 2. 195	at 1:520 88	sates strainicale Comments
5.5 Staff receive training, consultation and ongoing coaching to support their skills in supporting children's	5.5.1 Fostering children's social and emotional development in the context of their culture and language.					
social emotional development, including:	5.5.2 Recognizing behavioral/emotional problems or developmental delays.					
	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.					
	5.5.5 Understanding gender differences in child rearing and its impact on social and emotional development.					
	5.5.6 Promoting positive relationships among children living in the same household.					
	5.5.7 Promoting positive relationships among children living in the same household.					
	5.5.8 Understanding how mental health and wellness affects family relationships and the developmental process of young children.					
	5.5.9 Recognizing and responding to the impact of child or parental trauma on parent-child relationships.					
5.6 Families are invited to obser and/or staff in the program.	ve their children interacting with other children					



SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs include chi development activities in pro	Idren's social and emotional	45 ^{, 63}	LINGH AFE	3. Neither all	se norisatee insatee	AN 15-50-50 Not funitable Comments
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).					
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.					

							/ /		
SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS	IPETENCE OF CHILDREN:		att	e ^e		ee nor disate	je ^e	alleee	
How do programs help childr identity and learn to interact	en develop a positive cultural in a diverse society?	45	Stoney ar	Agree 3	Neither 25	Disagree	Stongy di	agic light	
		ĺ						Comments	;
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.								
5.10 Staff receive training on how cultural differences affect social and emotional development, especially	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.								
differences in:	5.10.2 The extent to which nonverbal com- munication 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, languag-	5.11.1 Being encouraged to share and reflect on their own cultural background, including self-awareness of biases they may hold.								
es 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.								
	tices support the preservation of home lan- ne languages and dialects of the children and								
	Ith consultant offers consultation that is ting behaviors and child behaviors that stem .								
5.14 Staff are trained in how to a indicators of racism or intolerance	address children exhibiting verbal or nonverbal e.								

SOCIAL AND EMOTIONAL CON SELF-ASSESSMENT ITEMS How do programs respond pr emotional development need	roactively when social or	4	STOREN 25	, heree 3:	Neither aste	e not isse	Stonely dis	Applicable Comments
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.							
	5.15.2 Arranging for appropriate screenings and assessments.							
	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.							



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 RESPOND TO POSSIBLE CHILD ABUSE **OR NEGLECT?**

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HOW DO PROGRAMS RESPON Or neglect?	D TO POSSIBLE CHILD ABUSE	5:5101811	utres A: Astes 3: Neith	et 26152 10 10 10 10 10 10 10 10 10 10 10 10 10	Not Main Calle
					Comments
6.1 When children enter the program, staff discuss child abuse and neglect prevention with all parents and caretak-	6.1.1 The program's policies and practices that are designed to keep children safe from harm.				
ers. This discussion includes explanations of:	6.1.2 Staff members' responsibility as man- datory child abuse and neglect reporters.				
	6.1.3 How the state defines child abuse and neglect.				
	6.1.4 The program's protocols regarding child abuse and neglect reports.				
6.2 All staff members are trained abuse reporting laws.	d according to their state's mandatory child				
6.3 Staff receive additional training on child abuse and neglect including:	6.3.1 Recognizing and responding to early signs of possible child abuse and neglect, including physical and behavioral indicators.				
	6.3.2 Following the program's protocols for reporting child abuse and neglect.				
	6.3.3 Understanding how cases are generally handled by the child protective services agency once a report is made.				
	6.3.4 The relationship between domestic violence and reporting of child abuse and neglect, and clear protocols to follow when domestic violence is suspected or disclosed.				
	6.3.5 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**?

HOW DO PROGRAMS RESPON Dr Neglect?	D TO POSSIBLE CHILD ABUSE	6	Stoney as	ABLES 3:	Heiline ages 1	or disaster	bisages Not heritable Comment	s
6.4 The program's protocols for reporting possible child abuse and neglect:	6.4.1 Are consistent with state child welfare reporting guidelines.							
	6.4.2 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:	6.5.1 Coordinating with investigative authorities to ensure that staff actions and interactions with the family do not hinder the investigation.							
	6.5.2 Providing objective and accurate information on the concerns that led to the report, as well as information on family strengths.							
	6.5.3 Explaining their status as mandated reporters to families and their commitment to the goal of keeping children safe.							
	6.5.4 Striving to be calm, caring and supportive of the family during the reporting process.							
	6.5.5 Answering questions that the family may have regarding the reporting process and how the Child Protective Services system typically responds.							
	6.5.6 Offering support for families by answering questions, connecting them to resources they may need listening attentively and providing and friendly advice.							
6.6 If a child is placed into child welfare custody, staff are trained to continue to support	6.6.1 Maintaining contact with the child and family, if possible.							
the child and the family by:	6.6.2 Advocating for the family with the Child Protective Services system, when possible.							
	6.6.3 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 healthy development by:	6.7.1 Helping to maintain stability for children involved in the system.				
	6.7.2 Engaging in co-case management practices, if possible.				
	6.7.3 Conducting joint home visits.				
	6.7.4 Attending Child Protective Services meetings to share information.				

Appendix B

Electronic Version of Social Connections Questions of SFSA Tool



NorthStar FRC - 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.

What 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
- O Direct Service Staff and/or Volunteer
- Community Collaborator/Partner that Works with Resource Center

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agree	Agree	disagree	Disagree	disagree	N
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	ain and e where sagree ies with se with o speak Strongly	ain and use so e where they of sagree Disa ies with simila ies with simila ose with twins, o speak the sa Strongly	ain and use social co e where they can mee sagree Disagree (ies with similar inter- se with twins, parent o speak the same lan Neither agree Strongly nor	ain and use social connections e where they can meet informodely a sagree Disagree Strong ies with similar interests, se with twins, parents of infants o speak the same language) Neither agree Strongly nor	ies with similar interests, se with twins, parents of infants, o speak the same language) to Neither agree Strongly nor Strongly

ommunity by organizing/ hosting:	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.3.1 Regularly scheduled parent-child activities such as Play and Learn groups.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
.3.2 Periodic events like coffee breaks and breakfasts.	\bigcirc	\bigcirc	0	\bigcirc	0	Ċ
.3.3 Celebrations, graduations and holidays.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	C
.3.4 Field trips and community events. Comments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	¢
.3.5 Events celebrating cultural customs, potlucks, and other pportunities for parents to share and learn about each other's ome lives and cultural backgrounds.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	
.3.6 Affordable family activities.	\bigcirc	0	\bigcirc	\bigcirc	<u> </u>	¢
.3.7 Special programs for dads, grandparents, teen moms, teen ads and other caregivers who would enjoy activities directed t their unique needs and interests.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
.3.8 Social media groups or web pages where parents can get rogram information and interact with one another. Comments	0	0	\bigcirc	\bigcirc	\bigcirc	¢

Strongly agreeNot applicable	Agree	○ Neither agree nor disagree	O Disagree	Strongly disagre
0				
Comment				
	tween adul	connects families to resou ts (e.g., healthy marriage s nting).		-
Strongly agree	Agree	Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				

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NorthStar FRC - 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		Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.8.1 Welcoming all families.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
2.8.2 Inviting all families to program parties or social events.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
2.8.4 Helping to resolve conflicts among participants.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
2.8.5 Promoting families' understandings of different cultures and backgrounds.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\diamond
Comments						
						I

2.9 The program helps staff learn how to reduce stereotyping and bias by:

	Strongly	Agree	Neither agree nor disagree	Disagree	Strongly disagree	N/A
2.9.1 Modeling inclusive behavior among the staff.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
2.9.2 Providing professional development opportunities on intentionally countering stereotypes and biases (including both explicit and implicit forms of biased behaviors).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
2.9.3 Providing training and support for helping families and children resolve conflicts effectively.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
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.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						
2.10 Families are encouraged to reach out and	engage	other	familie	s, inclu	ding	
newcomers and more isolated members, in the p	rogran	o com	munity.			
Strongly agree Agree Neither agree nor disa	agree (🔵 Disa	ngree (Strong	ly disagre	e
○ Not applicable						
Comment						



NorthStar FRC - Strengthening Families Self-Assessment - Social Connections

How do programs facilitate mutual support?

2.11 The program encourages parents to set up mutual support mechanisms (e.g., phone trees, car pools, babysitting co-ops, play groups, social media groups or pages where parents can communicate with one another).

Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagree
O Not applicable				
Comment				
2.12 There is tin	ne built in	to program activities for p	arents to net	work and share
with each other.				
with each other. Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagree
	Agree	O Neither agree nor disagree	O Disagree	O Strongly disagree
Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagree
Strongly agree	Agree	O Neither agree nor disagree	Disagree	Strongly disagree

2.13 Parent-organized social/educational events and activities are encouraged and supported by:

	Strongly agree		Neither 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).	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments						
2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	
Comments						

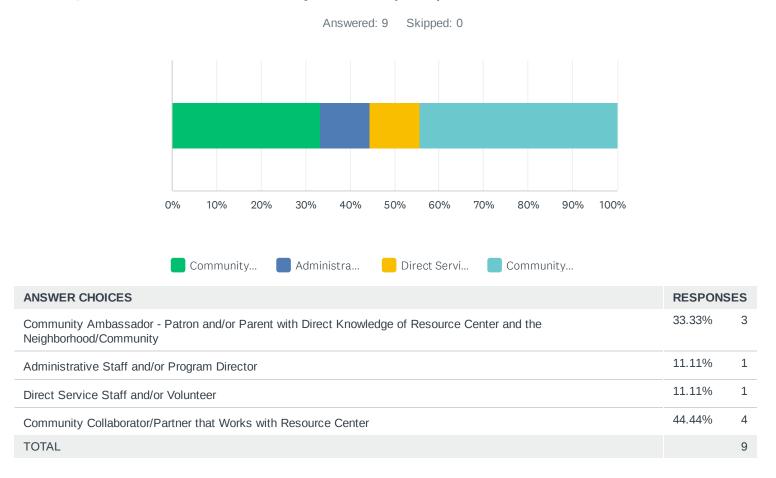
-	borhood o ghborhoo	aff seek opportunities to b r local community (e.g., in d resources for special pro	viting neighl	oors to open
O Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				
		ges staff and families to paradvocacy projects.	articipate tog	jether in
O Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
○ Not applicable				
Comment				
Strongly agree Not applicable	Agree	• community organizations	O Disagree	Strongly disagree
	t, donated s	and receives support from services, volunteer service		• •
O Strongly agree	Agree	O Neither agree nor disagree	O Disagree	Strongly disagre
O Not applicable				
Not applicable				
\bigcirc				
Comment Comment C.18 The progra enrichment (e.g. heritage events) Strongly agree Not applicable	, reading h	s parents to local opportu ours at the library, parent Neither agree nor disagree	_	-
Comment 2.18 The progra enrichment (e.g. heritage events). Strongly agree	, reading h	ours at the library, parent	-child book g	roups, cultural

Appendix C

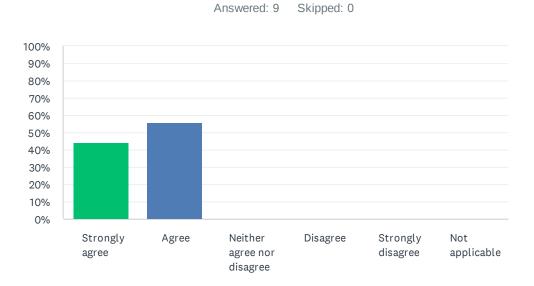
NorthStar Family Resource Center Strengthening Families Self-Assessment Team

SFSA Tool for Community-Based Programs— Social Connections Results

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



Q2 2.1 Families have access to a comfortable space where they can meet informally



ANSWER CHOICES RESPONSES 44.44% 4 Strongly agree 55.56% 5 Agree 0.00% 0 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 0.00% 0 Not applicable TOTAL 9 # COMMENT DATE

There are no responses.

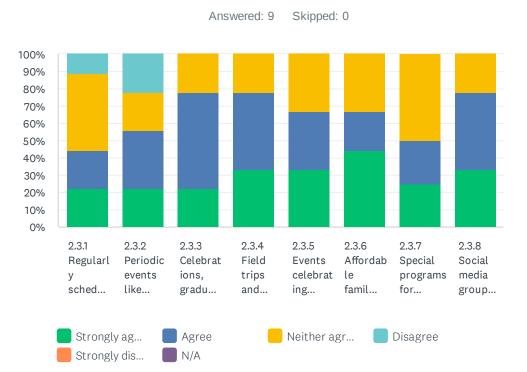
79

Q3 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:

100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% 2.2.1 Formally, 2.2.2 Through 2.2.3 Informally, through parent parent mentoring and by introducing matching for parents to one support groups (including those w... one-on-one support. another. Strongly ag... Agree Neither agr... Disagree Strongly dis... N/A STRONGLY AGREE DISAGREE STRONGLY N/A TOTAL WEIGHTED **NEITHER** DISAGREE AVERAGE AGREE AGREE NOR DISAGREE 2.2.1 Formally, through 22.22% 55.56% 22.22% 0.00% 0.00% 0.00% parent support groups 2 5 2 0 0 0 9 4.00 (including those with both broad and narrow focuses). 22.22% 33.33% 0.00% 0.00% 0.00% 2.2.2 Through parent 44.44% mentoring and matching 9 3.89 2 4 3 0 0 0 for one-on-one support. 33.33% 33.33% 0.00% 0.00% 0.00% 2.2.3 Informally, by 33.33% introducing parents to 9 4.00 3 0 0 3 3 0 one another.

Answered: 9 Skipped: 0

Q4 2.3 The program provides opportunities for families to socialize and foster a sense of community by organizing/ hosting:



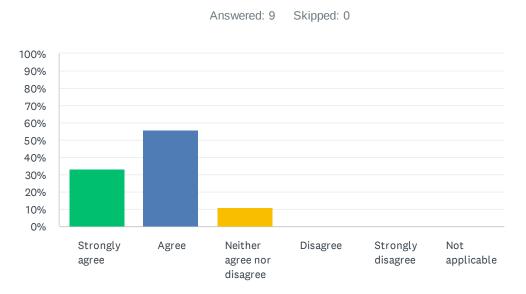
NorthStar FRC - Strengthening Families Self-Assessment - Social Connections

		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
parent-child a	arly scheduled activities such Learn groups.	22.22% 2	22.22% 2	44.44% 4	11.11% 1	0.00% 0	0.00% 0	9	3.56
2.3.2 Period coffee break breakfasts.	lic events like s and	22.22% 2	33.33% 3	22.22% 2	22.22% 2	0.00% 0	0.00% 0	9	3.56
2.3.3 Celebr graduations	rations, and holidays.	22.22% 2	55.56% 5	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.00
2.3.4 Field t community e		33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
share and lea each other's	oms, d other s for parents to arn about	33.33% 3	33.33% 3	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.00
2.3.6 Afford activities.	able family	44.44% 4	22.22% 2	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	4.11
2.3.7 Specia for dads, gra teen moms, other caregiv would enjoy directed at th needs and in	ndparents, teen dads and vers who activities neir unique	25.00% 2	25.00% 2	50.00% 4	0.00% 0	0.00% 0	0.00% 0	8	3.75
2.3.8 Social or web pages parents can information a with one ano	get program and interact	33.33% 3	44.44% 4	22.22% 2	0.00% 0	0.00% 0	0.00% 0	9	4.11
# COMMENTS FOR "2.3.1 REGULARLY SCHEDULED PARENT-CHILD ACTIVITIES SUCH DATE AS PLAY AND LEARN GROUPS."									
	There are no r	esponses.							
#	COMMENTS FOR "2.3.2 PERIODIC EVENTS LIKE COFFEE BREAKS AND BREAKFASTS."								
	There are no responses.								
#	COMMENTS FOR "2.3.3 CELEBRATIONS, GRADUATIONS AND HOLIDAYS."							DATE	
	There are no r	esponses.							
#	COMMENTS	FOR "2.3.4 FIE		AND COMMUN	ITY EVENTS."			DATE	
	There are no r	esponses.							
#	COMMENTS FOR "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."							DATE	
	There are no r	esponses.							
#	COMMENTS FOR "2.3.6 AFFORDABLE FAMILY ACTIVITIES."							DATE	

There are no responses.

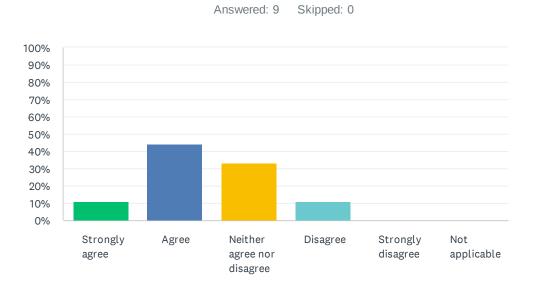
#	COMMENTS FOR "2.3.7 SPECIAL PROGRAMS FOR DADS, GRANDPARENTS, TEEN MOMS, TEEN DADS AND OTHER CAREGIVERS WHO WOULD ENJOY ACTIVITIES DIRECTED AT THEIR UNIQUE NEEDS AND INTERESTS."	DATE
	There are no responses.	
#	COMMENTS FOR "2.3.8 SOCIAL MEDIA GROUPS OR WEB PAGES WHERE PARENTS CAN GET PROGRAM INFORMATION AND INTERACT WITH ONE ANOTHER."	DATE
1	I think a stronger presence on social media would help get the word out more.	10/17/2022 3:18 PM

Q5 2.4 The program encourages positive relationships between families and staff members by planning informal social events where staff can interact with families.



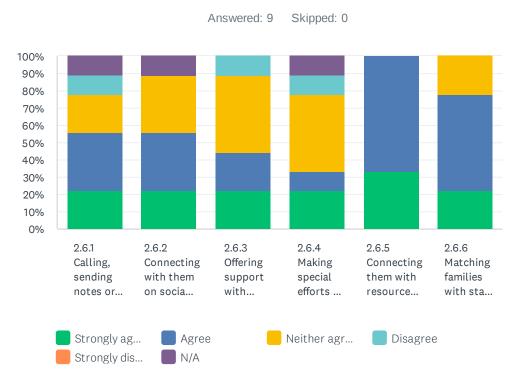
ANSWER	CHOICES	RESPONSES		
Strongly a	Iree	33.33%		3
Agree		55.56%		5
Neither agr	ee nor disagree	11.11%		1
Disagree		0.00%		0
Strongly di	sagree	0.00%		0
Not applica	ble	0.00%		0
TOTAL				9
#	COMMENT		DATE	
1	May Day, Juneteenth		10/12/2022 10:02 AM	

Q6 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	Strongly agree 1			1
Agree		44.44%		4
Neither ag	ree nor disagree	33.33%		3
Disagree		11.11%		1
Strongly d	Strongly disagree			0
Not applic	able	0.00%		0
TOTAL				9
#	COMMENT		DATE	
	There are no responses.			

Q7 2.6 Program staff encourage newcomers and isolated or marginalized families to participate in program activities by:



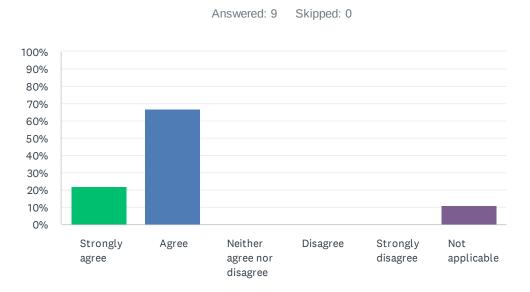
AGREE STRONGLY NEITHER DISAGREE STRONGLY N/A TOTAL WEIGHTED AGREE AGREE DISAGREE **AVERAGE** NOR DISAGREE 2.6.1 Calling, sending 22.22% 33.33% 22.22% 11.11% 0.00% 11.11% notes or making home 2 3 2 1 0 1 9 3.75 visits inviting them to program activities. 2.6.2 Connecting with 0.00% 0.00% 11.11% 22.22% 33.33% 33.33% them on social media 9 2 3 3 0 0 1 3.88 platforms through program pages or groups. 44.44% 0.00% 2.6.3 Offering support 22.22% 22.22% 11.11% 0.00% with transportation, child 2 2 4 1 0 0 9 3.56 care or other barriers to participation. 22.22% 11.11% 11.11% 0.00% 2.6.4 Making special 44.44% 11.11% efforts to connect them 2 0 9 3.50 1 4 1 1 with other families who share similar interests. 0.00% 0.00% 0.00% 33.33% 66.67% 0.00% 2.6.5 Connecting them 9 with resources (including 4.33 3 6 0 0 0 0 mental health consultation) that can help them explore difficulties with forming social connections. 2.6.6 Matching families 22.22% 55.56% 22.22% 0.00% 0.00% 0.00% with staff or other 2 0 0 9 4.00 5 2 0 families who can help them feel welcome and valued in program activities.

NorthStar FRC - Strengthening Families Self-Assessment - Social Connections

#	COMMENTS FOR "2.6.1 CALLING, SENDING NOTES OR MAKING HOME VISITS INVITING THEM TO PROGRAM ACTIVITIES."	DATE
1	Not known	10/17/2022 3:18 PM
2	flyer, web site announcements, newspaper	10/12/2022 10:02 AM
#	COMMENTS FOR "2.6.2 CONNECTING WITH THEM ON SOCIAL MEDIA PLATFORMS THROUGH PROGRAM PAGES OR GROUPS."	DATE
1	Not known	10/17/2022 3:18 PM
#	COMMENTS FOR "2.6.3 OFFERING SUPPORT WITH TRANSPORTATION, CHILD CARE OR OTHER BARRIERS TO PARTICIPATION."	DATE
	There are no responses.	
#	COMMENTS FOR "2.6.4 MAKING SPECIAL EFFORTS TO CONNECT THEM WITH OTHER FAMILIES WHO SHARE SIMILAR INTERESTS."	DATE
1	Not known	10/17/2022 3:18 PM
#	COMMENTS FOR "2.6.5 CONNECTING THEM WITH RESOURCES (INCLUDING MENTAL HEALTH CONSULTATION) THAT CAN HELP THEM EXPLORE DIFFICULTIES WITH FORMING SOCIAL CONNECTIONS."	DATE
	There are no responses.	
#	COMMENTS FOR "2.6.6 MATCHING FAMILIES WITH STAFF OR OTHER FAMILIES WHO CAN HELP THEM FEEL WELCOME AND VALUED IN PROGRAM ACTIVITIES."	DATE

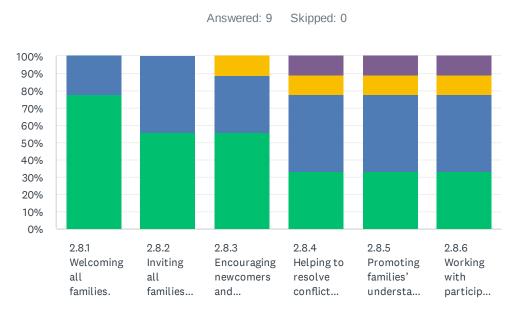
There are no responses.

Q8 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 2		22.22%		2
Agree		66.67%		6
Neither agree nor disagree		0.00%		0
Disagree		0.00%		0
Strongly disagree		0.00%		0
Not applical	ble	11.11%		1
TOTAL				9
#	COMMENT		DATE	
1	Not known		10/17/2022 3:18 PM	

Q9 2.8 The program and its staff model positive social skills and community building by:



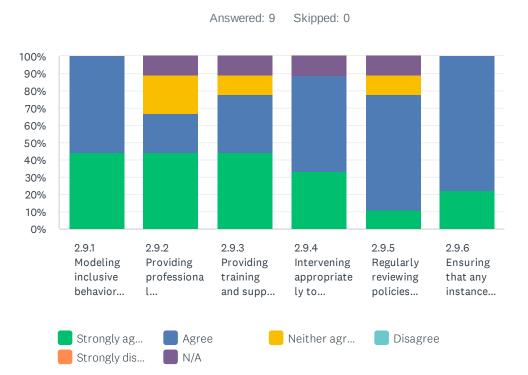


	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.8.1 Welcoming all families.	77.78% 7	22.22% 2	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.78
2.8.2 Inviting all families to program parties or social events.	55.56% 5	44.44% 4	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.56
2.8.3 Encouraging newcomers and reluctant families to participate through special outreach efforts.	55.56% 5	33.33% 3	11.11% 1	0.00% 0	0.00%	0.00% 0	9	4.44
2.8.4 Helping to resolve conflicts among participants.	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.25
2.8.5 Promoting families' understandings of different cultures and backgrounds.	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.25
2.8.6 Working with participating parents to establish ground rules for programs and activities that ensure inclusiveness.	33.33% 3	44.44% 4	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.25

NorthStar FRC - 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
	There are no responses.	
#	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
1	Not known	10/17/2022 3:20 PM
#	COMMENTS FOR "2.8.5 PROMOTING FAMILIES' UNDERSTANDINGS OF DIFFERENT CULTURES AND BACKGROUNDS."	DATE
1	Not known	10/17/2022 3:20 PM
#	COMMENTS FOR "2.8.6 WORKING WITH PARTICIPATING PARENTS TO ESTABLISH GROUND RULES FOR PROGRAMS AND ACTIVITIES THAT ENSURE INCLUSIVENESS."	DATE
1	Not known	10/17/2022 3:20 PM

Q10 2.9 The program helps staff learn how to reduce stereotyping and bias by:

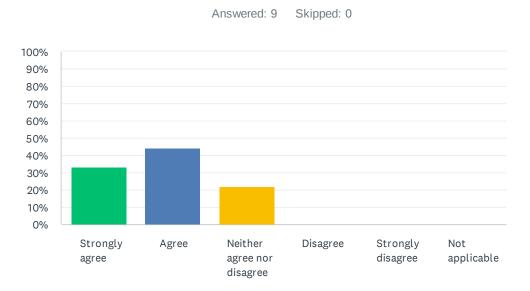


NorthStar FRC - Strengthening Families Self-Assessment - Social Connections

		STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	N/A	TOTAL	WEIGHTED AVERAGE
2.9.1 Model behavior am	ing inclusive ong the staff.	44.44% 4	55.56% 5	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.44
2.9.2 Provid professional opportunities intentionally countering si and biases (i both explicit forms of bias behaviors).	development s on tereotypes including and implicit	44.44% 4	22.22% 2	22.22% 2	0.00% 0	0.00% 0	11.11% 1	9	4.25
2.9.3 Provic and support families and resolve confl effectively.	for helping children	44.44% 4	33.33% 3	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.38
2.9.4 Interve appropriately act prejudicia discriminator statements f or other adul discussing s and difference establishing treatment of	y to counter al or y from children ts (e.g., imilarities ces; rules for fair	33.33% 3	55.56% 5	0.00% 0	0.00% 0	0.00% 0	11.11% 1	9	4.38
that all conte discourages	licies, forms nts to ensure ent beliefs and at stereotype, or	11.11% 1	66.67% 6	11.11% 1	0.00% 0	0.00% 0	11.11% 1	9	4.00
2.9.6 Ensuri instances of are quickly a addressed, a use any such as opportunin demonstrate values of inco respect.	prejudice and explicitly and that staff h incidents ties to program	22.22% 2	77.78% 7	0.00% 0	0.00% 0	0.00% 0	0.00% 0	9	4.22
#	COMMENTS	FOR "2.9.1 M				G THE STAFE '	1	DATE	
	There are no								
#	COMMENTS FOR "2.9.2 PROVIDING PROFESSIONAL DEVELOPMENT OPPORTUNITIES ON INTENTIONALLY COUNTERING STEREOTYPES AND BIASES (INCLUDING BOTH EXPLICIT AND IMPLICIT FORMS OF BIASED BEHAVIORS)."							DATE	
1	Not known							10/17/2022	2 3:20 PM
#		FOR "2.9.3 PF REN RESOLVE				R HELPING FA	MILIES	DATE	

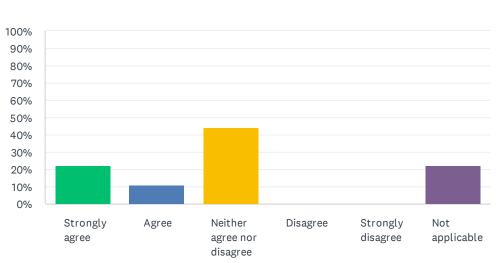
1	Not known	10/17/2022 3:20 PM
#	COMMENTS FOR "2.9.4 INTERVENING APPROPRIATELY TO COUNTER ACT PREJUDICIAL OR DISCRIMINATORY STATEMENTS FROM CHILDREN OR OTHER ADULTS (E.G., DISCUSSING SIMILARITIES AND DIFFERENCES; ESTABLISHING RULES FOR FAIR TREATMENT OF OTHERS)."	DATE
1	Not known	10/17/2022 3:20 PM
#	COMMENTS FOR "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."	DATE
1	Not known	10/17/2022 3:20 PM
#	COMMENTS FOR "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."	DATE
	There are no responses.	

Q11 2.10 Families are encouraged to reach out and engage other families, including newcomers and more isolated members, in the program community.



ANSWER	CHOICES	RESPONSES		
Strongly a	Strongly agree 3			3
Agree		44.44%		4
Neither agree nor disagree 2		22.22%		2
Disagree		0.00%		0
Strongly d	Strongly disagree			0
Not applic	able	0.00%		0
TOTAL				9
#	COMMENT		DATE	
	There are no responses.			

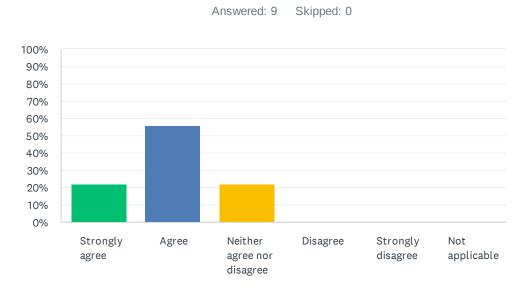
Q12 2.11 The program encourages parents to set up mutual support mechanisms (e.g., phone trees, car pools, babysitting co-ops, play groups, social media groups or pages where parents can communicate with one another).



Answered: 9 Skipped: 0

ANSWE	ER CHOICES	RESPONSES	
Strongly	y agree	22.22%	2
Agree		11.11%	1
Neither agree nor disagree		44.44%	4
Disagree		0.00%	0
Strongly	y disagree	0.00%	0
Not app	licable	22.22%	2
TOTAL			9
#	COMMENT	DATE	
1	Not known	10/17/2022 3:22 PM	Λ

Q13 2.12 There is time built in to program activities for parents to network and share with each other.



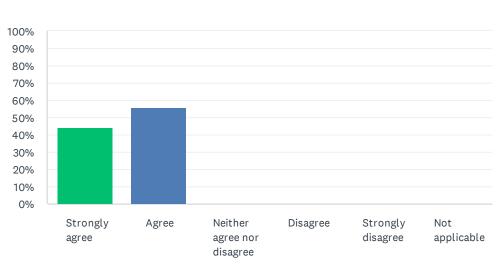
ANSWER CHOICES	RESPONSES	
Strongly agree	22.22%	2
Agree	55.56%	5
Neither agree nor disagree	22.22%	2
Disagree	0.00%	0
Strongly disagree	0.00%	0
Not applicable	0.00%	0
TOTAL		9
# COMMENT	C	DATE

There are no responses.

Q14 2.13 Parent-organized social/educational events and activities are encouraged and supported by:

				Answered: 9	Skipped: 0				
	100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%	2.13.1 Pro	oviding infor	mation	2.13.2	Providing suppor			
		parents	ide activities to attend to gathering a Agre N/A	ogether (for at	childo	as gathering space care and food so t ts can organize an Disagree	hat		
		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).		11.11% 1	44.44% 4	44.44% 4	0.00% 0	0.00% 0	0.00% 0	9	3.67
2.13.2 Providing supports such as gathering space, childcare and food so that parents can organize and participate in activities together.		11.11% 1	55.56% 5	33.33% 3	0.00% 0	0.00% 0	0.00% 0	9	3.78
#	COMMENTS	FOR "2.13.1 PF	OVIDING I	NFORMATION	ON OUTSIDE	ACTIVITIES FO	R	DATE	
	COMMENTS FOR "2.13.1 PROVIDING INFORMATION ON OUTSIDE ACTIVITIES FOR DATE PARENTS TO ATTEND TOGETHER (FOR EXAMPLE, GATHERING AT PLAYGROUNDS, FUN FAIRS OR LIBRARIES)."								
1	Libraries				10/12/2022 10:08 AM				
#	COMMENTS FOR "2.13.2 PROVIDING SUPPORTS SUCH AS GATHERING SPACE, CHILDCARE AND FOOD SO THAT PARENTS CAN ORGANIZE AND PARTICIPATE IN ACTIVITIES TOGETHER."				DATE				
	There are no r	responses.							

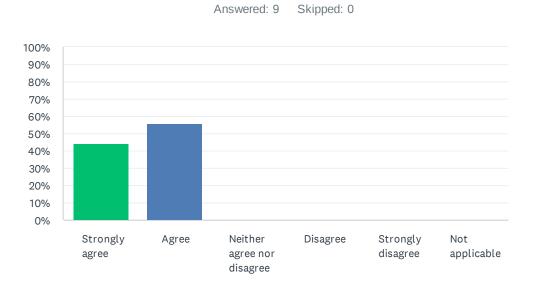
Q15 2.14 Administrators and staff seek opportunities to build good relations within the immediate neighborhood or local community (e.g., inviting neighbors to open houses, using neighborhood resources for special projects, building relationships with local schools).



Answered: 9 Skipped: 0

ANSWER CHOICES		RESPONSES		
Strongly agree		44.44%		4
Agree		55.56%		5
Neither agree nor disagree		0.00%		0
Disagree		0.00%		0
Strongly disagree		0.00%		0
Not applicable		0.00%		0
TOTAL				9
#	COMMENT		DATE	
	There are no responses.			

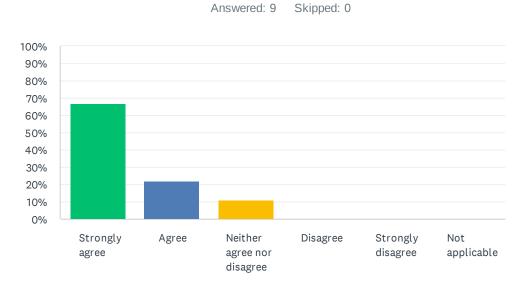
Q16 2.15 The program encourages staff and families to participate together in community improvement or advocacy projects.



ANSWER CHOICES	RESPONSES		
Strongly agree	44.44%	4	
Agree	55.56%	5	
Neither agree nor disagree	0.00%	0	
Disagree	0.00%	0	
Strongly disagree	0.00%	0	
Not applicable	0.00%	0	
TOTAL		9	
# COMMENT	DATE		

There are no responses.

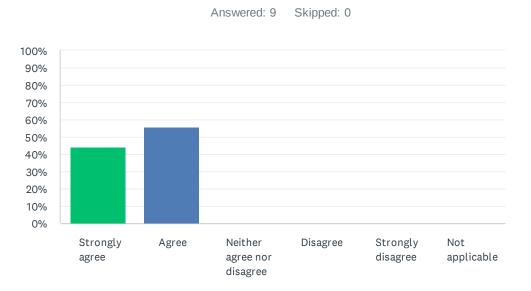
Q17 2.16 Staff are visibly engaged with issues of concern to the community and are actively involved with other community organizations.



ANSWER CHOICES RESPONSES 66.67% 6 Strongly agree 22.22% 2 Agree 11.11% 1 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 0.00% 0 Not applicable TOTAL 9 # COMMENT DATE

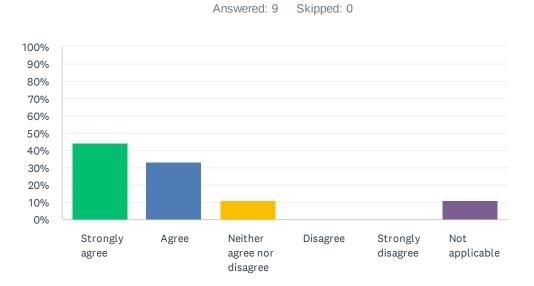
There are no responses.	

Q18 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		44.44%		4
Agree		55.56%		5
Neither agree nor disagree		0.00%		0
Disagree		0.00%		0
Strongly disagree		0.00%		0
Not applicable		0.00%		0
TOTAL				9
#	COMMENT		DATE	
	There are no responses.			

Q19 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 44.44% 4 Strongly agree 33.33% 3 Agree 11.11% 1 Neither agree nor disagree 0.00% 0 Disagree 0.00% 0 Strongly disagree 11.11% 1 Not applicable TOTAL 9 # COMMENT DATE 1 may day and juneteenth 10/12/2022 10:08 AM