Family Assessment Form - Selected Items

McCroskey, Sladen, & Meezan, 1997

FB.County.33 Revised 1.18.17

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IP:		Caregiver 1:	Caregiver 2:	
Date: _		Time Period (Check one)	First 30 Days Mid-Treatment	Discharge
caregivei	r relationshi :ome when เ	ales below have been selected as p, and the caregiver-child relation used during the first 30 days of tre	nship. These subscales can be use	ed as indicators of progress
question 3.5 are co and high	s about fam onsidered p er are probl	d on both your observations of in ily life and relationships. Ratings roblems of a moderate nature an ems of a major nature and may ir given priority in the treatment pla	of 2.0 and below are considered d should be incorporated in your nvolve risk to the children's safety	strengths, while ratings of 3 or treatment plans. Ratings of 4
		Section 1: Car	regiver-Child Relationship	0
D6. Are o	caregiver(s)	attached and emotionally respons	sive to the IP?	
CG1	CG2			
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	1	ment and independence; attentivorrectly; consistent messages to	
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Adequate emotional involveme differences; reads cues correctly	nt and support; occasional difficu y most of the time.	ulty allowing separation/
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5		al support; some ambivalence, re culty reading child(ren)'s cues; so	
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	identifying; often misinterprets	l(ren)'s needs; little emotional in cues; frequently does not respor nse to child(ren)'s approach/attac	nd or responds
		, , , ,	unable to see child(ren) as separa child(ren)'s attachment to other p	•••

child(ren) endangered by non-responsive or inappropriate responses; total lack of involvement

□ 5

with child(ren).

□ 5

D7. Do caregiver(s) enjoy and identify with the parental role?

CG2	
☐ 1	Happy to have parental role; sees humor in parenting; accepting; warm; loving; positive; has
1.5	realistic view of challenges and rewards.
□ 2	Generally positive; accepts parental role; verbalizes some enjoyment most of the time.
☐ 2.5	denerally positive, accepts parental role, verbalizes some enjoyment most of the time.
☐ 3	Inconsistent view of parenting, mostly views child(ren) as responsibility; limited moments of
□ 3.5	enjoyment in parenting; some indifference; some irritation and resentment; attitude depen on mood.
□ 4	Primarily negative view of parenting, feelings of being tied down; no pleasure; ambivalent;
☐ 4.5	predominantly irritated and resentful; minimal expression of love or acceptance of child(re
<u> </u>	Negative view of parental role; child(ren) seen as obstacle in caregiver's life; resent responsibility or parenting and parenting tasks; detached and indifferent or rejecting; no desire to fulfill parenting role.
	☐ 1 ☐ 1.5 ☐ 2 ☐ 2.5 ☐ 3 ☐ 3.5 ☐ 4 ☐ 4.5

D9. Do caregiver(s) encourage open communication and involvement with the IP?

CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Open two-way verbal communication without fear; praises and supports appropriately.
<u> </u>	<u> </u>	Generally good communication, with some difficulty verbalizing in some areas (i.e., sex, deep
2.5	2.5	feelings); usually supportive; sometimes doesn't listen to child(ren)'s attempt to communicate no verbal abuse.
☐ 3	☐ 3	Limited communication; gives some mixed messages; some ignoring or discounting of
□ 3.5	□ 3.5	child(ren)'s attempt to communicate; some criticism of child(ren).
<u> </u>	□ 4	Minimal communication; primarily negative, harsh, and ineffective, child(ren) are discouraged
4.5	4.5	from communicating thoughts or feelings, rarely supportive.
<u> </u>	<u> </u>	Communication is negative, critical, and abusive; child(ren) not allowed to talk about feelings; or absence of verbal communications; non-supportive.

D10. Is IP able and willing to communicate needs and feelings to caregiver(s)?

CG1	CG2	
□ 1 □ 1.5	☐ 1 ☐ 1.5	Open verbal communication and appropriate affection; child(ren)able to express feelings and needs.
□ 2 □ 2.5	☐ 2 ☐ 2.5	Child(ren) can generally communicate feelings and needs appropriately.
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5	Child(ren) has some difficulty communicating own feelings and needs to caregiver(s); hesitant in initiation and response; gives only brief answers, sometimes ignores caregivers.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Extremely limited ability to communicate; frequently ignores or verbally provokes caregivers; frightened or withdrawn; rarely shares ideas feelings or needs with caregivers.
<u> </u>	<u> </u>	No effective or constructive communication with caregiver; constant fighting or provoking, or active avoidance, or verbally abusive towards caregiver.

CG1	CG2	
<u> </u>	□ 1	Child exhibits consistently appropriate attachment and bonding to caregiver.
☐ 1.5	☐ 1.5	Criffic exhibits consistently appropriate attachment and bonding to caregiver.
□ 2	□ 2	Child exhibits adequate handing; shows assacional tensions or anxieties
□ 2.5	☐ 2.5	Child exhibits adequate bonding; shows occasional tensions or anxieties.
☐ 3	□ 3	Child exhibits some signs of ambivalence, anxiety or hostility toward caregiver; child may
□ 3.5	□ 3.5	demonstrate insecure attachment (e.g., may appear overly needy).
<u> </u>	<u> </u>	Minimal appropriate attachment with caregiver; behavior indicates anger, uncertainty,
4.5	4.5	reluctance, or indifference toward caregiver; child may seem needy of attention from strangers.
		Inappropriate attachment, child exhibits extreme dependence or independence; consistently
5		hostile, rejecting or provocative stance towards caregiver; or excessive fearfulness of
		caregiver; or indiscriminate attachment to strangers.

Section II: Co-Caregiver Relationship

A: Relationship Characteristics (problem-solving conflict style, power structure)

F1. Are the caregivers able to listen to one another and problem-solve?

☐ 1 ☐ 1.5	Consistently able to negotiate and communicate; encourage each other to give and express own opinion.
☐ 2 ☐ 2.5	Generally able to negotiate; occasional difficulty in developing options or listening to each other.
	Limited communication skills; able to problem-solve some daily living issues (i.e. shop, home chores), but difficulty solving bigger issues (i.e. children, relatives).
☐ 4 ☐ 4.5	Rarely able to problem-solve together; decision-making discussions become arguments.
<u> </u>	No compromise or negotiation; problems are not discussed.

F2. Are the caregivers able to deal directly and calmly with conflict?

☐ 1 ☐ 1.5	Constructively talk over problems; effective handling of stress/conflict.
□ 2□ 2.5	Discuss major differences; most conflicts resolved; occasionally arguing;
☐ 3☐ 3.5	Major conflicts ignored and remain unresolved; able to resolve minor differences; but there is frequent arguing; some verbal threats and intimidation used.
☐ 4 ☐ 4.5	Constant disagreement; arguing; occasionally resort to physical expression, like slamming doors, breaking things, but not physically abusive to one another.
<u> </u>	Incapable of dealing with conflict effectively; resorts to negative behaviors, e.g. domestic violence and substance abuse, abandonment, harmful to emotional and physical health/safety of self and others.

F3. Is there a balance of power between caregivers?

☐ 1 ☐ 1.5	Distribution of power is functional within context of family.
□ 2□ 2.5	Minor imbalance; "traditional roles" accepted by both caregivers (i.e. culturally accepted roles).
	Some imbalance leading to some difficulty in problem-solving and conflict resolution; but there is some emotional distress exhibited due to nature of interdependent roles.
☐ 4 ☐ 4.5	Major imbalance; high risk for domestic violence; emotionally harmful; one is extremely domineering.
<u> </u>	Severe imbalance; detrimental to physical and emotional well-being of children or adults; one extremely victimized or dominated; presence of domestic violence.

B: Caregiver Contributions to Relationship Dynamic (support, respect, communication)

F4. Do the caregivers emotionally support one another?

CG1	CG2	
<u> </u>	<u> </u>	
☐ 1.5	☐ 1.5	Supportive; responsible; appreciative; encouraging;
□ 2	□ 2	Mostly supportive and encouraging; minor disagreements or disappointments where partner
☐ 2.5	☐ 2.5	might feel criticized.
☐ 3	☐ 3	Limited and inconsistent support; unpredictable; unknowingly hurtful.
□ 3.5	□ 3.5	Limited and inconsistent support, dispredictable, driknowingly nurtral.
<u> </u>	<u> </u>	Minimal support; frequently unreliable; irresponsible; often lets partner down; frequently
4.5	4.5	does not back up partner; critical.
<u> </u>	<u> </u>	Does not follow through on agreements; unreliable; extremely critical of other; insults partner in public; ridicules partner.

F5. Do the caregivers show respect and caring for one another?

CG1	CG2	
□ 1 □ 1.5	☐ 1 ☐ 1.5	Respectful; positive; admiring; caring; appreciative of differences; trusting.
□ 2 □ 2.5	☐ 2 ☐ 2.5	Generally supportive and encouraging; warm; occasionally feels some minor irritation with partner.
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5	Some indifference; irritation; patronizing; ambivalence.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Condescending; resentful; angry; disrespectful; fearful
<u> </u>	□ 5	Excessively fearful; abusive; hostile; hateful; rejecting; totally indifferent.

F6. Do the caregivers show a willingness and ability to communicate with one another?

CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Open communication; able to express opinions, feelings, or experiences comfortably and safely.
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Generally adequate; minor difficulties communicating on certain issues; willing to communicate actively.
☐ 3 ☐ 3.5		Limited communication; daily life/business oriented; minimal person conversation; minimal hearing of feelings; non-productive communication of important issues; tendency to withdraw.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Minimal communication; very poor communication; a lot of misunderstanding; misreading of other's cues; mostly unwilling to listen to other's opinions.
<u> </u>	<u> </u>	No communication; no ability or willingness to listen, express opinions or feelings.

Section III: Executive Skills (Parenting)

D2. Are caregiver(s) effective in providing developmentally appropriate structure and routine?

CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Consistent routine for child(ren) that is age-appropriate and recognizes individual differences.
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Reasonably consistent, flexible, and age-appropriate daily routines.
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5	Has some daily routines; some inconsistency or rigidity.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Minimal routine with little consistency or overly rigid or overly permissive.
<u> </u>	<u> </u>	No routine; no consistency; no flexibility.

D3. Do caregiver's practice only non-physical forms of discipline?

CG1	CG2	
<u> </u>	□ 1	Only uses non physical forms of discipling
1.5	☐ 1.5	Only uses non-physical forms of discipline.
<u> </u>	☐ 2	Congrathy does not use physical dissipling but may infragreatly sweet with hand or speak
2.5	☐ 2.5	Generally does not use physical discipline but may infrequently swat with hand or spank.
<u> </u>	☐ 3	Uses physical discipline in response to specific behaviors; spanking, pinching, pulling ears or
☐ 3.5	□ 3.5	hair.
<u> </u>	□ 4	Regular use of physical punishment which could endanger child(ren)'s safety; use of belts,
4.5	☐ 4.5	shoes; throws things at child.
<u> </u>	<u> </u>	Regular and severe physical punishment; explosive and out of control; shaking of infants or toddlers; behavior endangers child(ren)'s safety.

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		able to use intentional discipline strategies and remain under emotional control Revised 1.18.17 page 6 of 7
CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Well thought out, age-appropriate, non-punitive educational approach; uses variety of positive techniques as part of regular routine.
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Generally practices rules, natural consequences, positive reinforcement when disciplining; caregiver in emotional control.
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5	Some inappropriate expectations; some potential for emotional or physical harm, tendency to focus on negative aspects of child(ren)'s behavior, i.e. "serves you right" attitude; sometimes ignores child(ren) inappropriately; sometimes does not discipline when needed.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Unplanned punitive approach; mostly reacts emotionally and with inappropriate age expectations; emotionally abusive; overreacts to behaviors and situations; rarely sees positive in child(ren); does not discipline most of the time; means of discipline has great potential for harm.
□ 5	□ 5	Past or current severe emotional and/or physical abuse or no discipline at all.
D5. Are ca	aregiver(s)	consistent in enforcing rules and implementing consequences?
CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Well thought out, consistent plan appropriate for situation; not negatively impacted by caregiver's mood or stress level.
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Generally consistent and predictable response to behavior; appropriate to age and situation; infrequently impacted by caregiver's mood.

CG1	CG2	
☐ 1 ☐ 1.5		Well thought out, consistent plan appropriate for situation; not negatively impacted by caregiver's mood or stress level.
□ 2□ 2.5		Generally consistent and predictable response to behavior; appropriate to age and situation; infrequently impacted by caregiver's mood.
☐ 3 ☐ 3.5		Some consistency; caregivers unaware of importance of consistency; occasionally dependent on caregiver's mood; sometimes inappropriate for age or situation.
☐ 4 ☐ 4.5		Mostly inconsistent or unpredictable; little flexibility related to age or situation; mostly dependent on caregiver's mood or stress level.
<u> </u>	<u> </u>	No consistency or predictability; no flexibility related to age or situation; totally dependent on caregiver's mood or stress level.

D8. Are caregiver(s) comfortable with authority role, showing effectiveness in setting limits and boundaries with the children?

CGI	CG2	
□ 1 □ 1.5	☐ 1 ☐ 1.5	Consistently demonstrates ability to exercise appropriate authority; willing and able to negotiate on privileges and consequences appropriate to child(ren)'s age and situation; caregiver knows how and when to set and hold limits.
□ 2□ 2.5	☐ 2 ☐ 2.5	Generally consistent in exercise of appropriate authority; occasional power struggle; can usually set and hold limits.
☐ 3 ☐ 3.5	☐ 3 ☐ 3.5	Some inconsistency in setting limits and structure; arbitrarily exercises authority.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Seldom exercises appropriate authority; minimal limit setting; seldom maintains limits set; frequent role reversal, constant power struggles; caregiver unable to say no or allow child(ren) any decision-making power; child(ren) mostly sets own rules.
<u> </u>	<u> </u>	Demonstrates no ability to exercise appropriate authority; no structure or limits; complete role reversal; abdicates responsibility.

E4. Are caregiver(s) effective in managing sibling conflicts?

CG1	CG2	
☐ 1 ☐ 1.5	☐ 1 ☐ 1.5	Aware and sensitive to sibling interactions; teaches problem solving, appropriate sharing and respect; appreciates individual differences; fairness is important.
☐ 2 ☐ 2.5	☐ 2 ☐ 2.5	Limits fighting; encourages appropriate sharing and verbal conflict resolution; generally assists with problem solving; tries to be fair.
☐ 3 ☐ 3.5	☐ 3☐ 3.5	Inconsistent; sometimes assists with conflicts and problem solving; fairness not generally considered important.
☐ 4 ☐ 4.5	☐ 4 ☐ 4.5	Indifferent, leaves to own devices; tends to ignore sibling interaction both positive and negative; or does not treat children equitably.
<u> </u>	<u> </u>	Favors or rejects one; or fosters rivalry; or scapegoats one child; or allows one to rule; or compares children negatively.
* Items selected from the CBSC FAF., Version 2.3 (2/99) that was modified for the Philadelphia Outcome Initiative. The format of this instrument has been changed to facilitate linkage with ESFT conceptualization during informal case planning in FBMH. Per the authors' request, the published copyrighted version of the FAF must be used for all formal clinical assessment and research purposes.		
Completed	by:	Date: