

*Time for
Change*



FROG

TOOLKIT



PCANY 2022

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FROG TOOLKIT CONTENTS



1. FROG Self-Assessment Tool for Home Visitors

- This tool provides the Home Visitor an opportunity to reflect on all aspects of FROG practice and identify strengths, challenges and any areas for future professional support

2. FROG Self-Assessment Tool for Supervisors

- This tool provides the Supervisor an opportunity to reflect on all aspects of FROG practice and identify their strengths, challenges and any areas for future professional support related to their role in supporting Home Visitors in their practice

3. FROG Scale Essential Points

- This resource can be used by the Home Visitor either before or after FROG visits to support their work and to help them understand and remember the essential points that are covered in each domain during the FROG visit

4. PHQ-2 Tool

- This is a tool that a Home Visitor can use as a reminder and to support their work in administering the PHQ-2 during the FROG visit

5. Shifting Our Message

- This resource can be used as a guide for Home Visitors to use when engaging families at all levels of service delivery

6. FROG Scoring Method

- This resource is used to support the Home Visitor's skills in scoring the FROG

7. HFNY Completed Sample FROG Scale Narrative

- This is an example of a completed FROG Narrative

8. HFNY FROG Scale Narrative Form

- This is a copy, for training purposes, of the standardized form used to document and score the FROG Scale visit. All FROG narratives should be typed directly into the MIS.

9. Supervisor's Guide to Reviewing a FROG Scale Narrative

- This resource provides guidance on how to review a FROG and approach a FROG discussion during supervision

FROG SELF ASSESSMENT TOOL



HOME VISITORS

Less Confident					How confident do you feel about your ability to:	More Confident				
1	2	3	4	5	Engage and encourage moms to have FROG visits with you	6	7	8	9	10
1	2	3	4	5	Engage and encourage second parents to be present at FROG visits	6	7	8	9	10
1	2	3	4	5	Start and introduce parents to the FROG conversation	6	7	8	9	10
1	2	3	4	5	Remember the 14 domains and what is covered in each domain	6	7	8	9	10
1	2	3	4	5	Have a relaxed conversation	6	7	8	9	10
1	2	3	4	5	Use different conversation strategies	6	7	8	9	10
1	2	3	4	5	Close the FROG visit using ARTSE	6	7	8	9	10
1	2	3	4	5	Document the FROG	6	7	8	9	10
1	2	3	4	5	Score the FROG	6	7	8	9	10
1	2	3	4	5	Support parents' transition to long-term home visiting and contribute to development of service plan	6	7	8	9	10
Have a conversation to gather information related to the Protective Factors below:										
1	2	3	4	5	Social & Emotional Competence (domains 1 & 2)	6	7	8	9	10
1	2	3	4	5	Knowledge of Parenting & Child Development (domains 3-5)	6	7	8	9	10
1	2	3	4	5	Parental Resilience (domains 6-10)	6	7	8	9	10
1	2	3	4	5	Social Connections (domains 11-13)	6	7	8	9	10
1	2	3	4	5	Concrete Resources (domain 14)	6	7	8	9	10

FROG SELF ASSESSMENT TOOL



SUPERVISORS

Less Confident					How confident do you feel about your ability to support Home Visitors to:	More Confident				
1	2	3	4	5	Engage and encourage moms to have FROG visits with you	6	7	8	9	10
1	2	3	4	5	Engage and encourage second parents to be present at FROG visits	6	7	8	9	10
1	2	3	4	5	Start and introduce parents to the FROG conversation	6	7	8	9	10
1	2	3	4	5	Remember the 14 domains and what is covered in each domain	6	7	8	9	10
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1	2	3	4	5	Support parents' transition to long-term home visiting and contribute to development of service plan	6	7	8	9	10
Have a conversation to gather information related to the Protective Factors below:										
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1	2	3	4	5	Parental Resilience (domains 6-10)	6	7	8	9	10
1	2	3	4	5	Social Connections (domains 11-13)	6	7	8	9	10
1	2	3	4	5	Concrete Resources (domain 14)	6	7	8	9	10



SOCIAL & EMOTIONAL COMPETENCE

1. FAMILY ENVIRONMENT

- Readiness for baby's arrival
- Environment and family dynamic—support system around baby
- Impact of pregnancy / baby on parent's life
- Parenting distractions—care of other children, family, etc.
- Cultural influences on parenting

2. PERCEPTION OF THE CHILD

- Initial & current thoughts about pregnancy / baby
- Hopes and dreams for child
- Worries or concerns about pregnancy / baby
- Parent's description of baby's temperament

KNOWLEDGE OF PARENTING & CHILD DEVELOPMENT

3. INFANT & CHILD DEVELOPMENT

- Parent's caregiving experiences
- **Two Milestones within baby's 1st year**—start, worry, rigidity & will do
- "Crying Baby" scenario

4. PLANS FOR DISCIPLINE

- Parent's thoughts about childhood discipline methods
- Cultural influences on discipline
- 2 Scenarios—mobile infant & toddler

5. CHILD PROTECTIVE SERVICES

- Experiences with CPS/ACS

PARENTAL RESILIENCE

6. POSITIVE CHILDHOOD EXPERIENCES

- **Parent's earliest childhood memories**
- People involved in raising parent
- How parent was made to feel loved and cared for
- Make up of household(s) or environment
- Impact of changes within the household
- Supports within and outside of the immediate family
- Methods used to discipline parent as a child—**earliest memory**

7. STRESSFUL CHILDHOOD EXPERIENCES

- Punishments - physical, emotional, psychological
- Experiences with sexual abuse
- CPS/ACS involvement as a child and/or removal from parents
- Stressful or traumatic household or environment
- Childhood exposure to alcohol, drugs, mental illness or DV

PARENTAL RESILIENCE continued

9. MENTAL HEALTH

- Mental health challenges & depression – diagnosed, undiagnosed
- Cognitive & intellectual challenges
- Impacts on social, financial, legal and/or day-to-day functioning
- Impacts on ability to parent
- Indicators of prenatal & postpartum depression
- Administer PHQ-2

10. GENERAL STRESS LEVEL

- Current stressors
- Scale stress levels (**use SCALING as conversation strategy**)
- How is stress managed

SOCIAL CONNECTIONS

11. SOCIAL CONNECTIONS

- Parent's lifelines—family & friends
- Forms and levels of available support
- Contact with family, friends, others—explore conflict mgt & isolation
- Contact & involvement with community—activities

12. INTIMATE PARTNER SUPPORT

- **Relationship between biological parents or with current partner**
- What parents do together & for fun
- How finances & other concerns are managed within the relationship

13. INTIMATE PARTNER CONFLICT MANAGEMENT

- How **disagreements** within relationship are managed
- How **anger** is handled within the relationship
- Potential for IPV—physical, emotional, financial, etc.
- Potential for baby's exposure to conflicts between parents

CONCRETE RESOURCES

14. CONCRETE SUPPORT SERVICES

- Access to transportation & phone
- Education—history & plans
- Employment—history, longevity & plans
- Basic needs & those for baby
- Financial situation—scale concerns & readiness for baby
- Housing situation—scale concerns & readiness for baby
- Explore & scale other stresses & concerns

Directions: Fold page in half. ONLY pictured side is visible to the parent during questioning.
Use this side of the page as a guide for an accurate administration of the PHQ2.

Past 2 weeks, how often have you been bothered by the following...

Q1 ...little interest or pleasure in doing things?

Q2 ...feeling down, depressed, or hopeless?

0 = NOT AT ALL

1 = SEVERAL DAYS

2 = MORE THAN HALF THE DAYS

3 = NEARLY EVERY DAY

If the participants score is 3 or more:

The PHQ-9 must also be administered at the visit where the PHQ-2 was completed and is documented in the HFNY MIS.

S	M	T	W	T	F	S
NOT AT ALL						

S	M	T	W	T	F	S
•			•		•	•
	•	•		•		
SEVERAL DAYS						

S	M	T	W	T	F	S
	•		•	•	•	•
•	•	•			•	
MORE THAN HALF THE DAYS						

S	M	T	W	T	F	S
•	•	•	•	•		•
•	•	•	•		•	•
NEARLY EVERY DAY						



SHIFTING OUR MESSAGE ABOUT HEALTHY FAMILIES



Enhanced Message	Compare	Traditional Message
WHEN OFFERING THE FAMILY AN OPPORTUNITY TO MEET FOR THE FROG VISIT:		
We have been partnering with parents & families for over 15 years, with a common goal of building a community of happy, healthy, safe & smart children ready for school.	Partnership with Parents vs. Program Participation	I can link you to information and resources that can support you and your family's needs.
I come to you! During the time we spend together at your home your family will have my undivided attention for that one-hour we spend together.	Family Support in the Home vs. Home Visiting Program	Healthy Families is a "home visiting" program.
We encourage the involvement of both parents in this partnership; even if living separately. [include a statement of what both parents bring to the table – be prepared to address same sex couples]	Anticipate Both Parents' Involvement vs. Encouraging Dad's Involvement	Dad is welcome to join this visit. Dads are important too. I also have information for Dads—job search, paternity, and legal information, etc.
WHEN OFFERING THE FAMILY IN-HOME SUPPORT SERVICES IF DETERMINED IT'S AN APPROPRIATE REFERRAL:		
You can talk to a Home Visitor about your child's health and development. Both of you can share successes and express any challenges you might be experiencing as parents. You will be able to spend time exploring the latest information about child development and incorporate activities and other fun and exciting things to build your baby's brain.	Child Development Focus vs. Parents' Needs Focus	So that you can focus on your child, a Home Visitor can work through those challenges with you and support you. You're not alone.
You may have some things that you've been thinking about getting done, maybe some goals, for yourself, your baby and your family as a whole. A Home Visitor will be able to listen to you and together you can toss around ideas, problem solve, find resources, and make connections in the community.	Family Goals Focus vs. Program Tasks Focus	The Home Visitor will work with you to develop some goals you want to work on. At least one goal needs to focus on child development.

NEW YORK FROG SCORING METHOD



Here is a method you can use to determine the FROG Scale score:

Always refer to the domain intent. Information captured in line with the intent allows scores of 0, 1, 2, 3, and 4. If information has not been captured relevant to the intent, the score is U.

Step 1

- Consider the score of 0, which means there are ONLY positives. If unable to score 0, next consider the 4, which means there are MAJOR challenges

Step 2

- If unable to score 4, next consider the 2 and determine if the information is directly in line with a score of 2

Step 3

- If the parent's story is not directly in line with 2, then consider the following 1) is it leaning toward positives in 0 and therefore scores 1; or 2) is it leaning toward challenges in 4 and scores 3

EXAMPLES OF WHEN MID-RANGE SCORES OF "1" AND "3" ARE APPROPRIATE:

1. FAMILY ENVIRONMENT

(#1 Scores) P1: 1

P2/Partner: U

Mom stated that her current pregnancy was not planned, and she did not know she could get pregnant so soon after having SIB who is 18 months. She said she was unaware of pregnancy prevention measures and so was Dad. Mom said she was shocked when she found out she was pregnant again and is now happy about baby and that it's a girl. Mom said that she had made arrangements with family to care for SIB and now the new baby, so that she can work and continue college. Mom said that her children are not going to get in the way of her goals for herself and her family.

8. BEHAVIORAL HEALTH

(#8 Scores) P1: 3

P2/Partner: U

Mom stated that she smokes marijuana, starting in middle school and continues to smoke several times a month, or even weekly. She stated that she stopped during pregnancy with SIB and again when she found out she was pregnant with TC at 9 weeks. Mom says she stops smoking cigarettes and marijuana during her pregnancies because she read and heard that it was not going to be good for the baby. Mom stated that doesn't smoke because she is stressed or depressed, just socially. Mom said she would sell what she got from shoplifting to buy cigarettes and marijuana. She said she was caught shoplifting a few months ago for the first time. No criminal charges were filed but she's on a list of people who cannot enter the mall. Mom said this has caused a rift between her and MGM. Mom stated the encounter "scared me straight" and says she still feels the worst outcome is that she lost the trust of her mother.

AN EXAMPLE OF WHEN A "U" IS APPROPRIATE FOR A PARENT WHO WAS PRESENT FOR THE ASSESSMENT:

12. INTIMATE PARTNER SUPPORT

(#12 Scores) P1: U

P2/Partner: U

Mom shared that she and Dad have movie nights and they both like to watch scary movies. FRS did not capture enough information related to the intent. Unable to rate.

Note: In the above examples, P2/Partner was not present at the assessment and therefore scored a U



Family Resilience & Opportunities for Growth Scale F.R.O.G. Scale Narrative (SAMPLE)

Name/PC1 ID: HENRO41693

Program: HEALTHY FAMILIES STRONG

FRS: WILMA RUSSELL

Scale Date: 02/03/22

Parent 2/Partner: ☐ Present ☒ Absent

***Score** information about Parent 2/Partner **ONLY** if present for this assessment.

Introduction (Include who was present during this survey; if one parent was not present—reason for absence; where the visit took place, if there were any interruptions during discussion—detail; etc.)

Mom was present for the visit; but Dad was at work. Mom is 22 years old, and Dad is 24. The visit took place at Mom's apartment where she lives with her 18-month-old son. Mom is currently 7 months pregnant with their daughter.

SOCIAL & EMOTIONAL COMPETENCE

1. FAMILY ENVIRONMENT

(#1 Scores) **P1: 1**

P2/Partner: U

Mom stated that her current pregnancy was not planned, and she did not know she could get pregnant so soon after having SIB who is 18 months. She said she was unaware of pregnancy prevention measures and so was Dad. Mom said she was shocked when she found out she was pregnant again and is now happy about baby and that it's a girl. Mom said that she had made arrangements with family to care for SIB and now the new baby, so that she can work and continue college. Mom said that her children are not going to get in the way of her goals for herself and her family.

- Readiness for baby's arrival
- Environment and family dynamic—support system around baby
- Impact of pregnancy / baby on parent's life
- Parenting distractions—care of other children, family, etc.
- Cultural influences on parenting

2. PERCEPTION OF THE CHILD

(#2 Scores) **P1: 1**

P2/Partner: U

Mom said she feels like baby is already "laid back". Mom stated that since SIB was such a good baby and continues to be a good happy boy, she thinks she may not get as lucky with this one; and it may cry more and be more difficult.

- Initial & current thoughts about pregnancy / baby
- Hopes and dreams for child
- Worries or concerns about pregnancy / baby
- Parent's description of baby's temperament

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

3. INFANT & CHILD DEVELOPMENT (#3 Scores) P1: 0 P2/Partner: U

Mom stated she babysat cousins a few times growing up. Mom said that she did a lot of reading while she was pregnant with SIB so that she would be ready to parent. She said, "parenting is very different from babysitting!" Mom stated that SIB started walking about a year old and expects about the same with the new baby. She said she plans on starting potty training at about 2 years old and may be worried if not potty trained by 3 years old and preschool age. Mom said she would call MGM or other family member if baby is colicky or cries a lot and cannot get her to stop after trying comforting the baby. Mom said she would respond to baby if crying by holding, rocking and talking; trying to sooth baby and not let cry. Mom shared that she would not let the baby cry for more than 5 minutes. She said she may call Doctor if cannot calm baby to make sure baby is alright and not sick.

- Parent's caregiving experiences
- 2 Developmental milestones—start, worry, rigidity & will do
- "Crying Baby" scenario

4. PLANS FOR DISCIPLINE (#4 Scores) P1: 0 P2/Partner: U

Mom said that when MGM would spank or beat her it wasn't effective because it didn't make her stop what she was doing. Mom said she does not plan on using spanking or physical discipline on her kids. Mom stated that she would not discipline an infant, but make sure he was safe from harm because he doesn't understand yet. Mom said she would talk to toddler in the grocery store, and if he was still misbehaving she would remove toddler. She said she would repeat removing toddler and not give treats until the toddler stopped "acting out" in the store. Mom said she has used removing SIB from the situation like bothering TV or DVD buttons, and giving him something else to do.

- Parent's thoughts about childhood discipline methods
- Cultural influences on discipline
- 2 Scenarios—mobile infant, toddler

5. CHILD PROTECTIVE SERVICE (#5 Scores) P1: 0 P2/Partner: U

Mom said no one has ever been concerned with how she cares for children and has never been involved with CPS.

- Experiences with CPS/ACS

PARENTAL RESILIENCE

6. POSITIVE CHILDHOOD EXPERIENCES (#6 Scores) **P1: 0** **P2/Partner: U**

Mom stated she was raised by MGM. She said MGM left MGF when MGM was pregnant. Mom said she knows MGF and saw him occasionally for birthdays and major events but was not involved in raising her. Mom stated that she has a close relationship with MGM, but that she put MGM through "a lot" growing up. Mom defined "a lot" saying that she skipped class and smoked cigarettes and marijuana in middle school and high school. Mom stated that extended family was always around. She said they would have family get togethers where her aunts and her mother's friends, whom she also called "Aunties" would be around. She said they did not babysit her without her mother being there, but they did care and love her.

- People involved in raising parent
- How parent was made to feel loved and cared for
- Make up of household(s) or environment
- Impact of changes within the household
- Supports within and outside of the immediate family
- Methods used to discipline parent as a child—earliest memory

7. STRESSFUL CHILDHOOD EXPERIENCES (#7 Scores) **P1: 4** **P2/Partner: U**

Mom stated that MGM disciplined her by grounding her but also "spanked or beat" her with "whatever she could grab", whether it be a shoe or belt. Mom stated that this happened throughout her childhood often leaving red marks and soreness, and maybe some bruising. Mom stated no sexual abuse by MGM or anyone else. Mom stated that she thinks CPS may have been involved with her family when she was younger, but not sure. Mom stated that she was never aware of MGM using drugs but saw her drink alcohol with friends at the house.

- Punishments - physical, emotional, psychological
- Experiences with sexual abuse
- CPS/ACS involvement as a child and/or removal from parents
- Stressful or traumatic household or environment
- Childhood exposure to alcohol, drugs, mental illness or DV

8. BEHAVIORAL HEALTH (#8 Scores) **P1: 3** **P2/Partner: U**

Mom stated that she smokes marijuana, starting in middle school and continues to smoke several times a month, or even weekly. She stated that she stopped during pregnancy with SIB and again when she found out she was pregnant with TC at 9 weeks. Mom says she stops smoking cigarettes and marijuana during her pregnancies because she read and heard that it was not going to be good for the baby. Mom stated that doesn't smoke because she is stressed or depressed, just socially. Mom said she would sell what she got from shoplifting to buy cigarettes and marijuana. She said she was caught shoplifting a few months ago for the first time. No criminal charges were filed but she's on a list of people who cannot enter the mall. Mom said this has caused a rift between her and MGM. Mom stated the encounter "scared me straight" and says she still feels the worst outcome is that she lost the trust of her mother.

- Parent's use of drugs or alcohol
- Other addictive behaviors—cigarettes, gambling, gaming, etc.
- How behavior impacts ability to parent

9. MENTAL HEALTH(#9 Scores) **P1: 0****P2/Partner: U**

Mom stated that she was never in counseling and did not feel like she needed to be. Mom stated that she did not experience and depression after having SIB and has no concerns. Mom's PHQ2 score was negative.

- Mental health challenges & depression—diagnosed, undiagnosed
- Cognitive & intellectual challenges
- Impacts on social, financial, legal and/or day-to-day functioning
- Impacts on ability to parent
- Indicators of prenatal & postpartum depression
- Administer PHQ-2

10. GENERAL STRESS LEVEL(#10 Scores) **P1: 4****P2/Partner: U**

Mom states being stressed out with her job because she has been so sick with this pregnancy, she has been sick at work or has had to miss work. On the scale Mom shared that the stress of possibly losing her job is a 9. Mom shared that when she is stressed, she watches her shows on TV that make her laugh and that helps her calm down when she is feeling really stressed.

- Current stressors
- Scale stress level
- How is stress managed

SOCIAL CONNECTIONS

11. SOCIAL CONNECTIONS

(#11 Scores) **P1: 1**

P2/Partner: U

Mom stated that her lifelines are MGM, her brothers, Dad's family including PGM and his sister and Mom's "aunties" and other friends. Mom shared that she can call any of these people at any time and they will be there for her. Mom said that one of her current social involvements include getting together with other moms including friends and family, eating and having "mommy time" to talk about being a mom. Mom states that she got into "several" physical fights when she was in high school "over boys and other stuff" but doesn't fight anymore. Mom says, "I don't argue with folks anymore, it's not worth it, I just walk away."

- Parent's lifelines—family & friends
- Forms and levels of available support
- Contact with family, friends, others—explore isolation
- Contact & involvement with community—activities
- Managing conflicts with others

12. INTIMATE PARTNER SUPPORT

(#12 Scores) **P1: U**

P2/Partner: U

Mom shared that she and Dad have movie nights and they both like to watch scary movies. FRS did not capture enough information related to the intent. Unable to rate.

- Relationship between parents
- What parents do together & for fun
- How parents manage finances, stresses & other concerns

13. INTIMATE PARTNER

CONFLICT MANAGEMENT

(#13 Scores) **P1: 4**

P2/Partner: U

Mom states that when they argue they yell, hit and throw things. She said she pushes and shoves Dad. Mom stated that one time, before she was pregnant with SIB, about two years ago, Dad hit her back and pushed her. Mom said she immediately told Dad that he will never touch her again, or she will tell her brothers and they will "take care of it". Mom said her mother taught them all that a man never touches a woman. Mom stated that Dad has never been physical with her since that one time.

- How parent manages disagreements with partner
- How parent handles anger with partner
- Potential for IPV—physical, emotional, financial, etc.
- Potential for baby's exposure to conflicts between parents

CONCRETE RESOURCES

14. CONCRETE SUPPORT SERVICES (#14 Scores) **P1: 1** **P2/Partner: U**

Mom stated she has her own car and phone. Mom said she has a high school diploma and is attending the community college for criminal justice. Mom stated that she works and has been at her job for about 4 years now. Mom said she moved out of MGM's house two months ago into a 2-bedroom subsidized apartment hoping that she and Dad could live there together as a family. She said she is concerned because Dad may not be able to live with them because he's not on the lease. She said she lives paycheck to paycheck but does not feel like finances are too tight. Mom said she has enough money and things right now. She says Dad helps financially for SIB and so does her family members. Mom shared that right now she has what she needs for the baby and gifts from family and friends. Mom stated that she started prenatal care when 9 months pregnant. She says she keeps all her appointments and once Dad came with her. Mom states being stressed out with her job because she has been so sick with this pregnancy, she has been sick at work or has had to miss work. On the scale Mom shared that the stress of possibly losing her job is a 9 because "it will not be a good situation if I don't have a job."

- Access to transportation & phone
- Education—history & plans
- Employment—history, longevity & plans
- Basic needs & those for baby
- Prenatal care
- Financial situation—scale concerns & readiness for baby
- Housing situation—scale concerns & readiness for baby
- Explore & scale other stresses & concerns

TOTAL SCORES:

Parent 1: 19

Parent 2/Partner: U

TOTAL # OF UNKNOWNNS:

Parent 1: 1

Parent 2/Partner: 14

REFERRALS: None were offered to mom during this visit.



Family Resilience & Opportunities for Growth Scale F.R.O.G. Scale Narrative

Name/PC1 ID: Click or tap here to enter text.

Program: Click or tap here to enter text.

FRS: Click or tap here to enter text.

Scale Date: Click or tap here to enter text.

Parent 2/Partner: ☐ Present ☐ Absent

***Score** information about Parent 2/Partner **ONLY** if present for this assessment.

Introduction (Include who was present during this survey; if one parent was not present—reason for absence; where the visit took place, if there were any interruptions during discussion—detail; etc.)

Click or tap here to enter text.

SOCIAL & EMOTIONAL COMPETENCE

1. FAMILY ENVIRONMENT

(#1 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Readiness for baby's arrival
- Environment and family dynamic—support system around baby
- Impact of pregnancy / baby on parent's life
- Parenting distractions—care of other children, family, etc.
- Cultural influences on parenting

2. PERCEPTION OF THE CHILD

(#2 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Initial & current thoughts about pregnancy / baby
- Hopes and dreams for child
- Worries or concerns about pregnancy / baby
- Parent's description of baby's temperament

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

3. INFANT & CHILD DEVELOPMENT

(#3 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Parent's caregiving experiences
- 2 Developmental milestones—start, worry, rigidity & will do
- "Crying Baby" scenario

4. PLANS FOR DISCIPLINE

(#4 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Parent's thoughts about childhood discipline methods
- Cultural influences on discipline
- 2 Scenarios—mobile infant, toddler

5. CHILD PROTECTIVE SERVICE

(#5 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Experiences with CPS/ACS

PARENTAL RESILIENCE

6. POSITIVE CHILDHOOD EXPERIENCES

(#6 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- People involved in raising parent
- How parent was made to feel loved and cared for
- Make up of household(s) or environment
- Impact of changes within the household
- Supports within and outside of the immediate family
- Methods used to discipline parent as a child—earliest memory

7. STRESSFUL CHILDHOOD EXPERIENCES

(#7 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Punishments - physical, emotional, psychological
- Experiences with sexual abuse
- CPS/ACS involvement as a child and/or removal from parents
- Stressful or traumatic household or environment
- Childhood exposure to alcohol, drugs, mental illness or DV

8. BEHAVIORAL HEALTH

(#8 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Parent's use of drugs or alcohol
- Other addictive behaviors—cigarettes, gambling, gaming, etc.
- How behavior impacts ability to parent

9. MENTAL HEALTH

(#9 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Mental health challenges & depression—diagnosed, undiagnosed
- Cognitive & intellectual challenges
- Impacts on social, financial, legal and/or day-to-day functioning
- Impacts on ability to parent
- Indicators of prenatal & postpartum depression
- Administer PHQ-2

10. GENERAL STRESS LEVEL

(#10 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Current stressors
- Scale stress level

- How is stress managed

SOCIAL CONNECTIONS

11. SOCIAL CONNECTIONS

(#11 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Parent's lifelines—family & friends
- Forms and levels of available support
- Contact with family, friends, others—explore isolation
- Contact & involvement with community—activities
- Manages conflict with others

12. INTIMATE PARTNER SUPPORT

(#12 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Relationship between parents
- What parents do together & for fun
- How parents manage finances, stresses & other concerns

13. INTIMATE PARTNER CONFLICT MANAGEMENT

(#13 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- How parent manages disagreements with partner
- How parent handles anger with partner
- Potential for IPV—physical, emotional, financial, etc.
- Potential for baby's exposure to conflicts between parents

CONCRETE RESOURCES

14. CONCRETE SUPPORT SERVICES

(#14 Scores) **P1:** Choose an item. **P2/Partner:** Choose an item.

Click or tap here to enter text.

- Access to transportation & phone
- Education—history & plans
- Employment—history, longevity & plans
- Basic needs & those for baby
- Prenatal care
- Financial situation—scale concerns & readiness for baby
- Housing situation—scale concerns & readiness for baby
- Explore & scale other stresses & concerns

TOTAL SCORES

Parent 1: Click or tap here to enter text.

Parent 2/Partner: Click or tap here to enter text.

TOTAL # OF UNKNOWN:

Parent 1: Click or tap here to enter text.

Parent 2/Partner: Click or tap here to enter text.

REFERRALS: Click or tap here to enter text.

SUPERVISOR'S GUIDE TO REVIEWING A FROG SCALE NARRATIVE



Reviewing the FROG Scale narrative is an important part of supervision of the Family Resource Specialist (FRS). Supporting the FRS's skills for producing a well-written, complete, and accurate narrative is an essential part of supervision. The FROG reflects the parents' story and is a snapshot of their life as of that moment in time. It will be referred to many times over the course of services and the FROG is used to develop the initial Service Plan and next steps to reducing risk of poor childhood outcomes. Therefore, it should be well written, complete, and accurate.

- 1) Read the entire FROG through first. The summary should read like a story of the parent's life and will help you to get a complete picture of the family's circumstances, strengths, protective factors, and concerns. You may find that some information is documented under the wrong domain or that the story doesn't hang together well. Make notes of your questions or comments to be reviewed with the FRS during supervision.
- 2) Return to the beginning and re-read each domain separately. Look for and note the following:
 - a. The story captured is in line with the domain intent and there is enough information to score.
 - b. Areas that have been covered well and that help to create a picture of the family for the Family Support Specialist (FSS) who will work with the parents.
 - c. Completeness of each FROG domain content as well as areas that are missing essential points.
 - d. FRS demonstrated skill in digging deeper for clarity and when red flags, vague terms or fuzzy words were not explored.
 - e. When the FRS made interpretations of or assumptions about events or statements.
 - f. When the FRS used quotes, do the pronouns reflect the parent's voice, are quotation marks in the right places, and does the use of quotes add to the story?
 - g. When both parents' information has been captured, is there a separation of their information within the narrative?
 - h. Parents' responses to strengths-identifying questions (SIQs) are included and protective factors have been identified for both parents, when possible.
- 3) Develop a plan to incorporate professional development activities during supervision. Plan to use reflective strategies like role play and open-ended

questions like: “What might you have asked to explore that further?”, with the goal of building and enhancing FRS skills for conducting the FROG including:

- a. Gathering all the essential points in each FROG domain.
- b. Quantifying and qualifying responses for clarity.
- c. Digging deeper to explore the parent’s full story giving special attention to the “Big 4” topics – addictive behaviors, mental health concerns including depression, intimate partner violence, and cognitive/intellectual disabilities.
- d. Engaging and including Parent2 in the assessment process.
- e. Incorporating SIQs to identify strengths and protective factors.

4) Review the score for each topic area to consider the following:

- a. There is enough information relevant to the intent to score 0, 1, 2, 3, or 4; or is “U” appropriate.
- b. If you disagree with a domain score given by FRS, note why to discuss further. Plan to model the use of the **NY FROG Scoring Method** to determine the score that will be mutually agreed upon.
- c. Note where information documented in one domain might be used to score in another domain.

5) During supervision, discuss your review of the FROG with the FRS using Reflective Strategies.

- a. Use ATPs and SATPs to recognize what FRS has done well and to support skill development.
- b. Implement the plan to explore your noted areas, e.g., domains not covered adequately, challenges in documentation or scoring, reactions to the family, etc.
- c. Explore FRS’s desired areas of professional development. Consider using the **FROG Self-Reflection Tool** to spark the discussion.
- d. Mutually agree to review, during a following supervision session, progress regarding the FRS’s attempts at incorporating strategies discussed and practiced when completing future FROG scales; thereby adding a necessary level of accountability and FRS’s investment in skill enhancement.
- e. Use FRS’s experience with family to begin to inform the Service Plan. Explore identified strengths, protective factors, concerns, and evidence of parent’s “change talk” – statements that the parent made expressing an interest in changing or doing something different from what was experienced or done before.
- f. Come to agreement on documentation and final scoring and, if necessary, have FRS revise to create the final FROG Scale Narrative.