

## **Supervisor's Guide to *Family Goal Plan* Stop-Gap Training**

**Family Support Specialists (FSS)** are required to attend the Family Goal Plan (FGP) training within 3 months of hire. If an FSS is unable to complete the training offered by Prevent Child Abuse New York (PCANY) within that timeframe, the program is required to provide stop-gap training. If the FSS completes the PCANY FGP training within the 3-month window, no FGP stop-gap training is required. When the FGP Stop-Gap option is used, sites enter the code 11-2F (the same code as the FGP Training) into the staff person's MIS training record once training is completed.

Healthy Families New York FGP stop-gap training consists of the following materials:

- **Healthy Families America's *Family Goal Plan* Webinar.** This webinar provides a comprehensive overview of the FGP and the Healthy Families approach to goal setting, and includes handouts. A link to the webinar can be found here on the HFA website: <http://www.healthyfamiliesamerica.org/webinars/>
- **Updated FSS Transfer of Learning (TOL) Competencies.** The purpose of the FSS (FSW) TOL curriculum is to provide supervisors with the means to help home visitors integrate the knowledge gained at Core Training (formerly "Integrated Strategies for Home Visiting" and called "Foundations for Family Support" as fall 2018) and practice their new skills. FSS TOL Competencies 8 and 13 address the FGP. Updated versions of these Competencies are included in this guide.
- **Activities designed by your site to further support FGP learning.** Sites are welcome to add their own stop-gap training materials and activities to the resources above. For instance, you might ask a home visitor to read section 6-2 of the Best Practice Standards, which covers the FGP, and then have a discussion during supervision.

**Supervision.** Supervision plays an essential role in assuring that home visitors learn from the activities above. We strongly recommend that supervisors engage home visitors in reflective discussions about these activities so that home visitors can absorb and incorporate their learning. In order to facilitate these discussions, it is important that Supervisors are familiar with the stop-gap materials themselves.

**Follow-up questions for the HFA Webinar.** Supervisors can pose open-ended questions or offer prompts during supervision to help FSSs reflect on and integrate the information provided by the FGP webinar. For instance:

- What stood out for you from the FGP webinar?
- What questions do you have about the FGP?

- What concepts or approaches did you agree with/disagree with?
- Where do you need help putting what you learned into practice?
- The webinar states that the FGP process can empower families. How do you think that happens?
- The FGP process is driven by the family and their own motivations. What are some ways you might help a family identify their hopes and dreams?
- The webinar emphasized that we focus on the FGP process rather than whether a family achieves a goal or not (the product). What does that mean to you? How might you put that into practice with families?
- HFA changed the FGP requirement from 2 or more goals to 1 or more goals. What's your understanding of the reasoning behind this?
- The webinar talks about the fact that the FGP process can rewire the brain for parents who have experienced trauma. What's your sense of how that happens?
- What do the 3MMM'S stand for? Let's review that tool.
- Have you ever used a scaling tool? Let's practice how to use it.
- If a family sets a goal that you don't agree with, how would you respond to that? What if you feel strongly that a family needs to work on a particular goal, but they don't choose that goal? [These two questions provide an opportunity for the supervisor to emphasize that the goal setting process is led by the family.]

\* Please note: currently HFNY does require the family, home visitor and supervisor to sign the FGP form, unlike the HFA approach.

**If you have further questions about FGP stop-gap training, please contact your FSS or FRS QA Specialist or any FGP Trainer.**

## **Home Visitor Transfer of Learning for the Family Goal Plan (FGP)**

**Competency 8:** The home visitor is able to use a number of approaches to assist families in developing FGPs based on each family's unique strengths, interests, and needs, and their hopes for their children.

ISHV Manual pages 97-110

Critical Element 6

Foundations for Family Support Manual pages 54-71 and 103-121

**Rationale:** As a strength-based program, Healthy Families relies on the ability of the home visitor to 1) assist families in identifying their strengths and successes, and 2) use this information to help the family plan for future successes and maximize family self-sufficiency.

### **Key points:**

#### **The Strength-based Approach**

- All families possess strengths and have achieved successes.
- A primary responsibility of the FSS is to practice noticing family's strengths, and to be able to identify strengths, especially when a family faces substantial challenges.
- The FSS helps the family recognize past successes (no matter how small), and how they can employ the skills and tools they used to achieve these successes as they pursue their current goals.

#### **FGP Process**

- The FGP process is more important than whether the end goal is achieved (the product). In the process of pursuing goals, parents build strengths and skills, experience successes that increase their self-esteem and positively change their self-perception. The FGP process also strengthens the 5 Protective Factors that reduce child maltreatment and neglect: Knowledge of Parenting and Child Development; Parental Resilience; Social Connections and Support; Concrete Support for Parents; Social and Emotional Competence of Children/Nurturing and Attachment.
- Helping the family to explore, identify, and pursue their hopes and dreams helps the FSS build a trusting and supportive relationship with the family that encourages the family's ongoing engagement with the program.

#### **FGP Guidelines**

- FGPs are developed by the family in collaboration with the FSS. Supervisors are also a part of the collaboration; they review the Parent Survey with the FSS, assist in identifying potential strengths and challenges which may inform the parent's goal setting, and are responsible for reviewing each FGP and "signing off" on it when it is completed.
- To support them in experiencing success, families are only required to have one goal, either for the child or the parent(s). When it benefits the family, the family can choose to pursue more than one goal.

- The FSS does not attempt to persuade the family to pursue goals that the FSS believes are important. Concerns about the family identified by the FSS and their Supervisor are addressed through the Service Plan, not the FGP.
- The initial FGP is completed within 45 days of the family's intake. Once in place, the FGP is discussed with the family frequently (generally weekly); this shows the family that their goals are important to the FSS. The FGP form is revised at least every six months to reflect progress with and changes to the family's goals.
- If a family enters the program prenatally and chooses a goal focused on their pregnancy, this goal is revised after the birth of the baby to reflect their current circumstances.
- Just as the FSS discusses the FGP with the family frequently, supervisors emphasize the value and importance of the FGP by including FGP updates in the discussion of each family during FSS supervision meetings.
- The FSS notices when goals or steps to goal achievement are met, and uses ATPs and affirmation to celebrate these successes. This increases the family's motivation and reinforces their engagement in the FGP process.

#### FGP Tools & Resources

- The Parent Survey is used as a tool for gathering information and observing for potential strengths/protective factors, interests, and challenges which may inform the family's goal setting.
- The FSS can use resources such as the Values Cards and the "What I Want for My Child" worksheet (from the "Foundations for Family Support" Core Training) to help families identify hopes and dreams for themselves and their children, which the family can then incorporate into their FGP.
- The FSS utilizes the 3 MMM's approach to ensure that the FGP process sets the families up for success:
  - *Mission*: the FGP defines what the family wants to accomplish.
  - *Mini*: steps towards the goal are small and achievable within a short period of time.
  - *Measurable*: the goal is measurable, so that the family knows when they have achieved their goal.
  - *Support*: the family has identified people who will build their strengths and support them in their pursuit of their goal.
- The FGP form supports the goal setting process by providing a written record of family strengths, support systems, possible obstacles to success, goals and action steps toward achieving them, progress, and changes of plan.

#### **Indicators of Competence:**

- The FSS is able to identify family strengths in the Parent Survey and during home visits, and describes how the family might employ these strengths to achieve their goals.
- The FSS understands and is able to practice solution-focused problem solving with families. For instance, the FSS may help the family identify what worked in the past.
- The FSS has strategies for highlighting the family's strengths and facilitating the family's process of identifying their goals in the development of the FGP.

- The FSS's work demonstrates collaboration with the family in the FGP process. This collaboration is expressed in a document that reflects family goals that might differ from the FSS's desires for the family, and discussions in supervision reveal that the FGP process was driven by the family and supported by the FSS.

**Activity:** Reading a sample Parent Survey and identifying a family's potential strengths/protective factors, interests and challenges.

**Intention:** To help the FSS prepare for supporting families as they develop their goals by identifying potential strengths/protective factors, interests and challenges in each of the ten areas of the family's Parent Survey.

**Supervisor Responsibilities:**

1. Discuss the rationale for using the Parent Survey.
2. Introduce each section of the Parent Survey and discuss how the family might benefit from the program having information in each of the ten sections.
3. Discuss the importance of examining the Parent Survey from a strength-based perspective.
4. Provide the FSS with a sample Parent Survey. Ask the FSS to carefully read each section and identify strengths/protective factors, family interests, and challenges.
5. Discuss how the FSS can use their knowledge of the family's strengths/protective factors, interests and challenges to support the family's goal setting process (vs. using this information to direct the family in their goal setting). For instance, if a family is having difficulty identifying a goal, but mentioned a change they want to make in the Parent Survey, the FSS could explore the possibility of establishing a related goal.

**Activity:** Role Play – supporting a family in developing their FGP.

**Intention:** To give the FSS an opportunity to plan for and practice developing the FGP in collaboration with a new family.

**Supervisor Responsibilities:**

1. Ask the FSS to review the file and information in MIS for a family that is new to the program and will be assigned to him or her. The Parent Survey and basic intake information may be the only information available, or the FSS may have met the family and documented the first home visit.
2. Based on the information available, have the FSS make a list of potential strengths/protective factors, interests and challenges for the family that may inform their hopes and motivations as they approach the family goal plan process.
3. Ask the FSS to make a plan for discussing the FGP with the family. How can they integrate their knowledge of the family into this discussion to support the family in identifying goals that are meaningful and motivating for them (rather than the FSS)?
4. Invite the FSS to role-play the FGP discussion during supervision
5. Use open-ended questions to encourage the FSS to reflect on the role play:
  - “What went well?”
  - “What felt hard?”

“What changes would you make to your approach in the actual home visit?”

**Activity:** For a Level 2 family or above, identifying the family’s progress in building strengths and overcoming challenges.

**Intention:** to help the FSS learn to use relevant documentation and assessments in the family file and/or the MIS to recognize a family’s progress with building strengths/protective factors and overcoming challenges.

**Supervisor Responsibilities:**

1. Discuss the importance of current and previous FGPs, home visit documentation, other assessments (Parent Survey, ASQs, Parenting Stress Index, PHQ-9, etc.), and information in the family file and the MIS, and how these resources can be used to determine baselines and measure a family’s progress with building strengths/protective factors and overcoming challenges over time.
2. Choose a family (ideally one that is or will be assigned to the FSS) that has been active in the program for at least one year and has at least two completed FGPs.
  - a. Ask the FSS to review documents and assessments (listed above) in the family file and/or MIS for evidence of the family’s strengths/protective factors, challenges, goals, and accomplishments.
  - b. Use open-ended questions to invite the FSS to reflect on what they have learned:  
“How have the family’s strengths grown and evolved over time?”  
“How have the family’s goals changed over time?”  
“What new strengths and/or skills have emerged?”
3. Have the FSS make a plan for reviewing the following with the family:
  - a. The growth of the family’s strengths, skills and abilities in pursuit of their goals.
  - b. The families current FGP.
4. If the family is actually assigned to the FSS, the FSS can follow through and speak with the family about how their skills and strengths have grown over time, then discuss the outcome of this conversation in supervision.

Staff person: \_\_\_\_\_

Date of hire: \_\_\_\_\_ Date activity completed: \_\_\_\_\_

Follow-up notes/plan:

Supervisor signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Competency 13:** The FSS is able to recognize the family's desire or need for referrals to community resources, effectively presents options to the family, advocates for the family when necessary, makes follow-up referrals, and incorporates referrals into the FGP process.

Rationale: "Concrete Support for Parents" and "Social Connections and Support" are related Protective Factors that strengthen families and prevent child maltreatment and neglect. Research has shown that families who have a strong social support network in their community and receive needed support from local service agencies are more resilient, have greater success in achieving their goals, and are better able to provide safe, stable homes for their children.

**Key Points:**

- As a strength-based, family centered model, HFA is committed to helping families develop or expand their own social support networks and connect with services they need in their community
- FSSs develop the ability to identify potential referrals, beginning with reviewing and discussing the Parent Survey in supervision, and continuing afterwards through observation of the family and exploring needs, interests, challenges, hopes and dreams with the family.
- Referrals are offered as options for the family, and any referral is voluntary.
- Because the FGP serves as an important reference point for providing services to the families, referrals and follow-up by the FSS can be an integral part of the FGP.
- FSSs regularly follow up on any referrals to services offered to the family by asking if the family has used the referrals. If not, the FSS explores how they might assist the family in doing so, whether another referral would be a better fit, or if the referral is no longer of interest.
- To support and build the family's self-reliance, HFA is committed to the concept of "Do For, Do With, Cheer On." This approach assists the family in developing their own strengths, skills, and coping mechanisms, rather than creating ongoing dependence on the FSS or the program.
- Families may find it challenging to connect with community resources because of past negative experiences, concerns related to their immigration status, lack of knowledge of the services available and how to obtain them, lack of confidence, or other factors. It is important that the FSS explores with the family any barriers they may face in obtaining services, and that the FSS help the family to address these barriers when appropriate.

**Indicators of Competence:**

- The FSS can describe the HFA concept of "Do For, Do With, Cheer On," and along with the Supervisor, continually assesses its application in the work with each family.
- The FSS is able to help the family explore their needs, hopes and dreams, and is able to collaborate with the family in identifying potential referrals for the family.
- The FSS has knowledge of services in the community, and is confident in offering this information to families. The FSS follows-up on referrals by asking if the family has used the referral, and if they have not, the FSS is able to explore how he or she might assist

them in doing so, whether another referral would be a better fit, or if the referral is no longer of interest.

- The FSS has an understanding of the various barriers families face in connecting with services and can address them where appropriate.

**Activity:** Identifying FGP-based referrals derived from the family's goals.

**Intention:** To help the FSS discover potential referrals related to the FGP, identify community services, and practice discussing potential referrals with families.

**Supervisor Responsibilities:**

1. Discuss the family's current support network, and where needed, help the FSS identify potential opportunities for the family to grow that network to meet their need for social connection and mutual aid.
2. Discuss the connection between the FGP and referrals to community services. For instance, if the family's goal is to improve their housing, a referral to an organization that can help them find and/or afford housing could be relevant.
3. Provide the FSS with a sample FGP and ask the FSS to examine the family's goal and steps towards achieving that goal. Ask the FSS to identify potential referrals to community programs or services for the goal, and potential barriers to the family pursuing that goal.
4. Have the FSS choose two potential referrals and develop a plan for discussing them with the family. The plan should include:
  - Introducing the referrals and its relevance to the family's FGP
  - Presenting specific information about the referral (i.e. services offered, contact information, business hours, the typical course of services, etc.)
  - Asking the family if they are interested in pursuing the referral
  - Discussing the FSS's role in facilitating the referral and following up on it
5. Have the FSS role-play each of the plans developed in step #3 with the supervisor or an experienced FSS.
6. Use open-ended questions to invite the FSS to reflect on the role play:
  - "What went well?"
  - "What felt hard?"
  - "What changes would you make to your approach in the actual home visit?"

Staff person: \_\_\_\_\_

Date of hire: \_\_\_\_\_ Date activity completed: \_\_\_\_\_

Follow-up notes/plan:

Supervisor signature: \_\_\_\_\_ Date: \_\_\_\_\_