



Study Guide: In-House Family Goal Plan Training

***PREVENT CHILD ABUSE NEW YORK
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How To Use This Study Guide

Family Support Specialists (FSS) are required to complete this In-house Family Goal Plan (FGP) Training within 3 months of hire. This Study Guide contains, or directs you to, all of the materials you will need for this process. Depending on the preferences and needs of the FSS and FSS supervisor, an FSS can 1) complete this training independently, 2) work through it together with their supervisor during supervision, or 3) some combination of the two. In addition, two or more staff can engage in this training together.



Some pages will have this icon next to the activity. That means you will be discussing this activity with your supervisor at your next supervision.



Some pages will have this icon to reference tools for use in your work.

A note to supervisors. Supervision plays an essential role in assuring that home visitors understand the training materials and are able to incorporate the content into their work with families. Therefore, we strongly recommend that supervisors engage home visitors in reflective discussions about the In-house FGP training to help staff absorb the material. To support this process, there is a suggested list of questions to explore in supervision at the end of each section of the Guide. The FSS and supervisor can feel free to select those questions that best match the FSS's training needs, knowledge, and skill level.

Mastering any skill involves ongoing learning. A Transfer of Learning (TOL) module is available on the staff side of the HFNY website. It offers guidance on your role in the FGP process as well as ways to continue to build your supervisee's FGP skill set.

Lastly, in order to best support the training process, it is important that supervisors have studied the In-house FGP Training materials themselves. Please take the time to familiarize yourself with the content before guiding trainees in their learning.

If you have questions at any time, please reach out to your site's FSS QA Specialist.

MODULE 1:

Webinar: “Family Goals - It’s More About the Process”

Based on HFA’s Family Goal Plan webinar, this webinar from the Institute for Advancement of Family Support Professionals (IAFSP) will provide you with a comprehensive overview of the FGP process. Additional materials in this guide were adapted by PCANY from those provided by IAFSP.

Please follow these steps:

1. Before watching the webinar, assess your current knowledge of the FGP process using the table on page 5.
2. Watch the webinar. Feel free to take notes to capture information: <https://institutebsp.org/modules/family-goals-its-more-about-the-process>
3. Answer the “After the Webinar” questions on page 6 and complete the Goal Plan on page 7.
4. Review your pre- and post-training materials with your supervisor.

BEFORE the Webinar: Rate Your Knowledge

(On a scale of 1 to 10, where 1 = no knowledge, and 10 = significant knowledge)

Learning Objective	Before the Training	After the Training
Know how families benefit from setting goals.		
Describe the difference between program goals and family goals.		
Explain how to help families identify goals they want to work on.		
Support families in achieving successful outcomes.		
Know how to help families overcome barriers to reaching their goals.		
Understand why the process is more important than the product.		

My personal learning goals for this training are:

1.

2.

3.

AFTER the Webinar: Reflect

What key elements of this training will stay with you?

What are the most important points?

What questions or concerns do you have? Where do you need further information or practice?

Your Training Goal Plan

Identify an element of this training that you want to put into practice to enhance your ability to support parents in the FGP process. For example: "Learn how to help parents identify hopes and dreams that motivate them." Then identify action steps that can help you realize your goal. For example, your actions might include items like:

1. Come up with a list of open-ended questions to use to encourage parents to identify their hopes, dreams and goals. Ask co-workers for input.
2. Role play with my supervisor to identify which questions are most effective.
3. Try out these questions with families, noting which questions work best, and fine tune my list of questions.

Finally, note your target date to follow through with each action step, as well as the date of completion.

Action Steps	Target Date	Completion Date
1)		
2)		
3)		
4)		



Supervision Follow-Up.

Together with your supervisor, review your ratings on the “Before the Webinar” chart, your “After the webinar” takeaways and questions, and your Training Goal Plan. Discuss how your supervisor can help you successfully complete your Training Goal Plan, identifying any resources or support you may need.

Additional Questions to Discuss in Supervision.

The FSS and Supervisor can also select questions from the following list to further explore the webinar content. Choose the questions that are most relevant and of interest for you:

- *What is your personal experience with goal setting?*
- *When have you been successful in setting goals for yourself?*
- *When have you been challenged in setting personal goals?*
- *How might your own experience with goals impact your work with families?*
- *What concepts or approaches presented do you agree with/disagree with?*
- *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 can help a family identify their hopes and dreams?*
- *The webinar emphasizes 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 can you put that into practice with families?*
- *As stated in the webinar, we limit the number of goals per FGP to one to support families with trauma histories. What is 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?*
- *How might you feel if a family does not achieve their goal?*

MODULE 2:

What is the Purpose of the FGP?

- **Empower families.** The FGP process empowers families by giving them the ability to shape their lives according to *their* own goals and dreams. This process helps to put families “in the driver’s seat” of their lives, supporting families in finding their own motivations to make positive changes.
- **Building Planning Skills.** Goal setting is a learned skill. Parents we serve may not know how to identify, pursue, or achieve a goal because they were never taught. Once they gain the ability to set goals and plan for the future, families can apply these skills long after we have left the home.
- **Building Solution-Focused Skills.** Parents we work with may be absorbed in their problems, and unable to see solutions or a pathway to positive change. We help parents recognize, build on, and engage their strengths as a means of positively shaping their lives. For instance, when a parent is confronted with a challenge we might ask them, “What’s worked in the past?” In this way, we invite them to recognize strengths they may already possess. Relatedly, a family’s goal does not need to address a problem; it can focus on enhancing something that is already going well.
- **Increase self-esteem by creating successes.** Brain research shows that even a “small” experience of success has the power to rewire the brain, building a parent’s self-esteem and self-confidence, and changing a parent’s self-perception. Therefore it’s not the size of the goal that matters, but rather the experience of success that is important.

The Purpose of the Family Goal Plan Is *Not*...

The goal of the FGP is *not* to fix the family.

We may be tempted to step into “fix it mode” as home visitors when:

1. We see a problem we believe the family *really* needs to confront.
2. The family presents us with a pressing problem or crisis.
3. The family is stressed, and in reaction, we get stressed too. In order to decrease our *own* anxiety, we try to fix the problem for the family.

When we are in “fix-it mode” we may give advice, tell the family what they should do, try to minimize the problem, tell the family it will all be OK, or try to lift the family’s mood by playing cheerleader. With regard to the FGP, we may try to persuade the family to create a goal that addresses the problem we think is most pressing. Rather than “fixing” the parent, we can take a strengths-based approach. Believing that the parent has the ability to address their own challenges and identify and achieve their own goals, we can *invite self-reflection rather than giving direction*.

In order to shift from “fix it mode” to the strengths-based approach, we can follow these steps:

1. Find our calm center, then

2. Help the parent do so

3. Approach the situation with a spirit of curiosity and exploration

4. Ask open-ended questions (see page 19) that gather more information and invite the parent to self-reflect and problem-solve

5. Finally, only *after* the parent has run out of ideas, and with the parent’s permission, we can offer suggestions

The Family Goal Plan: The Map and the Journey

Setting a goal is like embarking on a journey to a destination you have never visited before. The FGP is your map. But no map shows the exact terrain you will encounter along the way. Even a journey to your job or the store, can include surprises - roadblocks, detours, bad weather, and other obstacles. In the same way, the journey towards a goal does not follow a straight line.

In fact, the journey, with its unexpected challenges, *is more important than the destination*. Why? Because challenges offer opportunities for the family to learn, grow, and gain important life skills. With your help, when the family confronts an obstacle, they will acquire problem solving skills, build strengths, increase their resilience, and discover they are capable of identifying, pursuing, and achieving goals independently. Your role is to support the family through all of the twists and turns of the journey, helping them to navigate the “pot holes” and celebrate successes.




Questions to Discuss in Supervision.

- *If a family takes on the goal you want them to pursue, rather than their own, what will the family's level of motivation be? What is the likelihood that the family will pursue this goal?*
- *If the family completes your goal, who gets to experience success, you or the family?*
- *If the family looks to you as their problem solver and goal setter, how will they solve their problems after they leave the program? How will they independently identify and pursue their dreams after they leave the program?*
- *When home visitors avoid "fix-it" mode and follow a strengths-based approach, how does that benefit the family?*

The Strengths-based Approach

Being strengths-based as home visitors means we actively look for and listen for parental strengths, affirm and acknowledge these strengths to the parent, and help the parent build on them. Understanding that “what we give attention to tends to increase,” we avoid overfocusing on the parent’s challenges, but we don’t ignore them. Rather, we help the parent engage their strengths to effectively address their difficulties.

Often when parents are asked: “What are your strengths?” they reply “I don’t know.”



"What are your strengths?"

"I don't know."

We can help parents develop the ability to identify, value, and build their strengths by using such resources as ***Questions for Identifying Strengths and Resources*** and ***101 Family Strengths***, both located in the Appendix section of this guide, starting on page 40.

Activity: When You Were Considering A Change...

When you were considering a change in your own life, what did people do or say that was helpful? What did people do or say that was *not* helpful? List 5 or more items in each column below.

Helpful	Not Helpful



Questions to Discuss in Supervision:

- *Review your helpful/not helpful lists with your supervisor.*
- *How did you feel towards the people who were helpful? How did your experience impact your relationship with them?*
- *How did you feel towards the people who were unhelpful? How did your experience impact your relationship with them?*
- *Have you engaged families in a manner that you identified on your above list as unhelpful? Most of us have at some point! What was the result?*
- *Have you engaged families in a manner that you identified on your above list as helpful? How did this impact your relationship with the family? What told you this approach was working?*
- *How can you put any insights you have gained from this exercise into practice in your work with families? What might you do differently?*

MODULE 3:

Potential Obstacles to Goal Setting

Change can be anxiety producing for anyone. It can be especially challenging for some parents to pursue goals due to their trauma histories and personal circumstances. Obstacles that may emerge during the FGP process include:

Fear of failure: parents may have experienced failure and a lack of support when pursuing goals previously, and may fear failing again if they pursue a goal.

Lack of trust: Due to being let down or betrayed in the past, parents may be reluctant to trust you enough to work together on a goal.

Past negative experiences: Parents may have had difficult experiences with service providers in the past, negatively impacting their willingness to set goals with you.

Hopelessness: Due to having few or no experiences of success, parents may feel little hope that they can achieve their goals and dreams.

Pride: Parents may feel that they should be able to “pull themselves up by their bootstraps” and set and achieve a goal on their own - without any help from you.

Parents value spontaneity: Parents may feel hemmed in by following a set plan, and may wish to “keep things open.”

Parents are comfortable in crisis/emergency mode: Living in chaos may be familiar, and therefore comfortable, for some parents, causing them to resist making changes.

Fear of commitment: Parents may feel that if they commit to a goal and fail, they risk rejection, criticism, or punishment.

Fear of writing it down: Writing down a goal brings clarity and represents a commitment. Parents who are reluctant to set goals may resist writing down their goals for this reason.

Developmental or other mental challenge(s): Parents with cognitive disabilities and mental health issues may have difficulty grasping and/or following through with the goal setting process.

Fear of change: Some parents may prefer living in a “known” situation, even if difficult, rather than face unknown difficulties that change could potentially bring.

Cultural attitudes: Attitudes or ideas about goal setting in different cultures could pose challenges to discussions about or willingness to pursue goals.



Tools to Support the Change Process

In addition to using the strengths-based approach in general, the following tools and approaches can help you build trust with parents, keep their resistance to change low, and create clear and achievable goals that give parents the experience of success.

- **The FGP & Steps to a Nurturing Relationship**
- **The Stages of Change**
- **OARS**
- **The Scaling Tool**
- **3MMM'S**
- **Additional Resources**



The FGP & Steps to a Nurturing Relationship

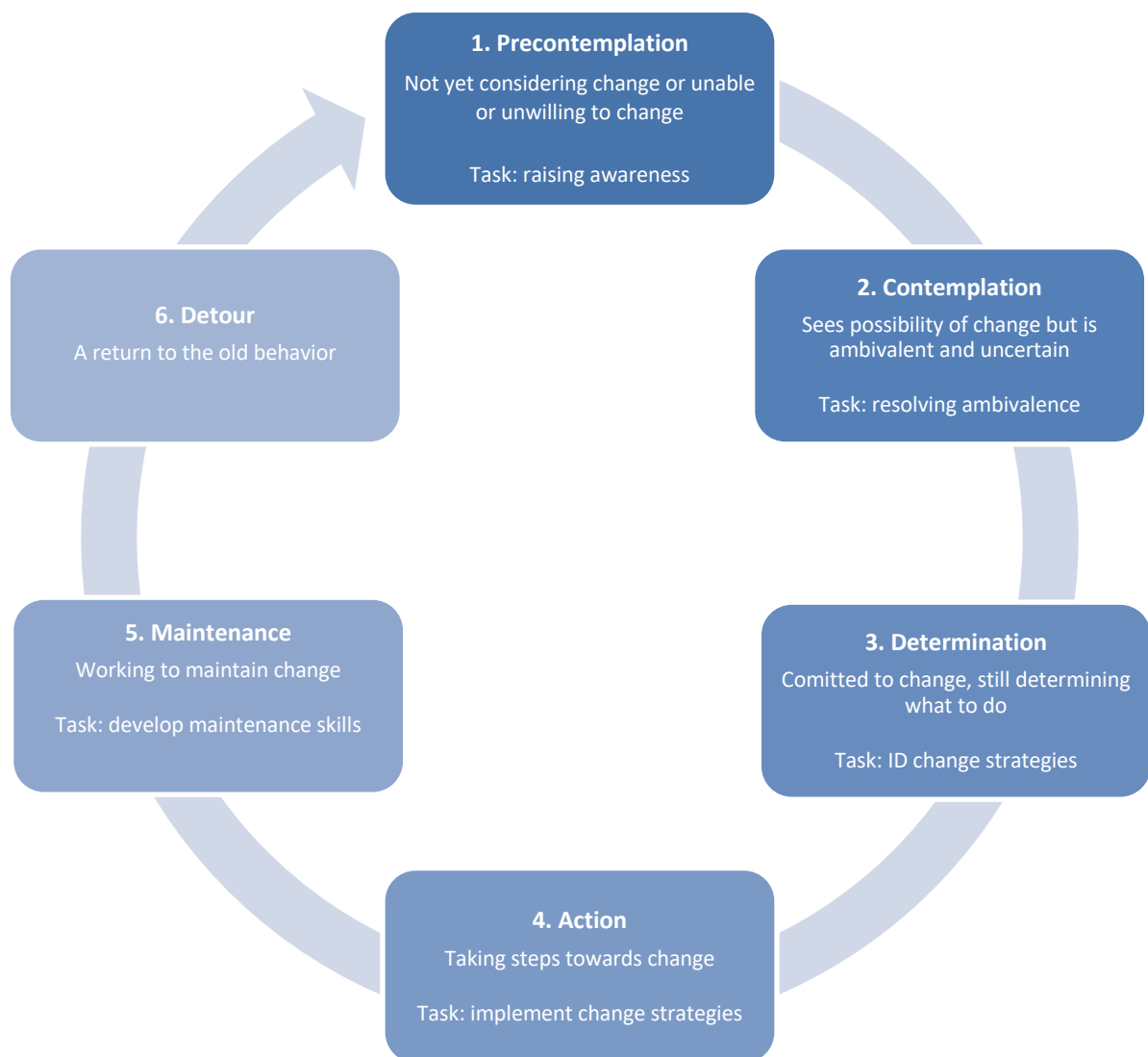
Adapted from Dr. Victor Bernstein, University of Chicago

1. **Orientation:** Defining roles, expectations, and boundaries. The family's role is to define their goal and take the necessary actions to achieve it. As the FSS, you support the process by offering encouragement and resources. You do not dictate the goal or take actions the family needs to pursue for themselves.
2. **Acceptance:** Unacceptable vs. Disagreeable. If a parent sets a goal that is concerning to you, it is important to discern whether that goal is unacceptable (against the law, or potentially harmful) or disagreeable (goes against your personal values and/or priorities). For example, if a parent's goal is to get a tattoo, you may find this disagreeable because they seem to have more pressing needs. ** if "unacceptable", our role is to do something about it (i.e., talk to our supervisor right away and make a plan) and if something is "disagreeable" our role is to keep it discussable.*
3. **Understanding:** Finding ways to understand the parent's perspective and sharing our expertise. Using the example above, by exploring with curiosity what makes the goal important for the parent, you may discover that they want a tattoo of their baby's name to demonstrate their commitment to their child. In reality, any goal that is meaningful for the parent (and does not endanger themselves, the baby, or others) provides opportunities for them to learn and gain skills. At this point, you might check in with the parent to see if they are interested in receiving information on health and hygiene related to tattoos.
4. **Agreement:** Where do we go from here; developing common objectives. Next, you and the family identify follow-up steps for both parties. For example, a parent may need to gain skills and knowledge related to budgeting and researching options in order to pursue the goal. You may identify related resources for the parent.
5. **Accountability:** Doing what you say you'll do and "carrying them in mind." Finally, you follow through with your commitments in support of the family and their goal, and hold them and their interests in mind outside the home visit. For example, "I came across this booklet. It seemed like a perfect fit to support your goal, so I brought it along."



The Stages of Change

Projansky and DeClemente developed a model that helps us understand how people change, and how we can best support their change process. When we attempt to *persuade* a parent to make a change, we may actually increase the parent's resistance to change. For instance, if a parent is in the Precontemplation stage (not yet considering a change or seeing a need for it) and we provide them with resources regarding *how* to make that change or attempt to *persuade* them to change, the parent's resistance to change may actually increase. Instead, we can first determine what stage of change the parent is in (using the Scaling Tool introduced below), then meet them "where they are."





OARS

We can reduce a parent's resistance to change, help them tap their innate sense of motivation, and build a trusting relationship with them by using OARS communication skills, an essential aspect of any goal setting conversation. OARS stands for:

Open-ended questions are questions that cannot be answered with a simple "Yes" or "No." They invite the person questioned to self-reflect, problem-solve, and share their perspective, and help to increase that person's independence and autonomy. OEQs typically begin with "What?" "How?" or "Tell me more." Examples include: "What are you looking for in a new apartment?" "How did you feel when you heard that you didn't get the job?" "Tell me about your class."

Affirmation means offering parents supportive, praising statements that recognize and validate their strengths, skills, and effort. The more specific these statements are, the more valuable they are for the parent. Some potential examples: "Keeping a list helped you make sure that you completed all of your actions. Great job!" "Wow. You spoke with real confidence just then."

Reflection refers to repeating back what you heard a parent say with empathy and interest. Reflection shows that you are listening, helps the parent feel heard, clarifies that your understanding is accurate, and encourages the parent to share more. Here are some examples: "It sounds like you're feeling frustrated with the situation." "So you're really ready to move ahead with buying a car."

Summarizing means "summing up" the conversation by periodically linking together what you have discussed. This captures the important points covered, helps the parent move forward in their thinking, and creates an opportunity to discuss next steps. Examples include: "So a year ago you didn't have the confidence to go back to school, but now you feel ready to take the first step and apply." "You're ready to go back to work, but you feel like Baby isn't ready."

OARS Activity: Role Play

1. Ask your supervisor or a co-worker to identify a personal goal that they would be willing to discuss with you.
2. Use *only* OARS skills to facilitate them in a conversation about their goal, maintaining neutrality and refraining from giving advice, suggestions, or solutions of any kind (as discussed on page 10).



Questions to Discuss in Supervision:

- *What was it like to limit yourself to OARS skills in this conversation? What went well? What was challenging?*
- *How did your partner respond to your use of OARS skills?*
- *Based on your experience in this role play, what are the potential benefits of using OARS skills, especially during a goal setting conversation?*



The Scaling Tool

The scaling tool (provided on pages 22 & 23) makes measurable the importance of a goal to an individual and their level of confidence that they can actually achieve it. This tool also indicates a person's readiness to pursue a goal. By knowing where a parent stands on each of these scales, you can better identify and address possible obstacles, and help them experience success.

Activity:

1. Choose something in your life that you would like to change and are willing to discuss with a role play partner.
2. Complete the scaling tool on the next page (both the importance and confidence rulers) related to making this change.
3. Ask your supervisor or a co-worker familiar to act as the FSS and facilitate a discussion of your results using the questions under the headings "Importance" and "Confidence."
4. Switch roles. Ask your partner to complete the Importance and Confidence scales on the second sheet provided. Now you role play as the FSS and facilitate a discussion using the questions supplied.



Scaling Tool

Importance Ruler. On a scale of 1 to 10, where 1 means “it isn’t important at all” and 10 means it is “extremely important,” where would you place the importance of making this change?

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

Confidence Ruler. On a scale of 1 to 10, where 1 means “not at all comfortable or prepared to make this change” and 10 means “totally comfortable and prepared to make this change,” where would you place yourself?

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

Importance:

For higher scores (6-10): What makes this change important for you? What makes your score a ____ (actual score) and not a ____ (two points lower)?

For lower scores (1-5): What makes pursuing this change less important for you? What would have to happen for the importance to be at a ____ (two or more higher)?

Confidence:

For higher scores (6-10): What gives you confidence in your ability to make this change and comfortable with it? What makes your score a ____ (actual score) and not a ____ (two points lower)?

For lower scores (1-5): What makes you less confident in your ability to make this change or uncomfortable with making this change? What would have to happen for your confidence and comfort level to be a ____ (two or more points higher)?



Scaling Tool

Importance Ruler. On a scale of 1 to 10, where 1 means “it isn’t important at all” and 10 means it is “extremely important,” where would you place the importance of making this change?

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

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For lower scores (1-5): What makes you less confident in your ability to make this change or uncomfortable with making this change? What would have to happen for your confidence and comfort level to be a ____ (two or more points higher)?



Questions to Explore in Supervision: The Scaling Tool

- *What was it like to use the scaling tool to support your own change process? How did it help to have your role play partner facilitate the process?*
- *What was it like to facilitate your partner in using the scaling tool? What went well? What might you do differently?*
- *If a goal is important to a parent but they lack the confidence that they can achieve it, how likely are they to succeed?*
- *If the goal is unimportant to the parent, but they are confident that they can achieve the goal, how motivated will they be to pursue that goal, even if they know they can achieve it?*

Tip:

In order for parents to experience success a goal must be:

- 1) important to them, and*
- 2) they must be confident that they can achieve it.*

If they lack confidence, you as their home visitor can help them increase their confidence by providing opportunities to address barriers and gain the skills they need to succeed.



The 3 MMM'S: A Goal Setting Formula

The 3MMM'S is an approach that breaks goals down into manageable and achievable steps so that parents can experience success and feel empowered. You can use this formula with parents to help them identify their goal, strategize action steps towards achieving it, and identify a support person. 3MMM'S stands for:

Mission: What specifically do you as a parent want to accomplish?

Mini: Make each step small and achievable in a short period of time.

Measure: How will you measure your success?

Support: Find someone to support you and keep you focused on the strengths that will help you accomplish your mission.

Next, let's look at each of these aspects in detail.

Mission: What specifically do you as a parent want to accomplish?

What does the family want for themselves? Where do they want to go?

When the “mission” or goal is *specific*, the family will know when and if they have achieved it. For instance, a goal like “Find a nicer home” is vague, whereas “Move to a new 3 bedroom apartment with a yard near the kids’ school by August 1st” is specific, and gives a clear sense of exactly what the family wants to achieve, and when.

Mini: Make each step small and achievable in a short period of time

Pursuing a goal can feel overwhelming. By breaking the goal down into smaller, more manageable steps, the family can work towards it gradually, and build confidence as they experience progress and success. Following the example above, smaller steps might include:

1. Determine how much rent we can afford
2. Identify apartment buildings near the kids’ school
3. Budget \$100/month towards the security deposit

Measure: How will you measure your success?

In this case of our example, the family has made their goal and action steps measurable by including a clear time frame (August 1st), financial figures (saving \$100/month), and other specifics (3 bedrooms and a yard), all of which will indicate whether they have or have not achieved their goal.

Support: Find someone to support you and keep you focused on the strengths that will help you accomplish your mission.

Families confront obstacles in the process of working towards an important goal. By identifying a friend or family member who can cheer them on, families can help to insure their own success.



Additional Resources to Support the FGP Process

Assessments

In addition to the Parent Survey, assessments such as the ASQ, ASQ-SE and PHQ-9 can offer information that suggests potential goals for the family. For example, if ASQ results show that their child needs support with an area of his or her development, the parent(s) may identify this as a goal they want to work on. Likewise, if the PHQ-9 identifies concerns related to depression, a parent may wish to address this through the FGP process.

Values Cards

Located in the Foundations for Family Support core training manual, the Values Cards activity can help parents understand what is important to them. They can then use this knowledge to help them pinpoint their goal.

What I'd Like for My Child worksheet

Available in the Appendix of this guide, this worksheet helps parents identify their wishes and dreams for their child, factors that strongly motivate parents and can easily translate into goals.

Strengths identifying resources

By adopting a strengths-based perspective about themselves, parents build their resilience and their ability to follow through with goals when the going gets tough. First, parents may need assistance with identifying their own strengths. Located in the Appendix, the following resources can help: “101 Family Strengths,” and “Questions for Identifying Strengths and Resources.”

MODULE 4:

Basic Family Goal Plan 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 observing for potential strengths and challenges which may inform the parent's goal setting, and are responsible for reviewing each FGP form and "signing off" on it when it is completed.
- Parents with trauma histories may struggle with pursuing even one goal. To help them experience 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 initial FGP is completed within **90 days** of the family's intake. Whenever the family completes a goal, the FSS supports the family in developing a new goal.
- Discussing goals with a family is an opportunity to learn about what is important to them, show your interest in their values and dreams, and build trust and connection. For this reason, conversations about family goals should occur over the course of 2-3 home visits before recording information on the MIS form.
- By discussing the FGP frequently with the family (generally at each home visit), the FSS shows the family that their goals are important to the FSS. In the same way, the FGP is generally a part of each in-depth family discussion in supervision.
- One copy of the FGP goes to the family, and copies are kept in the family file (if the program has a "hard copy" file) and in the supervision binder. Carrying a copy in the folder you take for visits makes it available for ongoing discussions with the family (in case they lose their copy).

The FGP Form

After 2-3 home visits in which you discuss the family's goals, you can work together with the family to write out their goals. The first page of the FGP paper form is to be completed with the family and uploaded to the Case Documents section of the family's MIS case file so that it is housed together with the FGP. You are not required to re-do the first of FGP paper form each time the family initiates a new goal. However, periodically reviewing this page with the family, or revisiting it when it seems relevant (for instance, the family's vision for their future has changed), is good practice. If your program works with "hard-copy" case files, this document can be stored in the family's file if your program prefers. All information from the additional pages of the old FGP paper form has now migrated to MIS and must be entered there. However, you can use paper copies of the goals pages from the "old form" as worksheets to capture information as you discuss goals with families – or a blank piece of paper, or standardized worksheet designated by your program.

For instructions on how to enter the FGP into the MIS:

1. Click on this link: <https://www.healthyfamiliesnewyork.org/Staff/FSW.htm>
2. Under the heading "HFNY Family Goal Plan/Individual Family Service Plan Forms," click on "HFNY Family Goal Plan Instruction Guide."
3. For any questions related to entering or uploading FGP information to the MIS, please submit a support ticket via the MIS or contact the Tech Help Desk at 518-591-8610

In the addendum attachment provided (and on the staff section of the HFNY website), is the previous paper version of the FGP along with in-depth instructions for filling out the content of the form. These content instructions also apply to the MIS version of the form.

The previous paper version of the FGP and in-depth instructions for filling out the content of the MIS form are available on the HFNY website under HFNY Network / HFNY Worker Roles / then selecting "FSS".

The FGP Section of the Home Visit Narrative

Once the FGP is launched within the home visit narrative, a section for documenting the status of the family's FGP appears at the bottom of the FGP tab for each subsequent home visit narrative (see below). After each home visit you conduct with the family, simply check the box or boxes that apply. Because the FGP consists of goals that are important to the family, it is vital that you honor this by touching base with the family on the FGP at every home visit. For this reason, instances where you check off “not discussed” should be rare.

The screenshot shows a web-based form for a home visit narrative. At the top, there is a navigation bar with several tabs: 'Visit Information', 'CHEERS/...', 'Parent-Child...', 'Health of TC...', 'Family Functioning/...', 'Concrete Activities/...', and 'Program Activities/...'. Below this, there is a sub-navigation bar with three tabs: 'Family Goal Plan/...', 'Parents' Response/...', and 'MIECHV Only'. The 'Family Goal Plan/...' tab is currently selected. The main content area is titled 'Family Goal Plan (check all that apply)'. It contains a list of checkboxes with corresponding labels: 'New goal developed' (checked), 'Discuss', 'Develop activities and/or identify resources related to the family's goal(s)', 'Progress', 'Revisions', 'Goal(s) completed', and 'No discussion'. Below this list is a large, empty text input box. Further down, there is a section titled 'Transition Plan (check all that apply)' with a list of checkboxes: 'Not applicable', 'Initiated', 'Ongoing discussion', 'Plan finalized', 'Transition completed', and 'Parent declined'.

Family Goal Plan (check all that apply) SECTION:

New goal developed: Identify and describe any new goals developed by the family.

Discuss: Include a brief description of family goals addressed during the visit.

Develop activities/identify resources: Describe any activities or resources you provided to the family to support the goal setting process, such as HFA's "Values Cards" or "What I Want for My Child" worksheet.

Progress: Describe the family's progress as they pursue their goals and any successes and challenges. Include your efforts to build the parent's confidence and competence, help them learn from the process of goal setting, and encourage them to celebrate successes.

Revisions: Describe any changes made to the goal plan and how you responded to naturally occurring situations, i.e. 'teachable moments'.

Goal(s) completed: Identify any goals completed by the family.

No Discussion: Describe the reason why there was no discussion.

The Service Plan & the Family Goal Plan: How are they different?

The Service Plan is a planning tool you and your Supervisor use to:

- Identify Protective Factors, strengths and risk factors for the family based on their Parent Survey
- Develop strategies for addressing these risk factors and optimizing Protective Factors
- Track progress towards successfully addressing these risk factors

The Service Plan is the *program's* plan to address risk factors identified in the Parent Survey, and is not shared with the parent(s).

As discussed in the webinar, the Family Goal Plan is the *family's* plan for change based on *their* wishes, hopes, dreams, and goals - not the program's plan, as captured in the Service Plan. Programs should not attempt to convince the family to pursue a goal that would address risk factors targeted by the Service Plan. However, it may happen that families choose *of their own accord* to make changes that align with the objectives of the program's Service Plan.

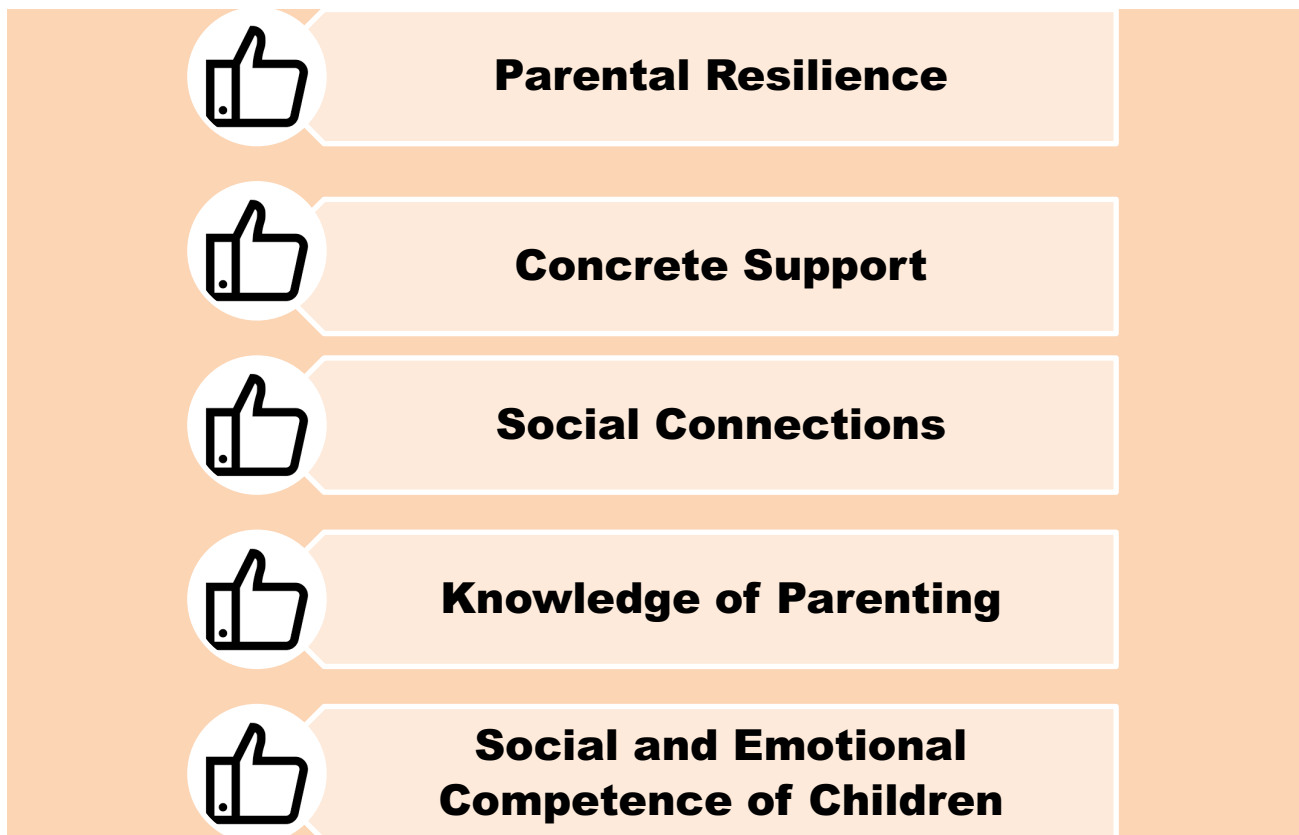
Both the Service Plan and the FGP take guidance from the Parent Survey. However, where the Service Plan is *based on* the Parent Survey, the FGP process is *informed by* the Parent Survey. Regarding the FGP, instances in the Parent Survey in which the *parent* expresses displeasure with their situation ("I really hate this apartment"), a need ("I don't have the supplies I need for the baby"), an aspiration ("I really want to go to college"), or identifies a skill they possess ("I'm really good at drawing") may point to a goal the parent wants to pursue. Further exploration with the parent will determine this.

Using the Parent Survey to Inform the FGP Process

The Parent Survey is used as a tool for gathering information and identifying potential strengths, Protective Factors, and challenges which *may* inform the family's goal setting. A primary goal of HFA is to enhance family functioning by **reducing risk and building Protective Factors**.

We know from research that strengthening Protective Factors can mitigate the effects of Adverse childhood experiences (ACES).

The Protective Factors are:



Any goal the parent sets will likely build Protective Factors. For instance, a parent with a goal of meeting other parents in her neighborhood would build the Protective Factor of Social Connection. *For more information: ***FIVE PROTECTIVE FACTORS*** and ***RECOGNIZING THE FIVE PROTECTIVE FACTORS*** are both located in the Appendix section of this guide, starting on page 45.

***Read through this section, then discuss it in supervision using the questions on Page 34.**

Parent Survey Sample

As a guide to practice, below is a sample of the “Current Stresses” section of the Parent Survey with potential parental strengths, protective factors, and challenges highlighted.

Please note: highlighted areas could require additional information gathering from the family to insure accuracy in the identification of strengths, protective factors and/or challenges.

KEY: Green Highlight = Potential Protective Factors/Strengths Yellow Highlight = Potential Risk Factors/Challenges

5. CURRENT STRESSES

(Score & rating scale letters) **M:** **D:**

Strengths/Protective Factors (Might include: Positive methods and techniques parents feel they use

control stress and de-stress, etc.)

Mom said that Dad and she have been together for about 1½ years. Mom said that they have been living together for about a year. Mom said that they get along well. Mom said that all their days were good. Mom said that she couldn't describe a bad day.

Parental Resilience ____ Social Connections ____ Knowledge of Parenting & Child Development
Concrete Support in Times of Need ____ Children's Social & Emotional Competence

M: Mom said that they are almost never angry at each other and that because of Dad's personality she doesn't need to get angry at him. Mom said that she never met such a good person like Dad. Mom said that they don't socialize and that they are always together as a couple cuddling each other. Mom said that they have been living in that apartment for about 7 months. Mom said that they were living in Smithville before and that they both decided to get their own place. Mom didn't disclose how many months they lived in the other apartment. Mom said that the apartment is big enough for her but the financial situation is really stressful for her. Mom said that she has nothing for the baby, like crib, clothes, and that she knows finances are not going to look better. Mom said that she is receiving WIC and that her Medicaid is pending. Mom said that she was denied for Food Stamps because Dad's unemployment was too high to be eligible for food stamps. Mom said that they run out of food a lot of times. Mom said that sometimes they have no money to do laundry. FRS didn't ask who handles finances. Mom said that she doesn't know what it is going to look like when the baby comes because money is tight. Mom said that she did not have any other concerns.

Detail reason area was not covered:

- Relationship between baby's parents:

D: Mom said that she thinks that finances are also stressful for Dad. Mom didn't share anything else about Dad.

Detail reason area was not covered:

- Relationship between baby's parents:



Questions to Discuss in Supervision:

- *Based on the parent's statements, where might they wish to see, or want to make, a change? Of these, which seems like the most pressing situation for them?*
- *What strengths and Protective Factors might the parents use to help them address these challenges through goal setting?*

(Answer key on the next page)

Answer Key

- Based on Mom's statements, the parents' most pressing stressors appear to be lack of money, and relatedly, lack of baby supplies and food. These needs have strong potential to be goals the parents may want to pursue. Further discussion with the parent is needed to determine their actual goals.
- Mom took the initiative to pursue WIC and Medicaid, indicating strengths in the area of taking action to address their situation. This suggests that Mom may follow through with additional actions with your support. Mom and Dad appear to be committed to one another and may work together to address the situation. Dad was employed previously, suggesting that he may be able to obtain another job to help address their financial needs.

MODULE 5:

Introducing The Family Goal Plan to the Family

How you introduce the concept of the FGP to the family sets the tone for your work together and influences the family's experience of goal setting. The elements below can help you create a positive and productive foundation for the FGP process.

- Create clear expectations regarding roles. For instance, the family chooses a goal based on their wishes and needs, not the FSS's preferences or agenda. The family, not the FSS, pursues actions to achieve the goal, while the FSS offers resources, support, and encouragement along the way.
- Use words like "dreams," "hopes," "wishes," "vision for the future" when talking about goals with family. These terms help to tap the inspiration and motivation for the family, and avoid the anxiety and pressure some families associate with the word "goal." For example, you may introduce the FGP process as "a way to achieve your vision for the future."
- Note that obstacles do arise as we pursue goals. Part of your role is to help the family recognize potential challenges that may emerge, identify people and resources that can help, and support them through any barriers that arise.
- Emphasize that your role includes "setting them up for success" by helping the family identify short-term, achievable actions they can take towards their goals.
- Talk about the many benefits of experiencing success with goal setting, including enhanced self-esteem, increased self-confidence, and positive self-perception.
- Note that by celebrating successes, both big and small, as the family progresses in the FGP process keeps their motivation high and enhances their belief that "they can do it."

Putting it All Together: FGP Development in 12 Steps

Wow! You have covered a lot of ground in this self-guided training! Now is the time to gather together all of the skills and tools you have been learning and put them to work with a family. To do so, complete the following steps.



With your Supervisor:

1. *Review a family's Parent Survey and identify potential strengths, Protective Factors, and challenges that suggest goals the family might choose to pursue.*
2. *Note the items that relate to the Service Plan you will discuss and create in supervision.*
3. *Note which items may need further exploration with the family to determine whether they relate to the family's goals (following the guidelines on Page 31).*
4. *Discuss how you can use this information to inform your goal planning conversations with the family.*



With the Family **over the course of 2-3 visits:**

5. Explore strengths and challenges with the family using OARS skills.
6. Explore and identify a goal. Remember: invite reflection rather than giving direction.
7. Use the 3MMM'S approach to help the family identify action steps towards achieving their goal.
8. Facilitate the family in designating a target date for completion of the goal.
9. Guide the family in identifying strengths they have that can support them in achieving their goal. Use the strengths resources provided in the Appendix if needed.
10. Help the family identify support systems, resources, and referrals that can assure their success.
11. Together with the family, capture your discussion (using the previous paper form, your own notes, or a standardized worksheet designated by your program) for entry into the MIS.
12. Conduct ongoing conversations to support the goal setting process and document in the FGP section of the Home Visit narrative.

Wrapping up

The final step in this training is to revisit, along with your supervisor, the Training Goal Plan that you set for yourself at the outset. Were you able to to complete each of the action steps you listed? If not, what additional steps do you need to take in order to complete your plan? Once you have completed those steps -

Congratulations! You have now completed the In-house Family Goal Plan training.



Remember, just as you celebrate a family's successes as they pursue their goals, it's important to honor *your* successes too. How will you recognize your achievement? The PCANY Training team celebrates your good work. Well done!

Post Training Evaluation

We hope that this training provided a valuable and enjoyable experience for you, and that you gained the knowledge you need to begin supporting families in pursuing their goals.

We strive to continually improve this training, and your feedback is a vital part of that effort. Please take a moment to complete the post training evaluation via the link below.

<https://www.surveymonkey.com/r/KCTTSLQ>

Thank you!

The PCANY Training Team

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APPENDIX

WHAT I'D LIKE FOR MY CHILD	PAGE 41
QUESTIONS for IDENTIFYING STRENGTHS and RESOURCES	PAGE 42
FGP WORKSHEET: Things I want for myself and my family	PAGE 43
101 FAMILY STRENGTHS	PAGE 44
PROTECTIVE FACTORS	PAGE 45
RECOGNIZING THE FIVE PROTECTIVE FACTORS	PAGE 46

WHAT I'D LIKE FOR MY CHILD

1. What characteristics would you like your child to develop? Choose four from the following list. Rank them from 1 to 4 with #1 being the most important characteristic.

- ___ Happy
- ___ Pretty
- ___ Curious
- ___ Feminine or Dainty
- ___ Neat or Tidy
- ___ Respectful
- ___ Cooperative
- ___ Independent
- ___ Like by Others
- ___ Well-behaved
- ___ Obedient
- ___ A Leader
- ___ Polite
- ___ Quiet or Reserved
- ___ Tough
- ___ Smart
- ___ Handsome
- ___ Friendly
- ___ Musical
- ___ A Follower
- ___ Healthy
- ___ Strong
- ___ Verbal or Talkative
- ___ Creative

2. What do you think you can do with your child now to help him/her develop these characteristics?

3. What can you imagine giving or teaching your child?

QUESTIONS for IDENTIFYING STRENGTHS and RESOURCES

- Who has been the most helpful and supportive during difficult times?
- What do you think your family does better than anyone else?
- When are you most proud of your family?
- When was a time when you or your family met your child's needs?
- When was a time when you or your family met your family's needs?
- Who can you rely on?
- What do you need in order to achieve your dreams and goals?
- What do you already have that will help you achieve your dreams and goals?
- Can you name three things that have helped you achieve goals in the past?
- What is one thing in your life right now that you would like to have stay just the way it is?

FGP WORKSHEET: Things I want for myself and my family

- ___ Information about babies
- ___ Preparing my children for school
- ___ Keeping up with my child's immunization and medical care
- ___ Toy lending library
- ___ How to calm a crying baby
- ___ Basic infant care
- ___ Seeing/meeting my baby's needs
- ___ Activities to encourage my baby's (child's) development
- ___ Children's books
- ___ How to teach my children to respect others and learn "right" from "wrong"
- ___ Couple/relationship problems
- ___ How to set limits with my children; how to say "no" and stick with it
- ___ Support, someone to talk to
- ___ Disciplining my children
- ___ Assistance in coordinating getting to and from health care
- ___ Getting out of the house with the children
- ___ Building my confidence as a parent
- ___ Domestic/family violence
- ___ Family planning; birth control
- ___ Feeling better about myself
- ___ Help solving family problems
- ___ Transportation
- ___ Learn to manage time, stress or anger
- ___ Managing my household
- ___ Parent support and activity groups and outings
- ___ Community support (church, friends)
- ___ Personal problems
- ___ Assistance with drug or alcohol problems

- ___ Referrals to community and medical services such as:
 - * Financial assistance
 - * Medical assistance
 - * Housing assistance
 - * Food Stamps
 - * WIC
 - * Education (GED, college)
 - * Employment * Counseling * Recreation
 - * Respite childcare
 - * Preschool
 - * Head Start/Early Head Start
 - * Health care
 - * Immunizations
 - * Reading/literacy

101 FAMILY STRENGTHS

- | | | | |
|-----|----------------------------------|------|--------------------------------|
| 1. | ORGANIZING SKILLS | 51. | PERSONAL GROOMING SKILLS |
| 2. | WARM AND LOVING | 52. | PLAY WITH CHILDREN |
| 3. | FINANCIAL STABILITY | 53. | SING AND DANCE |
| 4. | STABLE HOUSING | 54. | FEEL IN CONTROL |
| 5. | FRIENDS WHO CAN BE COUNTED ON | 55. | NUTRITION |
| 6. | FAMILY WHO CAN BE COUNTED ON | 56. | EXERCISE TOGETHER |
| 7. | SENSE OF HUMOR | 57. | SAFE HOUSEHOLD |
| 8. | DESIRE TO BE A TERRIFIC PARENT | 58. | HUGS AND AFFECTION |
| 9. | EDUCATION | 59. | KNOWLEDGE OF FIRE SAFETY |
| 10. | EMPLOYMENT | 60. | FIRE/EMERGENCY ESCAPE PLAN |
| 11. | GOOD COMMUNICATION SKILLS | 61. | INTERESTED IN CHILD'S LEARNING |
| 12. | RESPECT FOR EACH OTHER | 62. | SUPPORTIVE OF CHILD'S LEARNING |
| 13. | GOOD AT READING CHILD'S CUES | 63. | ABILITY TO COUNT ON EACH OTHER |
| 14. | INTERESTED IN LEARNING | 64. | PATIENCE |
| 15. | COOKING SKILLS | 65. | ANGER MANAGEMENT SKILLS |
| 16. | LIKES TO LEARN | 66. | FINANCIAL MANAGEMENT |
| 17. | CREATIVE | 67. | SAVINGS |
| 18. | LEVEL-HEADED | 68. | HOUSEHOLD PLANTS |
| 19. | GOOD AT PLANNING | 69. | HEALTHY DIET |
| 20. | WANTS THE BEST FOR BABY | 70. | CHILDPROOFED HOUSE |
| 21. | WANTS THE VERY BEST FOR CHILDREN | 71. | QUIT SMOKING |
| 22. | WANTS THE VERY BEST FOR CHILD | 72. | TRIES TO QUIT SMOKING |
| 23. | HOUSEKEEPING SKILLS | 73. | HEALTHY LIFESTYLE |
| 24. | COMPLETED HIGH SCHOOL | 74. | TALKS TO CHILDREN |
| 25. | IN COLLEGE | 75. | BILINGUAL |
| 26. | RELIGIOUS FAITH | 76. | BICULTURAL |
| 27. | CHURCH/TEMPLE/MOSQUE... | 77. | TOYS |
| 28. | POSITIVE OUTLOOK | 78. | BEDTIME ROUTINES |
| 29. | REALISTIC OUTLOOK | 79. | BREASTFEEDING |
| 30. | KNOWLEDGE OF CHILD DEVELOPMENT | 80. | FOOD STAMPS |
| 31. | AUTO MAINTENANCE SKILLS | 81. | HEAT IN WINTER |
| 32. | AUTO REPAIR SKILLS | 82. | PHONE SERVICE |
| 33. | HOME MAINTENANCE/ REPAIR SKILLS | 83. | POLITNESS |
| 34. | SEWING AND MENDING | 84. | HAPPY |
| 35. | CARPENTRY | 85. | ATHLETIC |
| 36. | WASHING MACHINE | 86. | ARTISTIC |
| 37. | GOOD AT MAKING FRIENDS | 87. | ADVOCACY SKILLS |
| 38. | GOOD AT KEEPING FRIENDS | 88. | PROBLEM-SOLVING SKILLS |
| 39. | FAMILY ROUTINES | 89. | HAS FUN |
| 40. | ALWAYS ON TIME | 90. | LAUGHTER |
| 41. | READING TO KIDS | 91. | DRIVER'S LICENSE |
| 42. | SENSITIVE TO KIDS' NEEDS | 92. | KNOWLEDGE OF FIRST AID OR CPR |
| 43. | GOOD AT SELF-CARE | 93. | PARENTING CLASSES |
| 44. | CONSIDERATE OF OTHERS | 94. | GED |
| 45. | ASSERTIVE | 95. | TEACH CHILD ABOUT SAFETY |
| 46. | HEALTHY PARENTS | 96. | SAFE BAYSITTERS/CAREGIVERS |
| 47. | HEALTHY CHILD | 97. | CONFIDENT |
| 48. | CARE FOR FAMILY PETS | 98. | NURTURING |
| 49. | MAKE REGULAR DOCTOR APPOINTMENTS | 99. | LISTEN TO CHILD |
| 50. | KEEP DOCTOR APPOINTMENTS | 100. | RESPONSIVE |
| | | 101. | MAKE TIME FOR FAMILY |

FIVE PROTECTIVE FACTORS

1

PARENTAL RESILIENCE

Parents have resilience – the ability to manage and bounce back from all types of challenges that emerge in their family’s life. They find ways to solve problems, build and sustain trusting relationships including relationships with their own child, and know how to seek help when necessary.

2

SOCIAL CONNECTIONS

Parents are connected to family members, friends, neighbors, and community members for emotional support, help with solving problems, for parenting advice and concrete assistance. Within their networks of support, parents have opportunities to “give back” – an important part of self-esteem as well as a benefit for the community.

3

KNOWLEDGE OF PARENTING AND CHILD DEVELOPMENT

Parents have accurate information about child development and appropriate expectations for their child’s behavior at every age. They see children and youth in a positive light and promote their child’s healthy development.

4

CONCRETE SUPPORT IN TIMES OF NEED – RESOURCEFULNESS Parents have resources to meet basic economic needs like food, shelter, clothing and health care – essential for their family to thrive. When parents encounter a crisis such as domestic violence, mental illness or substance abuse, they have adequate services and supports in place to provide stability, treatment and help for family members to get through the crisis.

5

SOCIAL & EMOTIONAL COMPETENCE OF CHILDREN

Parents recognize and support their child’s ability to interact positively with others, self-regulate their behavior and effectively communicate their feelings; which positively impacts their child’s relationships with their family, other adults, and peers.

Source: The Center for the Study of Social Policy

Recognizing the Five Protective Factors

Parental Resilience

- Problem solving skills
- Ability to cope with stress
- Self-care strategies
- Help-seeking behavior
- Receiving mental health or substance abuse services if needed
- Not allowing stress to impact parenting

Social Connections

- Supportive relationships with one or more persons
- Can rely on their social network in times of need
- Willing and able to accept assistance from others
- Positive relationships with other parents of same-age kids
- Skills for establishing and maintaining social relationships
- Provides reciprocal social support to peers

Knowledge of Parenting and Child Development

- Understands and demonstrates age-appropriate parenting skills in their expectations, discipline, communication, protection, and supervision of child
- Maintains reliable sources for parenting information when issues come up
- Encourages social-emotional development and applies a range of age-appropriate disciplinary strategies
- Understands specific needs of child - especially if child has special developmental or behavioral needs

Concrete Support in Times of Need – Resourcefulness

- Buffers child from the stress caused by family's concrete needs
- Positive experiences with services in the past
- Accesses and utilizes services
- Personal behavior traits (e.g. punctual, organized, patient, etc.) allow for effective use of services
- Attempts to eliminate service-access barriers (e.g. transportation, literacy, etc.)

Social-Emotional Competence of Children

- Emotionally responsive to child
- Models empathy
- Sets clear expectations and limits (e.g. "People in our family don't hurt each other.")
- Separates emotions from actions (e.g. "It's okay to be angry; but we don't hit someone when we're angry.")
- Creates opportunities for child to solve problems (e.g. "What do you think you should do if another child calls you a bad name?")