



Research article

Developing and testing a framework for evaluating the quality of comprehensive family assessment in child welfare[☆]



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ABSTRACT

Over the last decade, Comprehensive Family Assessment (CFA) has become a best practice in child welfare. Comprehensive Family Assessments go beyond risk assessment to develop a full picture of the child's and family's situation. When appropriately synthesized, assessment information can lead to a clear articulation of the patterns of child or family functioning which are related to child abuse and maltreatment or which can be strengthened to facilitate change. This study defines and provides concrete examples of dimensions of quality in child welfare assessment reports that are consistent with the CFA guidelines and best practices embraced by child welfare agencies, courts, and other key stakeholders. Leveraging a random assignment design, the study compares the quality of reports written by a caseworker alone versus those written by a caseworker paired with a licensed Integrated Assessment (IA) screener. Findings are discussed in the context of the dual professional model and factors contributing to the timely completion of high quality assessment reports.

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Introduction

Over the last decade, Comprehensive Family Assessment (CFA) has become a best practice in child welfare. Comprehensive Family Assessments go beyond risk assessment to develop a full picture of the child's and family's situation which led to the current circumstances and which can drive service provision (Schene, 2005). The goal of conducting an assessment is to provide a picture which is broad and in-depth, exploring multiple factors which may contribute to risk and support well-being. Breadth is characterized by the examination of the child's developmental and behavioral needs as well as the functioning and needs of people and systems involved in the child's life—parents, siblings, extended family, community, and school. Depth is understood as examining the history or duration and context of problems and the nature of relationships which prevent or support well-being. The people raising and interacting with the child are critical to supporting safety and well-being. Those relationships—especially between parent and child but also between a parent and other adults—are integral to understanding the child's and family's needs (Budd, 2005; Johnson et al., 2006).

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This type of full-picture assessment is achieved through involving multiple family members as well as conducting a thorough review of other available records, whether current or historical. Gathering information from multiple sources contributes to a more accurate and reliable picture of overall family functioning over time (Budd, 2001; Budd, 2005). Collaboration with families is also key to a strong assessment (Schene, 2005) with rapport and relationship building as components of collaboration. The assessor's relationship with the parent, children, and other family members promotes the insight necessary to understand and interpret the family's needs and strengths in context (Reinders, 2010). Context includes assessing the family members' perceptions—which may or may not be the same—on current circumstances, past events, and relationships and observing interactions between family members, particularly between parent and child (Budd, 2001). Patterns of parental behavior over time are especially useful in understanding what needs to change to support the child's safety and well-being (Budd, 2001; Schene, 2005).

When appropriately synthesized, assessment information can lead to a clear articulation of the patterns of child or family functioning which are related to child abuse and maltreatment or which can be strengthened to facilitate change. Integration requires reflection and judgment based on training and clinical experience and decisions are made best in collaboration with others who know the family (Cash, 2001; Schene, 2005). Staff training and clinical supervision offer frameworks and reflective support for delving into the areas that are necessary for a comprehensive family assessment (Schene, 2005). The ensuing decisions and recommendations flow clearly from a holistic assessment through the integration or formulation of the case to the service plan.

An exemplary assessment report also documents the purposes of the assessment, disclosure of its uses, and evidence supporting any clinical judgments (Budd, 2012; Budde, 2012; APA Committee on Professional Practice and Standards, 2011). High quality child welfare assessments are comprehensive in nature, yet clear with respect to the elements that must be addressed in order to accomplish case closure, reunification, or other case goals. That clarity supports sustainable long-term change and focuses the activities and services on behaviors rather than compliance with service plans.

Research on the Quality of Child Welfare Assessments

Although practitioners and policymakers attest to the importance of quality in assessment reporting, few studies have examined this documentation of child welfare assessments. Rather, research has focused on the assessment process (e.g., Boutanquoi, Bournel-Bosson, & Minary, 2013), the use of analytic frameworks to guide assessment (e.g., Leveille & Chamberland, 2010); comparisons of assessment tools and instruments (e.g., Johnson et al., 2006), the fit between assessment data and the services provided (e.g., Cash & Berry, 2002), and the assessment of specific areas of concern in child welfare (e.g., domestic violence or mental health) (Budd, Felix, Poindexter, Naik-Polan, & Sloss, 2002; Petrucci & Mills, 2002).

Only a few published studies have examined assessment content. Using grounded theory and case studies, Holland (2001) and Thomas and Holland (2010) analyzed content from 16 reports and interviews with social workers for inclusion of material about the children. Holland (2001) notes that she approached the assessments "in the same position as other audiences, e.g., the judiciary, in that access to the children was mediated" through the reports and interviews with the social workers (pp. 324–325). They found that the children were "minor characters" in the reports and that the description of their identities focused on the negative aspects, rather than including strengths. Jent and colleagues (2009) reviewed 845 assessments of children with complex child welfare cases who were referred for a multidisciplinary assessment. The researchers found that collaterals were rarely consulted for assessments, family weaknesses were emphasized with little reporting on strengths, findings were interpreted less conservatively than recommended by the assessment guidelines, and that assessors did not discuss the limitations of the assessment. Jent and coauthors identify "the lack of research on assessment quality and content as a system-wide problem" (2009, p. 896).

The Illinois Integrated Assessment Program as a Model of Comprehensive Family Assessment in Child Welfare

In the late 1990s, child welfare administrators in Illinois identified the quality and expense of psychological evaluations as a critical problem. A 1997 review of psychological evaluations conducted by the Illinois Department of Children and Family Services (DCFS) revealed that despite spending \$14 million annually, the evaluations obtained were not useful, "... referral questions were lacking, the evaluations focused excessively on individual pathology and overlooked family dynamics, they were sometimes unnecessarily duplicated, and they were used in a way that competed with rather than complemented caseworker judgment" (Cross, 2009–10, p. 91). In response to this problem, DCFS developed the Integrated Assessment (IA) process in 2002 and 2003. Launched in 2005, the IA process is designed to examine the medical, social, developmental, mental health, and educational domains of the child and of the adults who figure prominently in the child's life. When the initial assessment is completed as part of the IA program, child welfare caseworkers and licensed clinicians interview the children and adults and gather and review all investigation screenings, past provider assessments, background reports, treatment and school records, and other case documentation. An extensive semistructured interview protocol guides the interview and report writing process and covers the following topics:

- Reason for opening case, history of involvement with the child welfare system, and family composition
- Assessment of each parent including: family of origin, history of underlying conditions, and any serious losses or traumatic events; education, cognitive functioning, and employment history; social and romantic relationships; criminal behavior

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