Family support and connections

Family Support and Connections (FS&C) services are intended to increase parental protective factors, which decrease the risk of safety threats associated with child abuse and child maltreatment, therefore reducing the incidents of child welfare involvement.

These goals are reached by providing services that increase parental protective factors and decrease risk factors. Parental protective factors include:

Nurturing and Attachment; Knowledge of parenting skills; Parental resilience; Parental social connections; Positive concrete supports.

Protective factor definitions:

Nurturing and attachment: Outcomes or indicators associated with nurturing and attachment include parenting behaviors that ensure a child’s basic needs for safety, health, learning and socialization are consistently met, and warm, responsive parenting interactions with their children that are likely to lead to secure attachment and bonding.

Outcome indicators:

Participants understand the nature of parent/child attachments; Participants understand their infants' needs.

Knowledge of parenting skills: Understanding and utilizing effective child management techniques.

Outcome indicators:

Participants know how to manage child behavior in a nurturing and effective manner.

Knowledge of parenting and of child and youth development: Outcomes associated with knowledge of parenting and child development include awareness of the usual steps in child development, the signs indicating children need special help, ways to promote healthy development, and developmentally-appropriate and culturally-relevant discipline and guidance methods. Intermediate- and long-term outcomes should spell out the behaviors that suggest parents are making practical application of that knowledge.

Outcome indicators:

Participants know effective and positive behavior guidance strategies.
**Parental resilience**: The family’s ability to openly share positive and negative experiences and mobilize to accept, solve, and manage problems and having adaptive skills and strategies to persevere in times of crisis.

Participants know the importance of having a mutual support network; Participants know how to access formal support systems in the community.

**Parental social connections**: Outcomes or indicators associated with social connections are behaviors that demonstrate parents and caregivers have networks of healthy and safe friends and family who provide both emotional and concrete supports.

Participants know the importance of having a mutual support network of friends, family and neighbors;

Participants have a mutual support network of healthy and safe friends, family and neighbors they use for support and assistance as needed.

**Positive concrete supports**: Outcomes or indicators associated with perceived access to tangible goods and services to help families cope with stress, particularly in times of crisis or intensified need.

Participants know how to access healthy and safe formal support systems;

Participants know the importance of having a support network of healthy and safe friends, family and neighbors;

Participants access formal support systems when needed;

Participants have a support network of healthy and safe friends, family and neighbors that they use for support and assistance as needed.

**Service strategies**: Home visiting and other face-to-face contacts; Strengths-based family assessments; Individualized services based on the family’s service plan; Joint outcome-driven case planning with SSP.

**Expectations**: Families will be identified and referred for services as early as possible and throughout the life of the case when risk factors present themselves.

Copies of the family’s *My Self Assessment* ([DHS 7823](https://example.com/dhs7823)) are shared with the FS&C worker.

Case managers and FS&C workers stay in communication participating in joint case planning.
Selection criteria:

(A) Priority One Families that have one or more of the following risk factors:

The order of these risks has no significance:

(1) Families with identified domestic violence.
(2) Substance abuse issues.
(3) TANF applicants with one or more prior CW investigations.
(4) Families with children under 6.
(5) Multiple children on their TANF cases, particularly four or more children.
(6) Families with prior TANF disqualifications.
(7) Homeless families and those who are in imminent danger of homelessness combined with other risk factors.
(8) Families referred by multi-disciplinary teams.
(9) Multiple child abuse hotline calls or referrals.
(10) Parents presenting with a disability (SL 3) (SSI) (Pre-SSI).
(11) Parents who were teens when they first became parents AND are currently experiencing domestic violence issues.
(12) Pregnant caregivers within 30 days of delivery date with one or more risk indicators present.

Priority 2 - Risk indicators:

1. Teen parents;
2. Families on a DQ Path for any reason;
3. Parenting skill gaps identified at screening or assessment phase;
4. Home health and safety, unsanitary, unsafe living environment (age dependent);
5. A need is identified but no community resource available (i.e., anger management counseling, violence intervention services). Family isolation, social as well as physical;
6. Families without safe support systems;
7. Family management issues (getting kids up ready for school, doctor appointments etc.).

**Tracking FS&C program participation:**

1. When a TANF family is referred to the FS&C program, create a plan if one does not exist, then create a FC step in TRACS, regardless of whether the client is JOBS mandatory or non-mandatory, or is a NO or IA on the case. Use the referral date for the FC step planned begin date and planned end date. Enter “1” for the expected number of hours.

2. If the family is a no show, close out the FC step with a NS reason code.

3. If the family does not enter the program after being assessed, use the assessment date as both the actual begin date and actual end date, and close the FC step by entering RE (Removed) as the reason code.

4. When the family enters the FS&C program, enter an actual begin date for the FC step. The FC step does not auto-populate, so be sure to enter one hour of actual time each week that the family is in the program.

5. When the family ends involvement with the FS&C program, enter this as the actual end date for the FC step. Close the step using AC (Activity Completed) as the reason code.