

NOCAC Child Development Family Partnership Agreement

Child's Name: _____

Name of Parent/Guardian present _____

Date Completed: _____

Family Needs Assessment

Scoring Legend	5	Thriving	2	Vulnerable
	4	Self-Sufficient	1	In-Crisis
	3	Stable		

Assessment Item **Score**

1. Family Well Being

Housing	Score	
<p>*****DISCUSS FURNITURE NEEDS*****</p> <p>5. Able to own or live in long term affordable housing. Safe housing. Enough room for family size. Suits needs and preferences. Able to pay utilities.</p> <p>4. Safe and Secure Dwelling for at least 12 months. Able to pay rent/mortgage. Able to pay utilities. Repairs taken care of.</p> <p>3. Semi-permanent. Relatively safe & secure. Some repairs needed. Mostly have ability to pay housing/utilities/repairs. Minor landlord issues. Metro Housing. Some help from agencies to get by (HEAP, PRC, etc.).</p> <p>2. Temporary housing. Live with friends/family. Money for rent/utilities uncertain. Unsafe or crowded. No money for repairs. Landlord not fixing problems. Use help from agencies to get by (HEAP, PRC, etc.). Utilities shut off or on the verge.</p> <p>1. Homeless or on verge. Very temporary housing (such as with friend for 1 week). At a Shelter. Camping, Live in Vehicle, etc. No Income for housing. Dangerous or bad situation. Utilities shut off.</p>		

Food/Clothing	Score	
<p>5. Always able to furnish. Regular and balanced food. Variety and high quality foods. Clean and durable clothes.</p> <p>4. Always have resources for healthy food/ needed clothing. Dietary requirements for special conditions i.e. pregnancy, diabetes, etc.</p> <p>3. Sufficient personal and community resources for food and clothing.</p> <p>2. Limited knowledge of food, food preparation and clothing resources. Recommended daily allowances not met.</p> <p>1. No food and preparation. Clothing Inadequate. Malnutrition. Eating disorders.</p>		

Employment	Score	
<p>5. Permanent and stable. Full benefits. Above average employment. Upgrading skills. Transferable skills.</p> <p>4. Full-Time or adequate job. Meets basic needs. OK Benefits.</p> <p>3. Stable adequate or almost adequate job. Doing ok, but could do better, with the right training or job. Has a doable resume.</p> <p>2. Temporary or part-time. Under-employment. No benefits. Limited skills. Inadequate pay/benefits. Needs help with updating or creating a resume.</p> <p>1. Unemployed. Disabled with no benefits. No/little prospects or skills. Long term unemployment.</p>		

Transportation	Score	
<p>5. Reliable vehicle. Have driver's license. Have money for car repairs, payments, gas, regular maintenance, insurance.</p> <p>4. Semi reliable vehicle. Able to pay for some repairs, but may be not right away. Able to get reliable rides. Have driver's license. Have Insurance. Can afford needed gas.</p> <p>3. Unreliable vehicle. May not be able to pay for needed repairs/gas. No driver's license. Unreliable resources for transportation.</p> <p>2.No vehicle. No access to transportation with others. Walk everywhere. No driver's license.</p> <p>1. Has revoked or suspended license. No access to transportation. No money to obtain transportation.</p>		

Financial / Credit Score	Score	
<p>****DISCUSS CREDIT SCORE****</p> <p>5. Reliable Income. Able to pay all bills on time Saving/retirement accounts. Have credit cards/good credit. Able to follow budget.</p> <p>4. Adequate Income. Able to pay most bills on time. Mostly able to follow budget. OK Credit.</p> <p>3. Stable Income. Struggle to pay bills on time. Access resources as needed. Fear unexpected costs. Some budgeting skills.</p> <p>2. Inadequate income. Unable to pay all bills. Use assistance to get by Need help with budgeting skills.</p> <p>1. Little to no income. Depend strongly on assistance to survive. No budgeting skills. Facing eviction/repossession. Go without meals/medical</p>		

Health	Score	
<p>5. Family Doctor. Family Dentist. Immunizations up to date. Iron Level test done. Lead Level test done. Everyone is healthy. Money/insurance for medical. Yearly Physicals.</p> <p>4. Family Doctor and Dentist. Immunizations up to date. Everyone is healthy. Money/insurance for medical.</p> <p>3. Access to doctor and dentist through clinics. Mostly able to see doctor/dentist when needed. Mostly enough insurance. Have most immunizations. Mostly able to get medications.</p> <p>2. No/Poor Insurance. No regular Doctor or Dental. Use Emergency Room for Doctor. Need help finding resources. Only go to doctor/dentist when an emergency. Unmet medical/dental needs. Behind on immunizations.</p> <p>1. No regular Doctor or Dental. Need help finding resources. No Insurance. Can't afford doctor/dentist. Can't afford/skipping needed medications. Serious illness in family.</p>		

Mental Health	Score	
<p>5. Self Confident. Strong sense of identity. Non-stressed. Strong relationships. No mental health problems.</p> <p>4. No mental health problems, but only so-so confidence/sense of identity. Good relationships. Mild Stress at times.</p> <p>3. Some mental health issues, but medication/coping skills take care of it. In counseling/treatment. Have support. Able to function normally.</p> <p>2. Able to function most days. More good days than bad. Medications partially helping. No treatment until in crisis. Not enough support.</p> <p>1. Unmanaged Depression, Anxiety, eating disorder, or other Mental Health issue. Struggles to cope. Possible danger to self /others. Substance Abuse. Unable to function in society. More bad days than good.</p>		

Dependency	Score	
<p>5. I or my spouse/significant other have no dependencies.</p> <p>4. Successfully completed treatment. Has not used in the last 6 months.</p> <p>3. Currently in treatment and not using.</p> <p>2. Currently using, recognized need for help. Has made contact for treatment. Not happy with treatment / counselor.</p> <p>1. Currently using not seeking treatment.</p>		

2. Positive Parent Child Relationships

Family/Relationships	Score	
<p>5. Stable/Nurturing relationships. Positive techniques of guidance. Strongly involved in community. Strong support network. Supportive environment.</p> <p>4. Relationships good. Environment good. Involved in Community. Mostly positive parenting techniques. Stable support network.</p> <p>3. Somewhat Stressed. Stable relationships. Stable Environment. Mostly good parenting skills. Able to access resources. Parenting and or relationship skills could be improved. Some community involvement Some support available.</p> <p>2. Behavioral Issues. Negative or non consistent use of discipline. Overwhelmed. No support. Needs help with resources Needs parenting help/skills. Relationship issues.</p> <p>1. Domestic Violence. Substance Abuse. Mental/verbal abuse. Severe behavior issues. Relationship breakdown. Currently has an open case with CPS.</p>		

3. Family as Life Long Educators

Educational Goals - Check all that apply. Blank spaces are for additions and notes.		
	First Aid/CPR/AED	
	Dual Language Learners (Parent)	
	FAFSA/School loan information	
	GED	
<p style="text-align: center;">3</p>		

4. Families as Learners

Education	Score	
<p>5. I or my spouse/significant other are attending College. Chosen profession. Obtaining degree. Proficient with Computer and Internet.</p> <p>4. I or my spouse/significant other have GED or HS Diploma. Able to access needed resources to attend College. No need for remedial courses. Knowledgeable with computer/Internet.</p> <p>3. I or my spouse/significant other have GED or HS Diploma. Able to access needed resources to attend College or Job training. Need a few remedial courses. Able to use computer/Internet.</p> <p>2. I or my spouse/significant other has no GED or HS Diploma. Able to access GED training. Able to access job training. Remedial courses needed. Needs some skills to use computer/Internet.</p> <p>1. I or my spouse/significant other has no GED or HS Diploma. Need English as Second Language. Need remedial courses in various areas, e.g. math, reading, writing etc. No skills with computer/Internet</p>		

5. Family Engagement in Transitions

Child Education & Development / Family Literacy	Score	
<p>5. Family recognizes his/her role in educating their child. Parent has access to learning resources for their child. Family utilizes their local library. Family has good understanding of the assessment tools used by our program.</p> <p>4. Family feels confident about their child's learning. They read to their child at least once every day. Family able to easily access learning resources on their own.</p> <p>3. Family feels somewhat confident about their child's learning. Parent sometimes reads to their child. Parent has access to some learning resources for their child.</p> <p>2. Family is not confident about their child's learning. Has a library card but unable to use due to fines/fees they have with their local library.</p> <p>1. Family is unable/unwilling to support their child in any learning activities. Has no library card and/or no interest in family literacy. Family has no knowledge/understanding of the assessment tools used by our program.</p>		

6. Family Connections to Peers and Community

Families and Communities - Check all that apply. Blank space is for additions.	
Immediate and/or Extended Family Support System	
Connection/Support with Local School	
Connected to Other Parents and Families with young children	
Connection/Support from other community Agencies and Services	

7. Families as Advocates and Leaders

Leadership Development	Score	
<p>5. Has participated as a representative in the Policy Council or Parent Committee Association (PCA). Active volunteer.</p> <p>4. Has attended or is interested in attending Policy Council or Parent Committee Association (PCA). Has attended community functions or meetings (PTA, Fatherhood Program, school meetings). Limited ability or is not interested in participating in leadership development.</p> <p>3. Able and willing to volunteer for the program from home, not interested in attending meetings.</p> <p>2. Not able to participate due to conflicts in schedule, lack of child care, transportation etc.</p> <p>1. Is NOT interested in volunteering or leadership development.</p>		

NOCAC CHILD DEVELOPMENT Family Goals, Strengths, and Supports

Child _____ Teacher/Option _____ Date _____

Parent/Guardian/s Present _____ Time _____ to _____

Family Strengths

FAMILY GOAL #1

Action Steps Needed: What steps do you need to take to reach your goal? Include who will be responsible for achieving the goal and by when.

Action Step	Who will be responsible?	Deadline	Date Completed
1.			
2.			
3.			

FAMILY GOAL #2

Action Steps Needed: What steps do you need to take to reach your goal? Include who will be responsible for achieving the goal and by when.

Action Step	Who will be responsible?	Deadline	Date Completed
1.			
2.			
3.			

List Referrals/Resources given including the phone number

List the agencies the family is currently working with
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Who provides family support?

Parent/Guardian Signature: _____ Date: _____

Staff Signature: _____ Date: _____