



Checklist for Assessing Adherence to Family-Centered Practices

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This *CASEtool* describes the development and use of the *Family-Centered Practices Checklist* for promoting practitioner use of and adherence to evidence-based family-centered helpgiving practices. The checklist is used to determine the extent to which a practitioner uses both relational and participatory family-centered helpgiving practices as part of his or her work with a family. It provides a basis for joint or self-reflection as a way of evaluating one's helpgiving behaviors against a set of behaviorally stated evidence-based practice indicators.

INTRODUCTION

This *CASEtool* includes a description of the development and use of the *Family-Centered Practices Checklist*. The checklist is particularly useful for promoting practitioner use of evidence-based family-centered helpgiving practices and for monitoring adherence to family-centered practices (Dunst, 2003). The article includes three sections: (1) a definition of family-centered helpgiving practices, (2) a description of the checklist, and (3) an explanation of how the checklist can be used to promote practitioners' adoption and use of effective helpgiving practices. The reader is referred to a companion paper (Wilson & Dunst, 2004) which includes additional information about the *Family-Centered Practices Checklist*.

FAMILY-CENTERED HELPGIVING PRACTICES

The ways in which a practitioner helps a family are as important as what is provided if helpgiving practices are to have optimal positive benefits (Rappaport, 1981; Trivette & Dunst, 1998). A helpgiving relationship between a practitioner and a parent or caregiver is more likely to have desired benefits if the parent sees himself or herself as an *agent of change* in achieving family identified outcomes (Wilson, 2005). Using family-centered helpgiving practices is one way this can be accomplished.

Definition of Family-Centered Practices

Family-centered helpgiving includes practices that treat families with dignity and respect; are individualized, flexible, and responsive to family concerns and pri-

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crities; include information sharing so that families can make informed decisions; honor family choice regarding any number of aspects of program practices and intervention options; use parent-professional collaboration and partnerships as a context for family--practitioner relations; and promote families' abilities to obtain and mobilize resources and supports necessary for them to care for and rear their children in competency strengthening ways (Dunst, 1995; Shelton & Stepanek, 1994; Trivette & Dunst, 2000). Evidence indicates that when practices are family-centered, or where practices show a presumption toward family-centeredness, the use of the practices have broader based outcomes with respect to parent and family as well as child benefits (Davies, 1995; Dunst & Trivette, 1996; 2005b).

Family-centered practices have both *relational* and *participatory* components with each component having two clusters of practices (Dunst & Trivette, 1996; Trivette & Dunst, 1998). The relational component includes practices typically associated with (a) good clinical skills (active listening, compassion, empathy, respect, being nonjudgmental, etc.) and (b) professional beliefs about and attitudes toward families, especially those pertaining to parenting capabilities and competencies. The participatory component includes practices that (a) are individualized, flexible, and responsive to family concerns and priorities, and (b) provide families with opportunities to be actively involved in decisions and choices, family-professional collaboration, and family actions to achieve desired goals and outcomes. The simultaneous use of both sets of practices is what distinguishes a family-centered approach from other approaches to working with families (Dunst, 2000; Dunst & Trivette, 1996).

Benefits of Family-Centered Helpgiving Practices

Family-centered practices place families in central decision-making roles and proactively involve families in acting on their decisions. Evidence now indicates that being treated in a family-centered way results in a number of parent and family benefits. These benefits include, but are not limited to parent and family empowerment, family well-being, positive judgments by parents about their confidence and competence, and positive judgments about their children's behavior (Dunst & Trivette, 1996; Dunst & Trivette, 2005b). A forthcoming paper includes an extensive review and synthesis of the research evidence on the effect of family-centered helpgiving (Dunst, Trivette, & Snyder, 2005).

FAMILY-CENTERED PRACTICES CHECKLIST

The family-centered helpgiving practices model developed by Trivette and Dunst (1998) was used to

develop a checklist for promoting early childhood and family support practitioner adoption of competency enhancing helpgiving practices. The *Family-Centered Practices Checklist* is used to determine the extent to which a practitioner uses both relational and participatory family-centered helpgiving practices as part of his or her work with a family.

We developed the items on the *Family-Centered Practices Checklist* using several activities. First, we reviewed available research (Trivette & Dunst, 1998, 2000) and used both family support principles (Dunst, 1995) and parent comments about the characteristics of effective helpgivers to develop an initial item pool. The checklist items then were compared to the indicators of evidence-based helpgiving practices to be sure all aspects of family-centered practices were represented (Trivette & Dunst, 1998). After numerous discussions with staff with whom we work, we distributed a draft of the checklist to practitioners for them to review and provide feedback on their use of the checklist. We also solicited written and verbal feedback from practitioners and used their feedback to make the final selection of items. Practitioner feedback not only helped to identify the items that best captured descriptions of the helpgiving practices, but also helped to improve the clarity of the checklist indicators.

The *Family-Centered Practices Checklist* is included in the Appendix. The checklist items are organized into two types of practices (relational and participatory) and two clusters of each type of practice. The instructions for using the checklist also are included in the Appendix.

Relational Helpgiving Practices

Relational helpgiving practices include behaviors that a practitioner uses to build rapport with parents and families. Practitioners demonstrate relational helpgiving by interacting with a family in a warm and caring way, focusing and maintaining attention on what a parent is saying, communicating clearly with the family, and using active and reflective listening skills. Practitioners also demonstrate relational helpgiving by having a positive attitude toward the family and using asset-based practices. The latter includes focusing on individual and family strengths, honoring and respecting personal and cultural beliefs, communicating to and about families in a positive way, and acknowledging the family's existing and emerging ability to achieve desired outcomes.

Participatory Helpgiving Practices

Participatory helpgiving practices include behaviors that a practitioner uses to assist families to make choices and take action to achieve desired outcomes. Practitio-

ners demonstrate participatory helpgiving by helping families identify and focus on family-identified priorities, assisting families to evaluate options and make informed decisions, and promoting active family participation in using their existing strengths and developing new skills to achieve desired outcomes.

Practitioners using participatory practices also are responsive and flexible to families' unique and changing circumstances. This includes such things as helping families to consider solutions for desired outcomes that involve a broad range of supports and resources, supporting and respecting family decisions, working with families in an individualized manner, offering help that matches family interests and priorities, and assisting families to take a playful approach to achieving desired outcomes.

ADMINISTERING THE CHECKLIST

The checklist is completed based on an observation of a practitioner/family interaction, or as part of a conversation or description of a specific practitioner interaction with a family. Each item is rated using the following scale: 1 = Yes, Practice Indicator was Used, 2 = Practice Indicator was Partially/Sometimes Used, 3 = Practice Indicator not Used, Opportunity Missed, 4 = NA/No Opportunity to Observe. Examples of the practitioner's behavior are recorded in the space provided on the checklist. The description of specific, observable behaviors aids in the discussion of and reflection on the characteristics of practice that are and are not indicators of family-centered helpgiving.

The checklist provides standards and benchmarks for defining expected practitioner helpgiving behaviors. The checklist is useful for a number of purposes. First, a supervisor can use the checklist to develop and support a practitioner's use of family-centered practices. For example, a supervisor can use the checklist with a new employee to help the practitioner understand the key characteristics of family-centered practices and the behaviors expected in interactions with a family. It also can provide a way of structuring supervisory observations of practitioner performance and subsequent discussions about a practitioner's use of family-centered practices.

Second, a practitioner can use the checklist either individually, or with a co-worker or coach, to reflect on and improve his or her helpgiving practices. For example, if a practitioner wanted feedback on his or her use of responsive and flexible helpgiving behaviors, he or she could have a co-worker observe and record examples of this specific helpgiving practice that occurred during the interaction with a family (e.g., the ways the practitioner

respected family decision-making) and use the observations to provide feedback or engage the practitioner in reflection.

Third, the checklist can be used to monitor practitioners' use of family-centered practices across time to assess degree of adherence to the practices. This can be done individually or for a group of practitioners (Dunst & Trivette, 2005a). The percent of indicators receiving a "Yes, Practice Indicator was Used" score provides a measure of practitioner or program quality.

There are other uses of the checklist as well. It can be used to assess key factors of interactions with parents to help a practitioner examine whether or not he or she is using practices that are promoting a parent's active participation in achieving outcomes. It can be used by a practitioner to illustrate his or her helpgiving practices to other staff or supervisors. It also can be used as an observation tool to capture and examine the interactions of two or more staff working with one or more families. We also have found the *Family-Centered Practices Checklist* useful for structuring conversations about different aspects of family-centered helpgiving as a way of promoting deeper understanding of the meaning of effective helpgiving.

CONCLUSION

The *Family-Centered Practices Checklist* can be helpful for determining the extent to which a practitioner uses family-centered helpgiving practices. The checklist includes items based on characteristics of effective family-centered helpgiving practices, and assesses both relational and participatory helpgiving behaviors (Trivette & Dunst, 1998). It can be helpful as a way of making the kinds of behaviors that mirror a family-centered approach concrete and practical (Trivette & Dunst, 2000). The checklist also provides a context for joint or self-reflection as a way of "checking" ones helpgiving behaviors against a set of behaviorally stated, evidence-based standards. The importance of family-centered helpgiving practices is based on research findings demonstrating an empirical relationship between use of the practices and a host of positive child, parent, and family benefits (Dunst & Trivette, 2005b).

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Appendix A

Family-Centered Practices Checklist

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Staff Member _____ Context _____

Observer/Coach _____ Date(s) _____

Rating Scale		1 = Yes, practice was used. 2 = Practice was partially, sometimes done.		3 = Practice not used, opportunity missed. 4 = NA, no opportunity to observe the practice.		
		In what way was each practice used?	Rating	Example/Comment/Reflection		
PRACTICES	Interpersonal Skills	Communicate clear and complete information in a manner that matches the family's style and level of understanding.				
		Interact with the family in a warm, caring, and empathetic manner.				
		Treat the family with dignity and respect and without judgement.				
	Asset-Based Attitudes	Communicate to and about the family in a positive way.				
		Honor and respect the family's personal and cultural beliefs and values.				
		Focus on individual and family strengths and values.				
		Acknowledge the family's ability to achieve desired outcomes.				
	Family Choice and Action	Work in partnership with parents/family members to identify and address family-identified desires.				
		Encourage and assist the family to make decisions about and evaluate the resources best suited for achieving desired outcomes.				
		Seek and promote ongoing parent/family input and active participation regarding desired outcomes.				
		Encourage and assist the family to use existing strengths and assets as a way of achieving desired outcomes.				
		Provide family participatory opportunities to learn and develop new skills.				
	Practitioner Responsiveness	Assist the family to consider solutions for desired outcomes that include a broad range of family and community supports and resources.				
		Support and respect family members' decisions.				
		Work with the family in a flexible and individualized manner.				
		Offer help that is responsive to and matches the family's interests and priorities.				
		Assist the family to take a positive, planful approach to achieving desired outcomes.				

Appendix A, continued

**Family-Centered Practices Checklist
Administration Procedure**

The *Family-Centered Practices Checklist* is used to determine the extent to which a practitioner uses family-centered helpgiving practices. The checklist includes items based on characteristics of effective family-centered helpgiving practices, and captures both relational and participatory helpgiving behaviors (Trivette & Dunst, 1998). Relational helpgiving practices include a helpgiver's interpersonal skills with families and his/her attitudes and beliefs about the family's skills and ability to become more competent. Participatory helpgiving practices include helpgiver behaviors that promote family choice and action as well as helpgiver practices that are flexible and responsive to the family's priorities and interests.

The checklist can be used for several purposes. It can be used by supervisors to (a) inform newly hired practitioners about family-centered practices and the behavioral expectations for their interactions with families and (b) structure observations of practitioner performance and discussions about his/her use of family-centered practices. Practitioners also can use the scale, either individually or with a co-worker or coach, to self-assess, reflect on, and improve their practices with families.

The checklist is administered during an observation of a practitioner--family interaction, or as part of self-reflection on a specific interaction with a family. Information is completed regarding (a) the date of the observation or self-reflection, (b) the context of the practitioner--family interaction (initial contact with the family, IFSP development, identifying a child's interests, reviewing progress toward desired outcomes, etc.), (c) the name of the practitioner being observed or conducting the self-

assessment, and (d) the name of the person conducting the observation (if appropriate). Each item is rated using the following scale:

- 1.....Yes, Practice was used
- 2.....Practice was partially, sometimes done
- 3.....Practice not used, opportunity missed
- 4.....NA, No opportunity to observe the practice

An observable example of the behavior or comments on practitioner behavior is written in the Example/Comment/Reflection section on the checklist.

When using the *Family-Centered Practices Checklist* to provide feedback to others or to further one's own understanding of the practices, consider the following: (a) review the items and discuss the behaviors observed, (b) identify a specific item or set of items that will be the focus of discussion or reflection, (c) describe the characteristics of the practice and what it is about the behavior observed that represents family-centered practice, (d) describe the context of the interaction, (e) describe the results of the interaction, (f) reflect on the practice and describe what if anything the practitioner could have done differently, and (g) identify and describe how the practice complemented or contradicted another family-centered practice within the example being discussed.

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