



San Francisco Children's System of Care

Family-Driven Care Assessment Tool

March 2007

The Family-Driven Care Assessment Tool is intended as a guide to help public agencies gauge how well their programs and services are family-driven. It was developed by the San Francisco Children's System of Care on behalf of Community Behavioral Health Services under the Department of Public Health. The tool offers a series of questions that public agencies and their service networks can examine as they consider strategies to promote family-driven care. As with any tool, agencies may wish to add questions that reflect the unique characteristics, cultures, and issues presented by the children, youth, and families they serve.

Family-driven care means families are expert partners in the care of their children and should be given a decision making role in the policies and procedures governing care of children in the community.



We embrace family-driven care. Don't we?

- ✓ We believe families are expert partners in the care of their children.
- ✓ We believe our programs and services should strive to meet the needs of families rather than the other way around.
- ✓ We believe families should feel safe, valued, and respected.
- ✓ We believe families should have opportunities to develop supportive and trusting relationships within our system.
- ✓ We believe in educating, training, and supporting our staff in meeting the needs of families.
- ✓ We believe in and "get" families.

If your system holds these beliefs to be true, please begin the assessment.

Area 1: Families are expert partners in the care of their children.

1. How do we include family strengths, needs, and perspectives in our assessment?
2. How do we incorporate family goals in service planning?
3. How do we respect that the ultimate choice on services, supports, and providers rests with families within available resources?
4. How do we work with and respect caregiver's decisions on how to discuss problems with their children?

Area 2: Families are able to be active participants when their children are cared for in a way that makes them feel safe.

1. What age appropriate child care options have we created for families who must bring children to appointments?
2. How do we make child care available in a variety of settings such as at home visits and off-site appointments?



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Area 3: Families are kept together, safe and healthy.

1. How do we create a safe and nurturing environment for families in times of crisis?
2. How do we provide consistent and frequent family contact and support in times of crisis?
3. What activities do we offer to develop family independence, resourcefulness, and community building?

Area 4: Families are offered support as they transition from our system.

1. How do we allow time for families to adjust to natural supports and community services as they transition?
2. When families complete or move to new levels within one of our programs, how do we prepare and inform them of new expectations and how to manage change?
3. What resources do we offer families after a service or program ends?

Area 5: Families have access to our services.

1. How flexible are our appointments and office hours?
2. How do we respect a family's time management issues and remain mindful that families may have multiple commitments and that unexpected obligations often arise that must take precedence over an appointment with us?
3. What transportation options do we provide families to and from programs and services?

Area 6: Families are valued within our system.

1. What training do we provide our staff, programs, and service providers on family-driven care and how do families participate in this training?
2. How do we promote keeping an open mind about families and eliminate family stereotypes?
3. How do we support families in understanding the power and opportunities they have in creating change in their lives and our programs and services?
4. How do we strive to acknowledge and address the different cultures, beliefs, and values that may exist between families and the staff who work with families?
5. How do we allow staff sufficient time and incentives to work with families who have complex and intense needs?



Family voice for unconditional care for successful outcomes.