

Part 3 How to Use Take Root Home Visitation



Introduction

There are many ways to plan and implement a home visit. Take Root Home Visitation is a comprehensive curriculum that helps you pull together the pieces of your home visit in a meaningful way. This curriculum includes integrated intake, planning, and reporting documents and recommendations for each step of the visit itself.

By the end of Part 3, you will be able to:

- Identify the many elements of your home visit.
- Understand the resources available to you to assist in your intake, planning, and reporting.

While it may feel like there are many pieces to sort out, this section carefully introduces all the elements to a home visit. Part 4 provides a practical example in the form of a *Case Study Family* to show how all the components come together and offers you an opportunity to flex your home visitor insights into possibilities beyond what is presented.

The Flow of a Home Visit

TRHV recommends the following steps for each visit. Using the same general steps each time you plan, implement, and report on a home visit helps define a routine and rhythm for you and the families you visit. As the TRHV content helps families discover and reinforce routines that foster resilience and stability, the familiarity of a visit routine also helps establish rapport and engagement between you and the family. When one of you feels strongly that an exception needs to occur, such as a pressing need for using the time differently (e.g., changing the focus of the planned content or an immediate care need of a family member), you and the parent can quickly identify the change in routine and adjust.

These steps are presented as a basic outline to give you a sense of the flow of a visit. Many of them may be very familiar to you; however, you may not have done them exactly like this or in this order.

Basic Visit Outline

- o **Warm Greetings** to parent and child.
- o **Check In with Parent** How are you? How have things been going since our last visit?
- **Reflection from Last Visit: What one-on-one activity did you decide to try with your child? Suggested prompts:**
 - o Tell me about what happened.
 - o How did you introduce the activity? How did it feel to you?
 - o How do you think this activity helped your child learn and grow?
 - o What might you do differently next time for you or for your child?
 - o Is there a tip you would share with another parent about this activity?
- **Discuss Plan for Today's Visit**
- **Everyday Moments: A Conversation**
 - o Revisit why we chose this *Moment*.
 - o What is working well? What would you like to change?
 - o Discuss information from the module and strategies using *Family Pages* and related resources.
- **One-on-One Activity: Supporting the Parent-Child Dance**
 - o During the visit: Try out a one-on-one activity related to the *Everyday Moment*.
 - o After the visit: Encourage the parent(s) to continue practicing the one-on-one activity or choose another to try.
- **Summary of Key Points and Plans for Next Visit**
 - o Go over any new concepts, points of interest, and activities or responses the parent may be trying. Restate what topic(s) are noted for the next visit.
- **Warm Goodbyes** to parent and child.

Take a Moment: Flow of a Home Visit

How does this outline compare to your current practices?

How might any of these steps enrich what you already do?

Even if you follow the guidelines we provide in TRHV and draw on your own experiences as a professional, your home visits will not always feel organized or ideal. That is OK. As you work through the next few pages, you will begin to see how the *Basic Visit Outline* gives structure to planning and reporting. In addition, it allows for flexibility to make adjustments as needed once you step into a family's home and meet the parents and child(ren) where they are that day.

Implementing Take Root Home Visitation: A Step-by-Step Process

This section introduces you to the materials and steps used to implement TRHV. The graphic to the right shows the steps that home visitors can use to implement TRHV:

- Gather information,
- Build a collaborative *Family Service Plan*,
- Choose specific topics for visits, and
- Integrate an ongoing assessment that gives parents a voice and choices throughout the process.

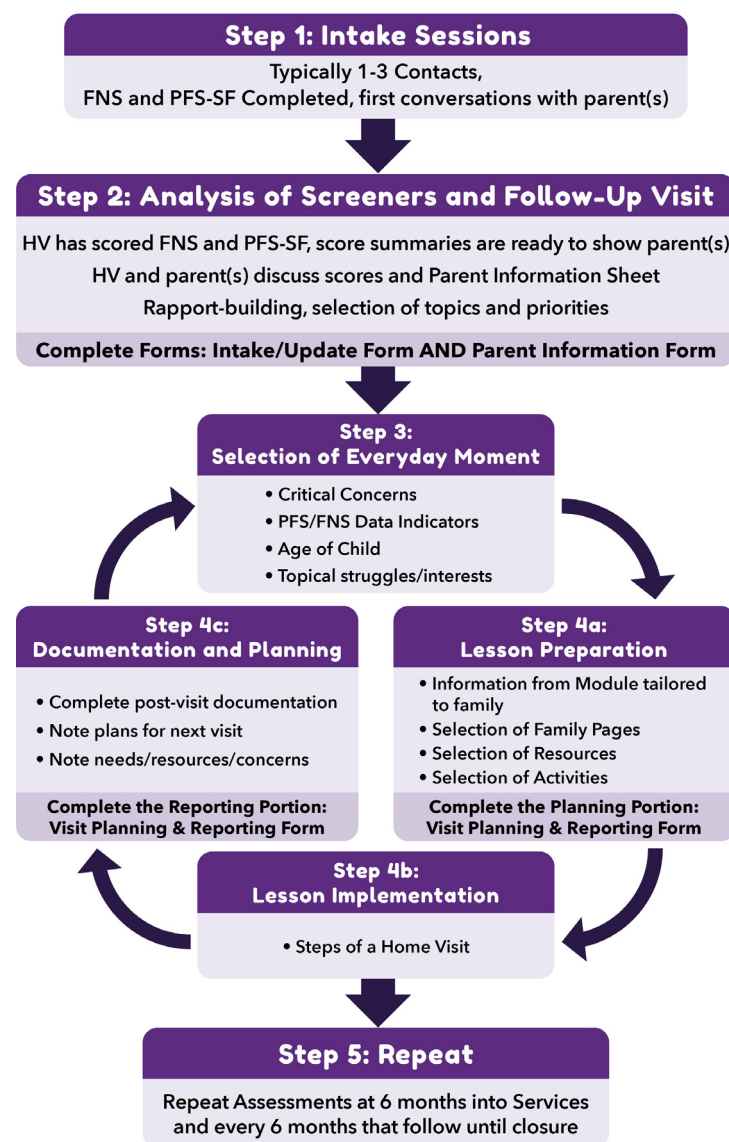
Also highlighted in the graphic are the appropriate time points for using the measures, planning visits, and reporting.

Data-Informed Decisions

Building a *Family Service Plan* starts with gathering information. TRHV uses two screeners and initial family conversations as sources of information. These help you make curricular choices and guide your work together:

1. The *Family Needs Screener* (Screener: *FNS*);
2. The *Protective Factors Survey, Short Form* (15-item *PFS:SF*); and
3. Early conversations with parents about their goals for home visitation and their hopes and dreams for themselves and their child.

These measures are also used to check in with parents at the 6-month point or when closure occurs. This reassessment cycle is explained in Step 5 to the right.



TRHV Step-by-Step Process chart.

Step 1: Intake Sessions (Assessments and Conversations)

TRHV is designed around current practice within the New Parent Support Program across all branches of the Department of Defense. For instance, the *FNS* is part of the intake information used to help you learn about certain critical needs a parent may disclose and then help you assess whether a family is eligible for home visitation services. As part of your current practice, you likely follow up after reviewing the score on the *FNS* and talk with the parent, perhaps asking him or her to complete additional measures or offering other resources.

In TRHV, the *FNS* is one of two measures used to provide intake information. The second measure is the *PFS:SF*. ***If your installation does not yet use the PFS:SF, full training on this measure is available online and via the TRHV-specific training.***

The *PFS:SF* is linked directly to the *Protective Factors Framework* and is also a screening instrument. Whereas the *FNS* identifies several different areas of potential risk or absence of risk, the *PFS:SF* identifies potential areas of protection (resilience) and absence of protection. The two measures complement one another, which will be shown in Part 4 with the *Case Study Family* example.




Step 2: Screener Analyses and Follow-Up Visit

Once the *Screener* and the *PFS:SF* are scored, the information provided by these measures can be used to start conversations. Parents can reflect on their answers; home visitors can start modeling strengths-based language to help describe what the scores can indicate.

The third source of information used at intake (and again every 6 months) is the *Parent Information Form*, a short open-ended intake form, shown to the right. It has questions about parents' goals and hopes for themselves and their children and can be completed by the parent alone or with help from a home visitor. This 1-page form helps gather more details about the family background, age of the child who is eligible for services, and if there are any specific topics on which the parent would like to focus.

The questions on the *Parent Information Form* are conversation openers, not prescriptive. The intent is to start the first of many conversations about what a parent may be thinking and feeling while building a connection to someone they can trust. While some of the needs a family has can be beyond the scope of the home visitation program, there may be connections that you can help make or resources that can be shared. If there are needs beyond this secondary prevention program, for example, where intervention is recommended, you and your supervisor may be able to facilitate those warm hand-offs to appropriate programs and professionals.

With these three sources of information, you are ready to draft a Family Service Plan that is informed by data from the two screening measures and by the information shared by the parents. Use the *Intake/Update Form for Family Service Plan* on the next page to combine the information from the FNS, the PFS:SF, and the *Parent Information Form* into a single document.


Parent Information Form

Family ID:
Date:

Type of Program Planning:

| | | | |
|---|--|--|--|
| <input type="checkbox"/> Parent Information for the Family Service Plan Date: Initial: | <input type="checkbox"/> 6-Month Review Date: Initial: | <input type="checkbox"/> 12-Month Review Date: Initial: | <input type="checkbox"/> 18-Month Review Date: Initial: |
| <input type="checkbox"/> 24-Month Review Date: Initial: | <input type="checkbox"/> 30-Month Review Date: Initial: | <input type="checkbox"/> 36-Month Review Date: Initial: | <input type="checkbox"/> Closure Date: Initial: |

Age of Child for NPSP Services:

| | |
|--------|---------|
| Years: | Months: |
|--------|---------|

Parents' Dreams and Goals for their Child/Children:

Parents' Dreams and Goals for NPSP Participation:

Parent's Topics and Areas of Interest for Conversations:

TRHV Parent Information Form.

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The first page of the *Intake/Update Form* focuses primarily on information from the *FNS* and the *PFS:SF*, as seen on the right.

Notice that it has space to record the family ID, date, and if this is a new intake or a subsequent review and update at the top.

The next section on this page is where you will copy this family's current *FNS* information, including the date it was completed, the scores for each subscale, total number of high-needs qualifiers, and the total needs score.

The third section is where you will record this family's *PFS:SF* scores and the date that measure was completed.

At the bottom of the first page, you are asked to identify this family's reported strengths and risks from the scores on these two measures. This is where you write your first notes, reflecting on what these scores represent to you at this point in your work with the family.


**Intake/Update Form
For Family Service Plan**

Family ID: _____
Date: _____

Type of Program Planning: Initial Intake into Active Case Management

| | | | |
|--|---|---|---|
| <input type="checkbox"/> Parent Information for the Family Service Plan <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> 6-Month Review <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> 12-Month Review <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> 18-Month Review <small>Date: _____ Initial: _____</small> |
| <input type="checkbox"/> 24-Month Review <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> 30-Month Review <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> 36-Month Review <small>Date: _____ Initial: _____</small> | <input type="checkbox"/> Closure <small>Date: _____ Initial: _____</small> |

Family Needs Screener (FNS) scores:

| Date Completed | Total Needs Score | |
|----------------------|------------------------------------|--|
| Demographics | Family of Origin Violence/ Neglect | |
| Stress | Self-Esteem | |
| Relationship Discord | Depression | |
| Support | Prior Family Violence | |
| Substance Abuse | Number of High-Needs Qualifiers | |
| Violence Approval | | |

| Protective Factors Survey (PFS) Scores: | Date Completed | Family Functioning/Resiliency | Social Support | Concrete Support | Nurturing and Attachment |
|---|----------------|-------------------------------|----------------|------------------|--------------------------|
| | | | | | |

From the information above, identify this family's reported STRENGTHS and ABSENCE OF RISK:

| | |
|--|---|
| 1. FNS Areas with Absence or Low Identified Risk (scores of 0, maybe 1): | <input type="checkbox"/> Demographics <input type="checkbox"/> Stress <input type="checkbox"/> Relationship Discord <input type="checkbox"/> Support <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Violence Approval <input type="checkbox"/> Violence/Neglect <input type="checkbox"/> Self-Esteem <input type="checkbox"/> Depression <input type="checkbox"/> Prior Family Violence |
| 2. PFS Areas with High Level of Protection (scores of 5-7): | <input type="checkbox"/> Family Functioning/Resiliency <input type="checkbox"/> Social Support <input type="checkbox"/> Concrete Support <input type="checkbox"/> Nurturing and Attachment |


From the information above, identify this family's reported RISKS and POTENTIAL FOR INCREASED RESILIENCE:

| | |
|---|---|
| 1. FNS Areas with Identified Risk (scores of 1 or High-Need Qualifier): | <input type="checkbox"/> Demographics <input type="checkbox"/> Stress <input type="checkbox"/> Relationship Discord <input type="checkbox"/> Support <input type="checkbox"/> Substance Abuse <input type="checkbox"/> Violence Approval <input type="checkbox"/> Violence/Neglect <input type="checkbox"/> Self-Esteem <input type="checkbox"/> Depression <input type="checkbox"/> Prior Family Violence |
| 2. PFS Areas with Neutral or Low Levels of Protection (scores of 0-4): | <input type="checkbox"/> Family Functioning/Resiliency <input type="checkbox"/> Social Support <input type="checkbox"/> Concrete Support <input type="checkbox"/> Nurturing and Attachment |

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The second page of the *Intake/Update Form* focuses on connecting the strengths and risks from page 1 to the five *Protective Factors*.

If this is the beginning of work with this family, you may not have a lot to write. Yet, you may still have early ideas of what could be helpful and what strengths you could start with to engage and build a strong parent-home visitor relationship. Examples are given on the form to help generate your own thoughts about a family.



Intake/Update Form
For Family Service Plan

Link this family's strengths and challenges to the 5 Protective Factors:

| | Strengths <small>FNS or PFS scores suggest parent(s)</small> | Challenges <small>FNS or PFS scores suggest parent(s)</small> |
|--|---|--|
| Social Connections | <small>(e.g., ...has people she can count on for help and to talk to.)</small> | <small>(e.g., ...currently does not feel she has anyone who supports her or could help if needed.)</small> |
| Concrete Supports of Families | <small>(e.g., ...is able to meet the family's basic needs and knows community resources for help.)</small> | <small>(e.g., ...currently does not feel able to meet the family's basic needs or does not know community resources for help.)</small> |
| Parental Resilience | <small>(e.g., ...intimate relationship is supportive and they are able to problem solve in healthy ways where there are conflicts.)</small> | <small>(e.g., ...intimate relationship currently is not supportive or they are not able to resolve conflicts in healthy ways.)</small> |
| Knowledge of Parenting and Child Development | <small>(e.g., ...has knowledge of positive parenting practices or understanding of their young child's needs and abilities.)</small> | <small>(e.g., ...needs support to gain knowledge of positive parenting practices or understanding of their young child's needs and abilities.)</small> |
| Social and Emotional Competence of Children | <small>(e.g., ...has understanding of how his actions as a parent can promote his child's social and emotional skills.)</small> | <small>(e.g., ...needs support to gain understanding of how his actions as a parent can promote his child's social and emotional skills.)</small> |

Notes:

Step 3: Selection of Everyday Moment or Special Focus Moment

The TRHV curriculum offers 11 different *Moments* that you can use in your home visit. These *Moments* are grouped topically and are appropriate for children from birth to 3 years old, first-time or experienced parents, and those with or without experience of military family life contexts. The three main groups of *Everyday Moments* were described in depth in Part 2 and are highlighted here:

1. *Daily Care and Living Routines*;
2. *Young Children's Play and Exploration*, fostering parental perspective-taking of children's experiences in their growth and development; and
3. *Parenting Life*, how to build positive parenting and co-parenting skills and practice self-care.

The additional *Special Focus Moments* concentrate on two experiences that have wide-ranging impacts on family and individual health and resilience in our military family population:

1. *Parental Absence in Military Life*; and
2. *Parenting After Injury*.

The current research on these *Special Focus Moments* is not yet reflected in most commonly available parent education curricula. TRHV starts that process.

It is worth highlighting that each *Moments* chapter goes into greater detail than is needed for a single home visit, and a particular chapter may be used across multiple home visits, depending on the needs and priorities of the family. The chapters are purposefully wide-ranging to adequately address important and interesting age-related differences of infants and toddlers and to attend to the knowledge gaps of parents. In addition, there is particular focus on issues of safety and supervision throughout the chapters to better meet needs of parents who may be limited in their current safety knowledge, skills, and abilities.



The TRHV curriculum is based on the idea that home visitors should let the scores on the *FNS*, *PFS:SF*, and the discussion with the parent guide which topics are higher priority. How is this done? The *Intake/Update Form for Family Service Plan* collected information from these three sources.

As you complete and review this form, ask yourself, "What does that information tell me?" Reflect on the information you've learned about a family, and, then, check the list of *Everyday and Special Focus Moments* to see which one(s) best match a family's introductory profile.

Take a Moment: Meeting a New Family

You meet a family who are first-time parents with a 3-month-old daughter who shows signs of colic. The inconsolable crying is wearing on the parents' sense of their ability to care for their child. They find the colic cry pattern very disruptive in their daily lives.




When you review the scores of the *FNS* and *PFS:SF*, you find that this family's social support is very low, and there is a history of family violence in the mother's family of origin. You've also learned through your first conversations that both parents are only children and have very limited experience with infants and toddlers.

These items hang together in a meaningful way as you assess what topics might be most important at the beginning and what topics could be challenging to address early in a home visitor-family dyad. These items can also give insight into a topic that provides a pathway to address multiple concerns between your assessment and the family's stated needs.





Just from the description of the family above, what might you want to focus on first? Second?

How might you find a way to wrap more difficult conversations into a context that is easier to start with and build trust and rapport?






Everyday Moments: Daily Care and Living Routines

| TOPICS | Protective Factors |
|-------------------------|--|
| Sleeping |  Parental Resilience  Knowledge of Parenting and Child Development  Social and Emotional Competence of Children |
| Nutrition and Feeding | |
| Diapering and Toileting | |
| Bathing and Dressing | |






Everyday Moments: Young Children's Play and Exploration

| TOPICS | Protective Factors |
|--|---|
| Exploring and Learning about the World |  Concrete Supports of Families  Parental Resilience  Knowledge of Parenting and Child Development  Social and Emotional Competence of Children |
| Building Trusting Relationships | |
| Nurturing Guidance and Discipline | |
| | |

Everyday Moments: Parenting Life

| TOPICS | Protective Factors |
|---|---|
| Co-Parenting and Sharing Care |  Social Connections  Concrete Supports of Families  Parental Resilience  Knowledge of Parenting and Child Development  Social and Emotional Competence of Children |
| Parental Self-Care | |
| Loss, Grief, and Growth in Young Families | |
| | |

Special Focus Moments: Military Family Life

| TOPICS | Protective Factors |
|-----------------------------------|---|
| Parental Absence in Military Life |  Social Connections  Concrete Supports of Families  Parental Resilience  Knowledge of Parenting and Child Development  Social and Emotional Competence of Children |
| Parenting After Injury | |
| | |
| | |

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Steps 4a-b: Lesson Preparation and Implementation

The *Visit Planning & Reporting Form* should be used to prepare for each visit. This form helps you complete the process of choosing a topic and the particular pieces of information you want to bring into conversation at the visit. The form also guides you as you collect the appropriate resource materials, including *Family Pages*, to bring to the visit. It provides space to record parents' thoughts and contributions during the visit, making visible the partnership that is growing between you and the families in your caseload.



The *Visit Planning & Reporting Form* models the steps of a home visit we outlined earlier. While it is not mandatory to do these steps in this order, each of the elements serve to create opportunities for conversations, build trust and rapport, and engage with families who come from a spectrum of positive and negative experiences with outside personnel in family and child services.

Using the *Visit Planning & Reporting Form*, you are able to quickly identify the *Moment* you want to share with the family. Each *Moment* chapter is your one-stop-shop. In each chapter you will find the following:

- Background content for you, including research, common concerns of parents, and *Boots on the Ground* strategies to share with families;
- *Family Pages*;
- Suggested parent-child activities; and
- Recommended links to national and community resources.

The *Visit Planning & Reporting Form* gives you the opportunity to make sure the parent's voice is heard and acknowledged in the space labeled "What a parent wants to share with or show to me." For example, a parent may have shown you what safe sleep recommendations have been completed since the last visit or disclosed some family history that they are only now comfortable sharing.

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Visit Planning & Reporting Form

| | | |
|------------|--------------------------------------|---|
| Family ID: | Visit Date Scheduled: | Completed <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Visit Date Completed (If Different): | |

Protective Factors Focus During Visit:

| | Planned | Addressed |
|---|--|--|
| Social Connections | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Concrete Supports | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Social and Emotional Competence of Children | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Parental Resilience | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Knowledge of Parenting and/or Child Development | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Everyday Moment Topic and Touching Base (from Last Visit):

| Planned (e.g. Safe Sleep/Sleep Routines) | Completed |
|--|--|
| a) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Actual, if different: | Completed |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Handouts/Resources/Family Pages:

| Planned (e.g. Resource/Safety Sheets, Family Pages) | Completed |
|---|--|
| a) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c) | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Actual, if different: | Completed |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Any additional time spent on an item? Please explain.

| | | |
|-----------------------------|--------------------------------|---|
| Parent Shares and/or Shows: | Planned Parent/Child Activity: | Completed <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Actual, if different: | |
| Additional Notes: | | |

Visit Planning & Reporting Form

| Amount of Time Spent On: | Planned topic and activities | Back-up topic and activities | Addressing immediate needs (*not crisis) | Additional resource sharing | Crisis management for safety, food, shelter | Assessment or paperwork with parent | Assessment of child |
|--|------------------------------|------------------------------|--|-----------------------------|---|-------------------------------------|---------------------|
| Cannot exceed 100% total across categories | | | | | | | |

Reflection on Resilience/Strengths Seen in Parent/Family:

Reflection on Notes of Concerns for Parent/Family:

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Step 4c: Post-Visit Documentation and Planning

The *Visit Planning & Reporting Form* also helps you reflect on what actually happened during a visit and start preparing for next steps and the next visit. Developed to work as part of an evaluation of both the TRHV curriculum and a program's implementation of the curriculum, this form is not intended to replace current visit documentation. Consult with your supervisor to see what documentation is still needed for your program.

Post-visit documentation is important for several reasons:


- Track progress and change over time;
- Reflect on elements of resilience and strength seen in the parent/family/child;
- Identify points of concern and improvement;
- Identify potential needs for referrals to other programs and professionals; and
- Document if what is planned for the visit is close to or different from what occurs during the visit.

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Post-visit documentation is a good way for you to identify patterns when working with families. This type of documentation can help you and your program assess whether the current approach and interventions are appropriate for the family.

Two short checklists at the end of the *Visit Planning & Reporting Form* help you determine if there are particular action items that need to be completed after a visit:

- The first 4-item checklist identifies items outside the scope of providing prevention support—items that need to be brought to the attention of one’s supervisor, other program contacts, or a crisis management contact. These are considered external to most home visitation programs; the majority of home visitation programs are prevention-focused and non-clinical, yet families participating in a home visitation program may also need clinical or other interventional support.
- The second 4-item checklist highlights particular follow-up actions, such as a call, earlier return visit, or a need to find certain resources for the next visit.


Visit Planning & Reporting Form

Follow-up Action Items:

| External to HV Visit Planning: | Completed: | Date Completed: | Internal to HV Visit Planning: | Completed: | Date Completed: |
|-------------------------------------|------------------------------|-----------------|--|------------------------------|-----------------|
| Follow-up with supervisor/colleague | <input type="checkbox"/> Yes | | Follow-up call with parent | <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> No | | | <input type="checkbox"/> No | |
| | <input type="checkbox"/> N/A | | | <input type="checkbox"/> N/A | |
| Start a mandated reporting query | <input type="checkbox"/> Yes | | Plan next visit sooner | <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> No | | | <input type="checkbox"/> No | |
| | <input type="checkbox"/> N/A | | | <input type="checkbox"/> N/A | |
| Make a referral | <input type="checkbox"/> Yes | | Gather resources to share | <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> No | | | <input type="checkbox"/> No | |
| | <input type="checkbox"/> N/A | | | <input type="checkbox"/> N/A | |
| Engage crisis management team | <input type="checkbox"/> Yes | | Select curriculum for next visit to start addressing issue | <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> No | | | <input type="checkbox"/> No | |
| | <input type="checkbox"/> N/A | | | <input type="checkbox"/> N/A | |
| Other: | <input type="checkbox"/> Yes | | Other: | <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> No | | | <input type="checkbox"/> No | |
| | <input type="checkbox"/> N/A | | | <input type="checkbox"/> N/A | |

Items to Revisit at Next Visit:

Topics/Concerns/Plans

Home Visitation Visit Cycle and Periodic Updates of Information

Once a home visitation plan is established with a family, the *Visit Planning & Reporting Form* is used to prepare for and report on each visit. Every 6 months a parent is in the home visitation program, TRHV strongly recommends that a reassessment be completed.

This means having parents fill out the *FNS* and the *PFS:SF* and reflect on the *Parent Information Form* to determine where they currently are in their goals and dreams for themselves and their child. While it is not standard practice across all Military Services to use the *FNS* as a repeat measure, it is standard practice in at least one Service.

The *PFS:SF* is designed as a pre-post measure. These measures can be used at 6-month intervals or, if a family closes participation, as closure measures.



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In Summary

TRHV recommends certain actions for home visitors to engage with parents and build strong home visitor-parent alliances. There are four integrated forms that support the home visitor in making the most of the TRHV curriculum, and they define the planning, preparation, implementation, and reporting cycle: the *Intake/Update Form*, the *Parent Information Form*, and the *Visit Planning & Reporting Form*. Information on each form provides guidance to the home visitor while allowing the curriculum to be tailored to each family receiving services.

In the next section of this manual, a practical example demonstrates how to pull the information gathered through the *FNS*, *PFS*, and *Parent Information Form* into a meaningful assessment-preparation-reporting loop for the first visit with a planned topic. TRHV is designed to give you, the home visitor, an array of strong options for selecting *Moments* that attend to the strengths and needs of each family while creating conversations that build trust, engagement, and knowledge.

