

# Family Strengthening Network Home Visitation Programs

Updated 4.29.14

## Life Skills Progression Screening

### Purpose

The Life Skills Progression (LSP)<sup>i</sup> is a summary tool that home visitors use to gather and organize information about families competencies obtained from visits, screening tools and observations of the family. The LSP is not intended to be administered via interview, parent self-report, or during a home visit. Instead, a home visitor scores the LSP items by considering in-depth information about the family that has been collected through referral information, interviews and conversation, observations of family functioning, formal assessments, and selected screening tools. This information is used to develop a profile of family strengths and needs, service plans, and monitor progress in outcomes.

### Suggested Timeframe

5-10 minutes

### Materials/Supplies Needed

LSP Book Chapter 5 & 6

LSP Form

Handout “Question Examples to help gather LSP© item Information”

Verify that Consent & Authorization have been obtained for participation in your home visitation program.

### Screening Visits

Infants Age:

- |               |             |             |              |
|---------------|-------------|-------------|--------------|
| • 2 to 4 week | • 18 Months | • 36 Months | • 54 Months  |
| • 6 Month     | • 24 Months | • 42 Months | • 60 Months  |
| • 12 Months   | • 30 Months | • 48 Months | • At Closure |

Policies	Procedures
<p><b>Completion of the LSP Tool:</b></p> <p>1. The LSP screening tool will be completed following these Visits:</p> <ul style="list-style-type: none"> <li>✓ 2 to 4 week Postpartum</li> <li>✓ Every 6 months and at closure of</li> </ul>	<ul style="list-style-type: none"> <li>• Verify that the appropriate consent for service agreements and authorization to share information forms have been completed, e.g., consent for your program.</li> <li>• Complete the LSP paper form following each of the listed time points.</li> <li>• The LSP form should be completed in the office following a visit.</li> <li>• Information collected on the LSP form is obtained from visits, interviews, screening tools</li> </ul>

Policies	Procedures
the client	and observations of the family and pertains to events and occurrences over the prior six months.
2. LSP Tool will be completed for the mother or primary care giver of the program infant.	<ul style="list-style-type: none"> <li>• Use one LSP form to record information related to the mother or primary care giver of the program infant. (Separate forms for the mother/care-giver at each engagement visit).                             <ul style="list-style-type: none"> <li>✓ Information or observations about other adults who may participate in the visit may be noted on the mother’s LSP form.</li> <li>✓ Home Visitation programs will <b>not</b> be completing LSP forms on the father of the baby, unless he is the primary care giver.</li> <li>✓ Home Visitation programs will <b>not</b> be completing LSP forms on grandparents or other adults living in the home.</li> <li>✓ Home Visitation programs will <b>not</b> be completing LSP form page 5 “Infant / Toddler Development” on the other children in the home.</li> </ul> </li> <li>• The Home Visitor does <b>not</b> need to complete Item #16 “Immigration” on page 2.</li> </ul>
3. The Infant/Toddler Section of the LSP Tool (page 5) will be completed for the program infant only.	<ul style="list-style-type: none"> <li>• Complete the Infant/Toddler Section of the LSP Tool (page 5) for the Program Infant only. Do not complete this form for other children in the home, since First 5 LA does not require conducting ASQ-3 or ASQ-SE screenings on these other children.</li> </ul>
4. Gather Information to complete the LSP Screen	<ul style="list-style-type: none"> <li>• Information collected on the LSP form is obtained from visits, interviews, screening tools and observations of the family and pertains to events and occurrences over the prior six months.</li> <li>• Use “reflective questions” when talking with clients to gain information on the items listed on the LSP tool.                             <ul style="list-style-type: none"> <li>✓ Refer to the Handout “Question Examples to help gather LSP Item Information” provided during the LSP Training</li> </ul> </li> <li>• Integrate use of these questions into your routine assessments.</li> <li>• Recommend developing a list of common and effective open ended questions to use as reminders when gathering this information.</li> </ul>
5. Score the LSP Tool according to guidelines defined in the LSP Manual	<ul style="list-style-type: none"> <li>• The LSP form should be completed in the office following a visit.</li> <li>• Complete the form by circling the pertinent information for each item (row) listed in each of the scale columns.</li> <li>• Review LSP Manual Chapter 5 as you score your first few LSP forms.</li> <li>• The specific items completed may vary by visit. (Refer to the LSP manual, Chapter 5 for specific instructions on each item.)</li> <li>• Enter the scores for each item (row) in the score column for later data entry.</li> <li>• Each Item is scored separately; there is no cumulative score.</li> </ul>

Policies	Procedures
	<ul style="list-style-type: none"> <li>• Enter the scores onto the “Life Skills Progression Cumulative Score Sheet”.</li> <li>• Review form and identify opportunities for education and/or referral.</li> <li>• Review form and plans for education and/or referrals with clinical supervisor.</li> </ul>
<p><b>Establish Scoring Consistency:</b></p> <p>6. The Clinical Supervisor will establish and maintain practices to ensure consistency in scoring the LSP tool across staff and among clients.</p>	<ul style="list-style-type: none"> <li>• The Clinical Supervisor will review each LSP form with the home visitor during weekly individual reflective supervision for the first six weeks after beginning use of the LSP Tool and the Clinical Supervisor will sign the final form, to indicate agreement with the final score.</li> <li>• The Clinical Supervisor will review each LSP form with the home visitor as part of weekly reflective practice on an ongoing basis.                             <ul style="list-style-type: none"> <li>✓ Use reflective questions</li> <li>✓ Guide staff towards identification of strengths and assets of the family and themselves using reflection and affirmation</li> <li>✓ Listen actively to family and staff issues</li> <li>✓ Provide support to each individual staff member</li> <li>✓ Model “client centeredness” by letting the staff member take the lead in prioritization of the session</li> <li>✓ Support collaborative and individual reflective thinking</li> <li>✓ Support intervention planning and design reflective questions for use with individual parents</li> <li>✓ Provide expert knowledge, guidance, resources and direction when necessary</li> <li>✓ Encourage self-assessment and professional growth</li> <li>✓ Notice and celebrate family growth</li> <li>✓ Identify training and orientation needs and program service issues</li> </ul> </li> <li>• Read and refer to Chapter 6 in the LSP Manual for guidelines in using the LSP during reflective practice.</li> </ul>
<p><b>Client Privacy:</b></p> <p>7. All client information will be collected and filed in a manner that ensures privacy.</p>	<ul style="list-style-type: none"> <li>• All LSP paper forms that contain personal identifying information will be kept in a locked filing cabinet when not in use by home visitation staff.</li> <li>• After completing documentation and/or data entry, staff will promptly return files to the appropriate locked filing cabinet. No client LSP forms will be left on desks when not in use or overnight.</li> <li>• Do <b>not</b> upload the LSP form onto the Stronger Families Database, as this violates copyright laws.</li> </ul>
<p><b>Documentation and Data Entry:</b></p> <p>8. All client paperwork and data entry will be completed in a timely manner.</p>	<ul style="list-style-type: none"> <li>• The Home Visitor or Data Entry Clerk/Administrative Support staff will complete entry of the LSP scores into the Stronger Families Database within one to three business days of completing the visit.</li> <li>• <b>Note:</b> during the first six weeks after beginning LSP screening, the data will be entered into the Stronger Families Database after the form has been signed by the Clinical Supervisor.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Page 2. Item # 16 “Immigration” is not required and not included in the database.</li> <li>• As of February 2014 the following items are not available for data entry into the database. These items will be added to the database in FY 2014-2015, and this information will need to be back entered at a later time. Please make sure to keep the paper forms.               <ul style="list-style-type: none"> <li>Page 1.                   <ul style="list-style-type: none"> <li>✓ # 5. Nurturing</li> <li>✓ # 6. Discipline</li> <li>✓ # 7. Support of Development</li> </ul> </li> <li>Page 2. Relationships with Child(ren)                   <ul style="list-style-type: none"> <li>✓ # 8. Safety</li> </ul> </li> <li>Page 3. Health &amp; Medical Care                   <ul style="list-style-type: none"> <li>✓ # 19. Family Planning</li> <li>✓ # 20. Child Well Care</li> <li>✓ # 21. Child Sick Care</li> <li>✓ # 22. Child Dental Care</li> <li>✓ # 23. Child Immunizations</li> </ul> </li> <li>Page 4. Basic Essentials                   <ul style="list-style-type: none"> <li>✓ # 35. Child Care</li> </ul> </li> <li>Page 5. Infant/Toddler Development                   <ul style="list-style-type: none"> <li>✓ # 36. Communication (from ASQ-3)</li> <li>✓ # 37. Gross Motor (from ASQ-3)</li> <li>✓ # 38. Fine motor (from ASQ-3)</li> <li>✓ # 39. Problem Solving (from ASQ-3)</li> <li>✓ # 40. Personal Social (from ASQ-3)</li> <li>✓ # 41. Social and emotional (from ASQ-SE)</li> <li>✓ # 42. Regulation</li> <li>✓ # 43. Breastfeeding</li> </ul> </li> </ul> </li> </ul>

<sup>1</sup> Wollesen, L. & Peifer K (2006). Life Skills Progression. An Outcome and Intervention Planning Instrument for Use with Families at Risk. Baltimore, MD: Paul H. Brookes Publishing Co.