



Social-Emotional Needs of the Family During Assessment

The emotional well-being of every family and a child's social-emotional development impacts the way a child learns, explores, and interacts with those around them. Every practitioner plays a crucial role when considering the social-emotional needs of families during an assessment. Practitioners support families by explaining and engaging them throughout the process. The information they gather and observe helps inform clinical reasoning and decision-making for the team, including the family.

Practitioners will consider ways to support the social-emotional needs of the caregiver and child including examples of what this looks like in practice.



How does the assessment team consider the social-emotional needs of the caregiver and child?

- Include questions about social-emotional skills during intake and assessments from all significant individuals supporting the child's development.
- Observe the child in multiple situations and settings, paying attention to the caregiver-child interactions, child's engagement with those around them, and ability to express and regulate their emotions.
- Support the caregiver's capacity to take a strengths-based approach to build their child's confidence and intrinsic motivation to learn.
- When using your clinical reasoning to analyze information, consider family dynamics, cultural norms, social history (ex. trauma, birth, environment, etc) and child temperament before making recommendations.
- When reporting assessment results to the family, check for understanding and observe nonverbal cues to offer opportunities for clarifying questions from caregivers.



What does this look like?

- The Service Coordinator calls to schedule the assessment and the caregiver states they are feeling stressed with a lot of appointments with their child's medical needs and balancing work. A team member provides options based on family preferences to find optimal times that minimize additional stress for the caregivers.
- A family expresses concerns about their child being "headstrong." On the next visit, the practitioner completes a temperament tool with the family. They review results and discuss together.
- The assessment team asks the primary caregiver if there are other family members who should be present during the evaluation, for example, another caregiver who knows the child well and in a different context. The caregiver mentions the child attends a child care program two days a week, but cannot attend. The caregiver will ask the teacher to provide updates in writing for the team at the assessment.
- During the assessment, the team observes the caregiver's interactions when the child is upset. They observe the child's responses to the caregivers including their body language and communication.
- During the assessment, the service coordinator notices the caregiver's body language changes. The service coordinator asks if the caregiver would like to take a five minute break.



Additional Resources

[Breadth of the Three Child Outcomes](https://ectacenter.org/~pdfs/eco/three-child-outcomes-breadth.pdf)

<https://ectacenter.org/~pdfs/eco/three-child-outcomes-breadth.pdf>

[Authentic Child Assessment](https://youtu.be/KlqiLNT8Yx8)

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[Practice Improvement Tools: Practice Guides for Practitioners](https://ectacenter.org/decrp/type-pgpractitioner.asp)

<https://ectacenter.org/decrp/type-pgpractitioner.asp>

[Practice Improvement Tools: Performance Checklists](https://ectacenter.org/decrp/type-checklists.asp)

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This guide is based on **[DEC Recommended Practices](http://dec-sped.org/recommendedpractices)**: (<http://dec-sped.org/recommendedpractices>) and **[IECMH Competencies](https://www.vaimh.org/competency-guidelines)** (<https://www.vaimh.org/competency-guidelines>).

