FAMILY ADVOCACY AND SUPPORT TOOL

A family planning and outcome tool for understanding family circumstances
And assisting in planning for services and reunification
The Family Advocacy and Support Tool (FAST) is the family version of the Child and Adolescent Needs and Strengths (CANS) family of planning and outcome management tools. The purpose of the FAST is to support effective interventions when the focus of those efforts is on entire families rather than single individuals. The most common use of the FAST is in efforts to address the needs of families who are at risk of child welfare involvement.

The FAST is a communimetric tool, like the CANS and the Adult Needs and Strengths Assessment (ANSA) (Lyons, 2009). It is designed to maximize communication about the needs and strengths of families. The FAST includes ratings of the Family Together, each individual Caregiver, and all the individual children and youth. Interventions in the family system can be directed at that system or to address the individual needs of family members or dyadic relationships within the family.

Unlike the CANS and ANSA, however, the FAST has only one action-level framework for its items.

- 0 – No evidence of a need, this may be a strength
- 1 – Watchful waiting, prevention
- 2 – Action
- 3 – Immediate or intensive action (dangerous or disabling)

Items identified as a ‘0’ are often strengths that can be used in strength-based planning. Items rated a ‘1’ should be monitored and preventive efforts might be indicated. Items rated a ‘2’ or ‘3’ are “actionable” and should be addressed in the intervention plan.

The original version of the FAST, called the Multi-level Family Assessment, was developed in collaboration with Margaret Nickels, Ph.D., at the Juvenile Protection Agency in Chicago, Illinois. Following its initial use in a family therapy program to prevent child abuse and neglect, this tool was further developed into the FAST in collaboration with representatives of Family Support Organizations in New Jersey. It has been further refined in various applications in Illinois, New York, and Tennessee. As such, a large number of individuals have contributed to the design, development and refinement of the FAST. It is an open domain tool, free for anyone to use. We recommend training and certification to ensure its proper and reliable use. For more information, please contact:

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<table>
<thead>
<tr>
<th>The Family Together</th>
<th>Family</th>
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<tbody>
<tr>
<td>1. Financial Resources</td>
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<td>2. Residential Stability</td>
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<tr>
<th>Caregivers (Primary = Caregiver 1)</th>
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<td>25. Relationship with Primary Caregiver</td>
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NOTE: All ratings are on a 4-point scale with the following action levels: '0' (no evidence of a need), '1' (watchful waiting, prevention), '2' (action needed), or '3' (immediate or intensive action needed).
1. **Financial Resources**  
   *This item refers to the income and other sources of money available to family members (particularly caregivers) that can be used to address family needs.*
   
   - **0** No difficulties. Family has financial resources necessary to meet needs.
   - **1** Mild difficulties. Family has financial resources necessary to meet most needs; however, some limitations exist.
   - **2** Moderate difficulties. Family has financial difficulties that limit their ability to meet significant family needs.
   - **3** Significant difficulties. Family is experiencing financial hardship, poverty.

2. **Residential Stability**  
   *This item refers to the stability of the family’s housing. This does not refer to the risk of placement outside of the family home for any member of the family.*
   
   - **0** Family has stable housing for the foreseeable future.
   - **1** Family having some difficulties maintaining housing due to things such as difficulty paying rent or utilities or conflict with a landlord.
   - **2** Family has had to move in the past six months due to housing difficulties.
   - **3** Family has experienced homelessness in the past six months.

3. **Physical Condition of Home**  
   *This item refers to the physical condition of the house or apartment in which the family is currently residing. Shelters would be rated “Not applicable”.*
   
   - **0** No health or safety concerns on property.
   - **1** Minor health concerns on property that pose no threat and easily correctable.
   - **2** Serious substantiated health or safety hazards, i.e. overcrowding, inoperative or unsafe water and utility hazards, vermin, or other health and sanitation concerns.
   - **3** Substantiated life threatening health or safety hazards, i.e. living in condemned and/or structurally unsound residence; exposed wiring, potential fire/safety hazards, or vermin infestation.
4. **Home Maintenance**

This item refers to housekeeping both in terms of cleanliness and organization and safety from dangerous materials and/or objects (e.g. child proofing). Families living in a supported housing arrangement (e.g. shelter) would be rated “Not applicable”.

0  Home is clean, maintained well; poisons and medications are locked up/stored away properly and out of reach. Home is child proofed; kitchen and bathroom are functional; all utilities are operational; everyone has a bed and outlets are plugged. No concerns.

1  Most precautions have been taken; no danger to the children, poisons and medication are out of reach but not locked up; home is mostly child proof, utilities are operational; minor cleaning is required, some odor present.

2  Some precautions have been taken, but potential hazards are obvious, e.g. poisons and medication out of sight but within reach of child(ren), overloaded outlets, matches and knives accessible but out of sight. Gas, heating, electricity, or plumbing sometimes don’t work because bills have not been paid or needed repairs have not been attended to by the family. Home is somewhat cluttered. House needs general cleaning, e.g. bathroom, bedrooms, kitchen, and basement. Beds are needed.

3  Home is not safe. Poisons and medications are visible and accessible, no screens on second floor windows for toddlers, outlets not plugged, few precautions taken; utilities off, due to neglect of bills or needed repair. No beds for children, parent(s). No refrigerator. Home is dirty, kitchen presents odor due to spoiled food.

5. **Natural Supports**

Natural supports refer to help that you do not have to pay for. This could include friends and families or a church or other organization that helps the family in times of need.

0  Caregiver(s) has substantial natural supports to assist in addressing most family and child needs.

1  Caregiver(s) has natural supports but some limitations exist whereby these supports are insufficient to address some family and child needs.

2  Caregiver(s) has limited natural supports.

3  Caregiver(s) has no natural supports.

6. **Family Conflict**

This item refers to how much fighting occurs between family members. Domestic violence refers to physical fighting in which family members might get hurt.

0  Minimal conflict. Family gets along well and negotiates disagreements appropriately.

1  Some Conflict. Family generally gets along fairly well but when conflicts arise resolution is difficult.

2  Significant conflict. Family is generally argumentative and conflict is a fairly constant theme in family communications.

3  Domestic violence. Threat or occurrence of physical, verbal or emotional altercations. Family with a current restraining order against one member would be rated here.
7. Resiliency
*This rating should be based on the family’s ability to identify and use internal strengths in managing their lives*

0  This level indicates a family that is able to both identify and use internal strengths to better themselves and successfully manage difficult challenges.
1  This level indicates a family that is able to identify internal strengths and is able to partially utilize them.
2  This level indicates a family that is able to identify internal strengths but is not able to utilize them effectively.
3  This level indicates a family that is not yet able to identify internal personal strengths.

8. Family Safety
*This item refers to the degree to which family members are safe from being physically injured in the home.*

0  No Risk. Family provides a safe home environment for all family members.
1  Mild risk. Family home environment presents some mild risks of neglect or exposure to undesirable influences (e.g., alcohol/drug abuse, gang membership of family members) but not immediate risk is present.
2  Moderate risk. Family home environment presents moderate risk to family members including abuse and neglect or exposure to individuals who could harm the youth.
3  Severe risk. Family home environment presents a clear and immediate risk of harm to family members. Individuals in the environment present immediate risk of significant physical harm.

CAREGIVERS

9. Adjustment to Traumatic Experiences
*This rating covers the reactions of individuals to a variety of traumatic experiences. This dimension covers both adjustment disorders and post-traumatic stress disorder from DSM-IV.*

0  Caregiver has not experienced any trauma or has adjusted well to significant traumatic experiences.
1  Caregiver has some mild adjustment problems and exhibits some signs of distress.
2  Caregiver has marked adjustment problems and is symptomatic in response to a traumatic event (e.g., anger, depression, and anxiety).
3  Caregiver has post-traumatic stress difficulties. Symptoms may include intrusive thoughts, hyper-vigilance, constant anxiety, and other common symptoms of Post-Traumatic Stress Disorder (PTSD).

10. Physical Health
*This item refers to chronic medical conditions such as asthma, diabetes, HIV/AIDS, etc.*

0  Caregiver is generally healthy.
1  Caregiver is in recovery from medical/physical problems.
2  Caregiver has medical/physical problems that interfere with his/her capacity to parent.
3  Caregiver has medical/physical problems that make it impossible for him/her to parent at this time.
11. Developmental

*This item refers to intellectual and developmental disabilities such as mental retardation, autism, etc.*

0  Caregiver has no developmental needs.
1  Caregiver has developmental challenges but they do not currently interfere with parenting.
2  Caregiver has developmental challenges that interfere with his/her capacity to parent.
3  Caregiver has severe developmental challenges that make it impossible for him/her to parent at this time.

12. Mental Health

*This item refers to mental health needs only (not substance abuse or dependence).*

0  Caregiver has no mental health needs.
1  Caregiver is in recovery from mental health difficulties.
2  Caregiver has some mental health difficulties that interfere with his/her capacity to parent.
3  Caregiver has mental health difficulties that make it very difficult or impossible for them to parent at this time.

13. Substance Use

*This item includes problems with alcohol, illegal drugs and/or prescription drugs.*

0  No problems with alcohol or drug use. Caregiver has no signs of any notable substance abuse problems.
1  Mild problems associated with alcohol or drug use. Caregiver may have mild problems with work or home life that result from occasional alcohol or drug use.
2  Moderate problems associated with alcohol or drug use. Caregiver has a diagnosable substance-related disorder that interferes with his/her life.
3  Significant difficulties with alcohol or drug use. Caregiver is currently addicted to either alcohol or drugs or both.

14. Criminal Behavior

*This item refers to the caregiver’s history of prior felony or misdemeanor convictions.*

0  There is no evidence that the caregiver has ever engaged in criminal behavior.
1  The caregiver has a prior misdemeanor conviction.
2  The caregiver has a prior felony conviction (more than 5 years old).
3  The caregiver has a prior felony conviction that is less than 5 years old or is presently involved in a criminal case that has not been adjudicated.

15. Supervision

*This item refers to the success with which the caregiver is able to monitor children in his/her care. This item should be rated consistent with the developmental needs of the children in care.*

0  Good supervision. Caregiver demonstrates consistent ability to supervise her/his children according to their developmental needs.
1  Adequate supervision. Caregiver demonstrates generally good ability to supervise children; however, some problems may occur occasionally.
2  Fair supervision. Caregiver has difficulty maintaining an appropriate level of supervision of her/his children.
3  Significant difficulties with supervision. Caregiver has significant problems maintaining any supervision of her/his children.
16. Discipline
Discipline refers to the caregiver’s ability to encourage positive behaviors by children in his/her care through the use of a variety of different techniques including but not limited to praise, redirection, and punishment.

0  Good discipline methods. Caregiver generally demonstrates an ability to discipline her/his children in a consistent and benevolent manner. She/he usually is able to set age appropriate limits and to enforce them.

1  Adequate discipline methods. Caregiver is often able to set age appropriate limits and to enforce them. On occasion her/his interventions may be either too harsh or too lenient. At times, her/his expectations of her/his children may be too high or too low.

2  Inadequate discipline methods. Caregiver demonstrates limited ability to discipline his or her children in a consistent and benevolent manner. She/he rarely is able to set age appropriate limits and to enforce them. Her/his interventions may be erratic and overly harsh but not physically harmful. Her/his expectations of her/his children are frequently unrealistic.

3  Significant difficulties with discipline methods. Caregiver disciplines her/his children in an unpredictable fashion. There is either an absence of limit setting and disciplinary interventions or the limit setting and disciplinary interventions are rigid, extreme, and physically harmful.

17. Involvement in Caregiving Functions
This item refers to the degree to which the caregiver is actively involved in being a parent/caregiver.

0  Caregiver is actively and fully involved in daily family life.

1  Caregiver is generally involved in daily family life. She/he may occasionally be less involved for brief periods of time because she/he is distracted by internal stressors and/or other external events or responsibilities.

2  Caregiver is involved in daily family life but only maintains minimal daily interactions for extended periods of time.

3  Caregiver is mostly uninvolved in daily family life. She/he may not interact with children on a daily basis.

18. Knowledge of Child and Family Needs
This item refers to the caregiver’s ability to recognize the needs of the family and individual family members.

0  Caregiver has strong understanding of family and child needs.

1  Caregiver has understanding of family and child needs but may still require some help in learning about certain aspects of these needs.

2  Caregiver requires assistance in understanding family and/or child needs.

3  Caregiver requires substantial assistance in identifying and understanding family and child needs.

CHILDREN

19. Physical Abuse
Please rate the child’s lifetime experiences

0  There is no evidence that youth has experienced physical abuse.

1  Youth has experienced one episode of physical abuse or there is a suspicion that youth has experienced physical abuse but no confirming evidence.

2  Youth has experienced repeated physical abuse.

3  Youth has experienced severe and repeated physical abuse that causes sufficient physical harm to necessitate hospital treatment.
20. Sexual Abuse

*Please rate the child's lifetime experiences*

- **0** There is no evidence that youth has experienced sexual abuse.
- **1** Youth has experienced one episode of sexual abuse or there is a suspicion that youth has experienced sexual abuse but no confirming evidence.
- **2** Youth has experienced repeated sexual abuse.
- **3** Youth has experienced severe and repeated sexual abuse. Sexual abuse may have caused physical harm.

21. Emotional Abuse

*Please rate the child's lifetime experiences*

- **0** There is no evidence that youth has experienced emotional abuse.
- **1** Youth has experienced mild emotional abuse.
- **2** Youth has experienced emotional abuse over an extended period of time (at least one year).
- **3** Youth has experienced severe and repeated emotional abuse over an extended period of time (at least one year).

22. Neglect

*Please rate the child's lifetime experiences. This refers to failure to provide adequate supervision and expectations and access to the basic necessities of life, including food, shelter, and clothing.*

- **0** No evidence of neglect.
- **1** Mild level of neglect of caretaker responsibilities, such as failure to provide adequate expectations or supervision to child.
- **2** Moderate level of neglect, including some supervision and occasional unintentional failure to provide adequate food, shelter, or clothing, with rapid corrective action.
- **3** Severe level of neglect, including prolonged absences by adults, without minimal supervision, and failure to provide basic necessities of life on a regular basis.

23. Education

*This item refers to the youth's status with school. If the youth has completed his/her schooling then use '0'. If youth has dropped out without completing then use a '3'.*

- **0** Good educational functioning. Youth is meeting or exceeding educational expectation at an age-expected grade level.
- **1** Adequate educational functioning. Youth is mostly meeting educational expectations at an age-expected grade level.
- **2** Fair educational functioning. Youth is performing below educational expectations and/or requires a specialized educational setting in order to learn at an adequate level.
- **3** Significant difficulties with educational functioning. Youth has significant educational problems including some behavioral problems related to academic difficulties (chronic truancy, suspensions, expulsions, being held back, etc.). Youth may be placed in a specialized educational setting but remains unable to learn at an adequate level.
24. Witness to Family Violence

*Please rate the family’s lifetime experiences.*

0  There is no evidence that youth has witnessed family violence.
1  Youth has witnessed one episode of family violence.
2  Youth has witnessed repeated episodes of family violence but no significant injuries (i.e. requiring emergency medical attention) have been witnessed.
3  Youth has witnessed repeated and severe episodes of family violence. Significant injuries have occurred as a direct result of the violence.

25. Relationship with Primary Caregiver

*This item refers to the youth relationship with the person who is his/her primary caregiver at the moment. This item is not applicable (N/A) for youth in congregate care environments.*

0  Adaptive relationship. Youth has a generally positive relationship with primary caregiver. The youth appears to have formed a secure attachment, and can turn to primary caregiver for security, comfort, or guidance.
1  Mostly adaptive relationship. Youth has a somewhat positive relationship with primary caregiver. The youth appears to have mild attachment problems that interfere with his/her ability to turn to primary caregiver for security, comfort, or guidance.
2  Limited adaptive relationship. Youth has a somewhat negative relationship with primary caregiver. The youth appears to have moderate attachment problems that interfere with his/her ability to turn to primary caregiver for security, comfort, or guidance.
3  Significant difficulties with relationship. Youth has no ongoing relationship with his/her primary caregiver. The youth appears to have severe attachment problems.
N/A  Not applicable

26. Physical Health

*This item is used to describe the youth’s current physical health.*

0  Youth has no physical limitations.
1  Youth has some physical condition that places mild limitations on activities. Conditions such as impaired hearing or vision would be rated here. Treatable medical conditions that result in physical limitations (e.g. asthma) would also be rated here.
2  Youth has physical or medical conditions that notably impact activities. Sensory disorders such as blindness, deafness, or significant motor difficulties would be rated here.
3  Youth has severe physical limitations due to multiple physical or medical conditions.

27. Developmental

*This item refers to the youth’s intellectual capacity. Problems could include mental retardation and learning difficulties that are a result of learning disabilities.*

0  Youth has no developmental problems.
1  Youth has some problems with immaturity or there are concerns about possible developmental delay. Youth may have low IQ.
2  Youth has developmental delays or mild mental retardation.
3  Youth has severe and pervasive developmental delays or profound mental retardation.
28. Mental Health
This item is used to describe the youth’s current mental health.

0  No mental health challenges. Youth has no signs of any notable mental health problems.
1  Mild mental health challenges. Youth may have mild problems with adjustment, may be somewhat depressed, withdrawn, irritable, or agitated.
2  Moderate mental health challenges. Youth has a diagnosable mental health problem that interferes with his/her functioning.
3  Significant challenges with mental health. Youth has a serious psychiatric disorder.

29. High Risk Behavior
High risk behaviors include self-injurious behavior, behavior that is dangerous to others, sexually promiscuous or aggressive behaviors, or delinquent behaviors.

0  No evidence that the youth engages in high risk behaviors.
1  History or suspicion of the youth engaging in high risk behaviors.
2  Clear evidence that the youth has engaged in high risk behaviors in the past 30 days.
3  Clear evidence that the youth has engaged in high risk behaviors that place the youth or others at risk of harm in the past 30 days.

30. Substance Use
Please rate the highest level from the past 30 days

0  No evidence
1  History or suspicion of substance use.
2  Clear evidence of substance abuse that interferes with functioning in any life domain.
0  Youth requires detoxification OR is addicted to alcohol and/or drugs. Include here a child/youth who is intoxicated at the time of the assessment (i.e., currently under the influence).
## FAST – Algorithm

### Intensity

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<th>Services</th>
<th>Current Algorithm</th>
<th>Example Definition</th>
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<td><strong>Criterion 3.1.</strong> Two or more Family Together items rated a '3'</td>
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<td><strong>Criterion 3.8.</strong> Two or more children with at least one item rated a '3'</td>
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Suggest **High Intensity** if family meets Criterion (3.1 OR 3.2) AND (3.3 OR 3.4 OR 3.5) AND (3.6 OR 3.7 OR 3.8)

| **Moderate Intensity** | | |
| **Criterion 2.1.** Two or more Family Together items rated a '2' or '3' |  |
| **Criterion 2.2.** One caregiver rating with 2 or more items rated a '2' or '3' |  |
| **Criterion 2.3.** Two caregivers with at least one item rated a '2' or '3' |  |
| **Criterion 2.4.** One child with two or more items rated a '2' or '3' |  |
| **Criterion 2.5.** Two or more children with one item rated a '2' or '3' |  |

Suggest **Moderate Intensity** if families meet Criterion 2.1 AND (2.2 OR 2.3) AND (2.4 OR 2.5)

| **Low Intensity** | | |
| **Criterion 1.1.** At least one Family Together item rated a '2' or '3' |  |
| **Criterion 1.2.** At least one Caregiver item rated a '2' or '3' |  |
| **Criterion 1.3.** At least one Child item rated a '2' or '3' |  |

Suggest **Low Intensity** if families meet Criterion 1.1 AND (1.2 OR 1.3)

- Initiate referrals for services to address identified needs
- Make required family contacts per policies
- Family plan should address all FAST items rated '2' or '3'
- Conduct TL staffing to monitor that needs are identified and progress assessed
- Administer FAST reassessment every 90 days to assess progress and continued needs
- Before case closure, ensure all services are in place and will continue after case closure

- Initiate referrals for services to address identified needs
- Make required family contacts per policies
- Family plan should address all FAST items rated '2' or '3'
- TL staffing for case closure
- Before case closure, ensure all services are in place and will continue after case closure

- Continue with tasks for investigation or assessment as outlined in policies and CPS work aides 2 and 3
- TL staffing required for case closure