



**State of Tennessee  
Department of Children's Services**

**Protocol for Completion of the Family Advocacy and Support Tool (FAST)**

**Supplemental to DCS Policies: 11.1 Assessment Process and Tools, 14.7 Child Protective Services Investigation Track, 14.26 Child Protective Services Assessment Track, and 14.29 Ongoing Non-Custodial Worker Responsibilities**

The purpose of the Family Advocacy and Support Tool (FAST) is to help identify safety concerns, underlying risks, needs and strengths of families involved with the Department. The FAST is the initial intervention assessment tool designed to be utilized with non-custodial children and families that have had contact with Child Protective Services (CPS) and any Ongoing Non-Custodial Services to include Family Crisis Intervention Program (FCIP) cases, Family Support Services (FSS) cases and any non-custodial aftercare services. The FAST assesses the family unit as a whole in order to determine child safety, identify risks, needs and assist workers in identifying protective factors. After evaluating these factors, the FAST then guides the case manager in identifying any needed planning and/or service provision. The initial FAST should be completed prior to or during any Child and Family Team Meetings to assist with this service planning. All children and caregivers in the household, regardless of age, are included in the FAST assessment. The FAST should be reassessed throughout the life of the case to evaluate implemented services and adjust, as necessary, to affect the desired change. DCS staff must be certified prior to completing the FAST.

**1. FAST Assessment**

A. The FAST is comprised of three assessment components all of which are completed within ten (10) business days of a referral on all CPS and Ongoing Non-Custodial cases, by gathering information from multiple sources including, but not limited to:

- a) Interviews with child(ren) and family
- b) Observations
- c) Records checks (see form [CS-0687. Background Check History and IV-E Eligibility Checklist](#))
- d) Collateral and/or witness interviews or reports
- e) Evaluations
- f) Medical records
- g) Educational records
- h) Pictorial tools (i.e. genogram, timeline, family map, photographs)
- i) Other assessment tools

**B. Safety Assessment Component**

The Safety Assessment component is comprised of 16 items of the FAST. These 16 items focus on immediate safety for the child and once addressed, will recommend if immediate intervention may be needed. The outcome to the Safety Assessment is designed to be used as a decision support tool to support planning and/or protective measures implemented for the child(ren). The 16 items included in the Safety Assessment include:

## **Subject: Protocol for Completion of the FAST**

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### Family Together:

- a) Physical Condition of the Home
- b) Home Maintenance
- c) Family Conflict
- d) Family Safety

### Caregiver:

- a) Developmental
- b) Mental Health
- c) Substance Use
- d) Criminal Activity
- e) Supervision
- f) Discipline
- g) Involvement in Caregiving Functions
- h) Knowledge of Youth and Family Needs

### Youth:

- a) Sexual Abuse Status
- b) Physical Abuse Status
- c) Emotional Abuse
- d) Neglect

Based on the ratings given in each section, the Safety Assessment will result in one of two outcomes: Immediate Intervention Recommended or Immediate Intervention Not Recommended. The worker will consider the outcome and, if necessary, address protective factors or safety concerns requiring intervention within the justification sections of the assessment tool. Each item of the Safety Assessment that is rated as a 2 or 3 requires a justification. The exception is Home Maintenance which will require a justification regardless of the rating.

### Timeframes:

- CPS - 72 hours from initial contact with the first child or completion of Good Faith Efforts
- Ongoing Non-Custodial -10 business days from referral

### C. Risk and Service Need Assessment Component

The Risk and Service Need Assessment component is comprised of the remaining fifteen (15) items of the FAST. These fifteen (15) items identify strengths, risks, needs and possible service planning for the child(ren) and family. Once the fifteen (15) items are rated, the worker will be provided a level of risk associated with the family. This outcome will assist the worker in the type of service provision needed. The outcome to the Risk and Service Need Assessment is designed to be used as a decision support tool to support plans or services identified for the child and family.

### Family Together:

- a) Financial Resources
- b) Residential Stability
- c) Natural Supports
- d) Resiliency

**Original Effective Date: 12/01/09**

**Supersedes: 01/01/13**

**Current Effective Date: 04/2016**

**Supplemental to: 11.1, 14.7, 14.26 & 14.29**

**RDA SW22**

## **Subject: Protocol for Completion of the FAST**

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### Caregiver:

- a) Adjustments to Trauma Experience
- b) Physical Health (Caregiver)

### Youth:

- a) Traumatic Grief
- b) Witness to Family, School or Community Violence
- c) Relationship with Primary Caregiver
- d) Education
- e) Physical Health (Youth)
- f) Developmental
- g) Mental Health
- h) Substance Use
- i) High Risk Behavior

Based on the ratings given in each section, the Risk and Service Needs Assessment results in one (1) of four (4) service intensity levels:

No Service Intensity – services not recommended and worker will continue to complete required tasks for case closure.

Low Service Intensity – worker may proceed to case tasks or closure contingent on supervisor approval and no new safety or risk concerns.

Moderate Service Intensity – worker may initiate referrals for appropriate services that have been identified for any family member's needs. If services are initiated, a plan should address the identified items from the assessment that led to the outcome (items rated 2 or 3). A case conference with the supervisor should be held to assess progress and to ensure identified needs are being addressed. If the worker proceeds without initiating services, the supervisor will review and determine if the decision is appropriate or will advise for additional needs of the family.

High Service Intensity – worker may initiate immediate referrals for appropriate services that have been identified for any family member's needs. A plan should be created to address the identified items that scored 2 or 3. A case conference with the supervisor should be held to assess progress and to ensure identified needs are being addressed. Case closure is not likely to occur until identified services have been put in place and progress can be observed.

### Timeframes:

- CPS - 10 business days from referral
- Ongoing Non-Custodial -10 business days from referral

### D. Trauma Score Component

The Trauma Score is automatically generated by TFACTS based on the ratings given to 6 specific items on the FAST. The Trauma Score is assigned to each youth assessed with a completed FAST. This score is based on the severity of ratings in the following FAST items:

- a) Sexual Abuse
- b) Physical Abuse
- c) Emotional Abuse

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## **Subject: Protocol for Completion of the FAST**

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- d) Neglect
- e) Traumatic Grief
- f) Witness to Family, School or Community Violence.

The Trauma Assessment is provided upon completion of the Risk and Service Needs Assessment and will provide the worker with a basic knowledge of potential trauma to the child and family. The trauma score can assist in guiding the service plans developed. While a lower score may indicate a need for services specifically addressing trauma, a higher end score represents the worker's assessment of multiple traumas present in the case that could be addressed through service provision.

### **2. FAST Reassessment**

#### **A. CPS Investigations**

For CPS Investigations, a reassessment of the FAST will be completed at case transfer or closure unless the previous FAST assessment was completed within the last thirty (30) calendar days. A reassessment of the FAST may also occur at any time during the life of the case to indicate a change in safety, risk, trauma or service need.

#### **B. CPS Assessments**

For CPS Assessments, a reassessment of the FAST will be completed at minimum every ninety (90) calendar days and/or at case closure (unless previous FAST was completed within thirty (30) calendar days of closure) in order to track progress and service efficacy. If the case is being transferred, an updated reassessment will be completed unless the previous FAST was within thirty (30) days of the transfer. A reassessment of the FAST may also occur at any time during the life of the case to indicate a change in safety, risk, trauma or service need.

#### **C. Non-Custodial Cases**

For all Non-Custodial cases, workers will reassess the FAST at a minimum of every ninety (90) calendar days following the date of the last FAST and/or at case closure (unless previous FAST was completed within thirty (30) calendar days of closure). A reassessment of the FAST may also occur at any time during the life of the case to indicate a change in safety, risk, trauma or service need.

### **3. Documentation**

Documentation within the FAST informs future work with a child and family. All ratings of a 2 or 3 must have justifications entered to indicate any identified protective factors, or a lack thereof, risk factors and services/interventions that have been put in place to address ongoing needs. Child and family strengths or ratings of 2 or 3 that have been identified through the FAST assessment should also be documented in the Family Functional Assessment.

### **4. Supervisor Approvals**

#### **A. Safety Assessment**

The Safety Assessment must be reviewed and approved by the supervisor within seventy-two (72) hours of submission by the worker.

## **Subject: Protocol for Completion of the FAST**

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### B. Risk Assessment

The Risk Assessment must be reviewed and approved by the supervisor within seventy-two (72) hours of submission by the worker.

### C. Reassessment

The supervisor will review the FAST reassessment during monthly case conferences with staff to ensure that progress is being tracked and adjusted, when necessary.

## **5. Training**

All DCS staff responsible for completing the FAST will need to be trained and certified by the regional Center of Excellence FAST Consultants. All applicable DCS staff will require yearly re-certification. In order to be certified, staff must score a 70 or above on a training vignette.

### **Reassignments**

When a CPS or Ongoing Non-Custodial case has been reassigned to another worker, location or program area (apart from a case transfer), communication between the appropriate supervisors is necessary to determine who will complete the Safety Assessment and Risk and Service Needs Assessment components of the FAST. Generally, the worker who possesses the most information will be expected to complete the initial FAST.