



## HOME CONDITIONS: GUIDANCE

### 1. Background

- 1.1 Workers can use this tool to assess the physical aspects of the home environment. It provides a clear focus for working with families on very specific aspects of parenting and of the impact of poor home conditions on their child.
- 1.2 This scale may appear critical, but workers necessarily make judgements about the safety, order and cleanliness of the place in which the child lives. The use of a list helps the objectivity of observation.
- 1.3 The scores have been found to correlate highly with children's abilities. Children from homes with low scores (low concerns about the conditions of the home) usually have better language and intellectual development. This does not mean that all children from high scoring homes, where there is a concern about home conditions, will have poor intellectual progress.
- 1.4 Like all methods of assessment it should not be used in isolation – other sources of information, including the quality of the parent-child relationship will contribute to the overall assessment.

### 2. The Scales

- 2.1 The assessment is based on the Family Cleanliness Scale devised by Davie and others (1984). It was included as an 11 item checklist in the Family Pack of Questionnaires and Scales published by the DOH as part of the 'Assessment Framework'.
- 2.2 This version of the Home Conditions tool has been amended and extended by Bruce Thornton and Associates in response to user feedback. It is now a 20 item scale. The scoring now includes a range of concerns, scored from 0 to 3. Originally it was scored 'yes or no'. The terminology used in the original scale has been adapted and one item removed.

### 3. Use

- 3.1 The scale can be used as a mental checklist to provide a framework for initial observation of home conditions.
- 3.2 It is particularly appropriate to use during the initial visit if home conditions are already identified as an issue. Once used, it is a method of keeping track of progress or deterioration. The significance of your observations will vary according to whether the visit was announced or unannounced.

- 3.3 The assessment can be undertaken jointly with the caregiver or with another worker; completed individually and the results compared; or as a professional assessment away from the home. It is not essential to be able to complete all sections, if for example access to different rooms is not possible. It will usually be helpful to share all that has been observed with the caregiver. This should promote a discussion about changes necessary to improve the home conditions as part of a care plan. However, in certain circumstances, discussing this directly may threaten the relationship with the caregiver, or be judged to be inappropriate. The worker is encouraged to exercise careful judgment in this matter and of course discuss with a supervisor if needed.
- 3.4 Individual items can be a focus for a piece of work. This might be to encourage the parent to attend to something that could pose a health risk to the children, or to bring in additional support where the parent is unlikely to be able to improve matters without help.
- 3.5 The scale should reflect the impact or relevance of the home condition to that particular child. E.g. a badly soiled floor will have a different impact on a very young child who is crawling compared to the impact on an older child.

#### **4. Scoring**

- 4.1 The scale is scored from 0 – 3, ranging from the 'Issue does not exist' to 'Very apparent/serious impact'.
- 4.2 Items are scored on the basis of what is observed. The scale charts the child environment as it is. This provides an objective baseline regardless of background.
- 4.3 Depending on the age of the child, different items may cause more or less concern. The higher the score the greater the concern.
- 4.4 Some of the items may require further action. Further action may be indicated regardless of a low or high score. You can make a note that further action is required by ticking the 'flag for attention' box.
- 4.5 For each of the 20 items, there is also space to make some notes about your observations. It is important to make specific comments about what was observed and the impact on the child, particularly if the score is negative. This reminds you when checking back, to track what progress has been made and to provide specific evidence of what you have seen.
- 4.6 At the end of the list of 20 items there is space for you to record a total score. This provides a baseline for your assessment and enables comparison over time.
- 4.7 At the end of the list of 20 items there is space for you to add the number of items that scored 3. This draws your attention to how many areas you identified where there is serious impact on the child. This also enables comparison over time.

**Reference:** Davie CE, Hutt SJ, Vincent E & Mason M (1984) *The young child at home*. NFER-Nelson, Windsor