What Is My Role...

At the Start of Services?

You are the most important source of information about your child’s behaviors, symptoms and strengths. As such, your child’s therapist should show you the behaviors he or she selected on the PECFAS. Make sure that they make sense to you. Don’t be afraid to ask the therapist to explain why he or she chose specific behaviors. The therapist will appreciate your involvement in helping to ensure that he or she ‘really understands your child’s behaviors!

Along with your child’s therapist, look over the problems and determine which are the most important areas to address now. You can also use the PECFAS form to point out your child’s strengths and to help you with setting goals for your child. There is a list of strengths and goals for each of the 7 areas. You may find these helpful in describing your child’s strengths or in identifying goals. After deciding on goals for your child, you and your therapist will make a plan of action for achieving these goals. Make sure that your opinions are heard! It is essential that the treatment plan be family-driven.

How Can the PECFAS Be Used for Designing Your Child’s Treatment Plan?

You and your child’s therapist can identify your child’s strengths and goals and create a plan for each of the 7 areas. Here is a sample plan for Home:

<table>
<thead>
<tr>
<th>Plan for Home Area</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Problem</strong></td>
</tr>
<tr>
<td><strong>Strength</strong></td>
</tr>
<tr>
<td><strong>Goals</strong></td>
</tr>
<tr>
<td><strong>Plan</strong></td>
</tr>
</tbody>
</table>

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After Services Begin?

You are your child’s best advocate! You can actively advocate for your child by making sure that your child’s functioning is reviewed periodically. Think of it as a “check-up” to ensure that your child is really benefiting from the treatment plan.

If your child is not showing improvement in the most important areas, you may want to advocate for a change in the treatment plan or array of services. This will help to ensure that the treatment plan remains family-driven.

PECFAS scores for each of the 7 areas can be charted to show change over time. Your child may make progress in some areas very quickly, while taking much longer to improve in others. You can track your child’s progress by having a PECFAS completed every 3 months or so. Change is typically made one step at a time. Be sure to celebrate even small successes! Remember, each child makes progress differently and the amount of progress depends on a lot of factors, such as quality of care and the availability of supports.

Below is a graph showing a child’s first and last PECFAS. Look at the great progress this child made!

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Other PECFAS Facts

- The PECFAS was developed by child psychologist Kay Hodges, Ph.D. in 1990.
- The PECFAS has been used with children receiving different types of treatment throughout the United States and Canada.
- The PECFAS ratings are reliable. The therapist has completed special training to learn to rate the PECFAS the same way every time and in the same way as other therapists.

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PECFAS®: A Guide for Parents and Caregivers

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What Is the PECFAS?

The PECFAS is an assessment measure that is used to evaluate how a child handles everyday tasks, like following rules and managing feelings. Therapists typically use the PECFAS to identify behaviors and symptoms that need attention. Depending on the child’s emotional and cognitive developmental level, the PECFAS can be used with children ages 3 to 7 years old.

So why is focusing on your child’s day-to-day functioning important? Research shows that problems in day-to-day functioning can interfere with a child’s development. All children can have problems from time to time, and most get over them quickly. Problems that persist can keep a child from being happy and becoming a well-adjusted adult.

What Can I Expect at the Start of Services?

Your therapist should ask you and your child about what is happening in your child’s life in 7 different areas of functioning. These areas are:

<table>
<thead>
<tr>
<th>“The 7 Areas”</th>
<th>Example Behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/Daycare</td>
<td>Behavior, attendance, learning skills</td>
</tr>
<tr>
<td>Home</td>
<td>Actions in the home, obeying rules</td>
</tr>
<tr>
<td>Community</td>
<td>Respect for others’ rights, obeying laws</td>
</tr>
<tr>
<td>Behavior Toward Others</td>
<td>Age appropriateness of behaviors when interacting with others</td>
</tr>
<tr>
<td>Moods/Emotions</td>
<td>Management of emotions such as depression, anxiety &amp; post-trauma reactions</td>
</tr>
<tr>
<td>Self-Harmful Behavior</td>
<td>Behavior or ideas harmful to child</td>
</tr>
<tr>
<td>Thinking/Communication</td>
<td>Logic and rationality of thoughts &amp; communication</td>
</tr>
</tbody>
</table>

How Does the PECFAS Work?

The therapist will select items from the PECFAS that describe your child. Each item is a description of behavior. The therapist should consider your child’s worst behavior during a given time period (for example, the last 3 months). Why rate the worst behavior? —To ensure the safety of your child and to ensure that these behaviors are addressed in the treatment plan that you design with the therapist.

What Are the PECFAS Scores?

The PECFAS items are grouped into 4 levels of functioning. Each level is assigned a score. The 4 levels and their scores are: no impairment (0), mild (10), moderate (20), and severe (30). An example of a severe (30) score is that the child is asked to leave school/daycare because of his/her behavior. Scores are given for each of the 7 areas. These 7 scores are added together to give a total PECFAS score. The goal is to improve the behaviors and reduce the scores. The lower the score, the better.

The PECFAS Software Program prints a chart in which bars show the child’s score in each of the 7 areas (see below).

A Parent Said It Best...

“Families want their children to get better. Expressed in functional terms, this means we want our children to be able to live at home, to go to school and get good grades, to enjoy friends and activities in the community, and to become responsible adults living independently.”

- Trina Osher, Huff Osher Consulting.