



**Positioning Public Child Welfare Guidance**  
**Strengthening Families in the 21st Century**

## **Practice Model Guidance**

### ***Practice Model Definition***

#### ***Overview***

Questions the Guidance Will Answer

Why is this Critical Area Important to the Field of Public Child Welfare?

How Will Outcomes be Achieved for and with Children, Youth and Families?

#### ***Strategy***

Key Components of a Practice Model

- Overview of Outcomes

- Overview of Values and Principles

- Overview of Service Array

Outcomes

Values and Principles

- Shared Responsibility

- Child Centered

- Family Focused

- Culturally Competent

- Inclusive

- Trustworthy

- Accountable

- Collaborative

- Transparent

- Data and Evidence-Informed

Service Array

- Child and Family Engagement

- Ongoing Service Planning

- Service Delivery

- Monitoring and Evaluation

- Organizational Practices

- Necessary Skills

#### ***Key Processes***

Communications Strategy

Decision-Making

Quality Assurance

Data Collection and Analysis

Case Management Policies and Procedures

Professional Development

Performance Management

#### ***Operations***



## ***Implementation***

Communication Plan

Resource Development

Effective Individual and Agency Capacities

Roles and Responsibilities Staff and Stakeholders

Monitoring, Evaluation and Updating

Tools, Guides and Resources that Support the Practice Model

## ***Practice Model Definition***

The field of public child welfare defines how to effectively deliver services to children, youth and families. The practice model includes the following elements: desired outcomes, principles, theory of change, evidence informed practice, process and quality of care and service array.

### **Principles**

The field of public child welfare has an obligation to behaviorally define and model the basic values of performance with regard to the services provided to children, youth, and families. These values should be relevant to all workers regardless of their professional functions, the settings in which they work, or the populations they serve.

### **Theory of Change**

The field of public child welfare articulates the underlying beliefs and assumptions that guide the delivery of services to produce change and improvement in the lives of children, youth and families.

### **Evidence Informed Practice**

The field of public child welfare shall follow best practice standards and make appropriate decisions based on the best available research. When specific research is not available to guide practice, practice standards should be based on the best available information and clearly articulated values that reflect the principles of the practice model. All practice standards should include measurable indicators and be consistently monitored and evaluated.

### **Process of Quality of Care**

The field of public child welfare shall develop and expand the use of “best practices” so each child, youth, and family receives the most effective and efficient delivery of service designed to maximize individual functioning and promote community strength and stability. The developmental life cycle of the child, youth and family must be considered in the delivery of services.

### **Service Array**

The field of public child welfare shall provide a range of available services and access to the services necessary to meet the needs of the target population being served.

## Overview

The purpose of an effective practice model is to define how the public child welfare agency engages families, youth and the community in developing and delivering a continuously evolving array of services that meets the unique needs of those served by the agency and leads the agency to achieve desired outcomes. The practice model defines standards of practice and identifies ways in which evidence-informed strategies can help the field understand and ameliorate the root causes of maltreatment. The practice model defines how the outcomes will be measured both quantitatively and qualitatively.

The objective of the practice model is to promote practice that is evidence-informed and guided by values and principles and therefore increases the likelihood of positive outcomes for children, youth, families and the community. It is the experience of public child welfare agencies that have developed practice models that they have significantly benefited from the direction and consistency provided.

### Questions the Guidance Will Answer

- What are the key elements, components, principles and outcomes of an effective practice model?
- What is the service array of an effective practice model? What is the basic or minimum level of care that a practice model must deliver? What is the work required and what are the standards, e.g., service protocols, process and quality of care issues and service array?
- What are the critical tools, guides, materials and templates that support the practice model and what are the standards for them?
- How often and for what reasons should a practice model be updated?
- Who are the critical stakeholders in the practice model and what do they need and value, e.g., parents, judges?
- What are the roles and responsibilities for staff at all levels in the agency related to the practice model including what decisions are made by whom and under what conditions?
- Where and with whom should responsibility be vested for the implementation, monitoring and continuous improvement of a practice model?
- When and in what ways should the practice model be communicated to staff and other critical stakeholders?
- What factors may enhance or hinder the effort to implement, monitor and continuously improve the practice model and how should these be handled?

### Why is this Critical Area Important to the Field of Public Child Welfare?

- An effective practice model will consider all of its values, principles and guidance in building and supporting the vital relationship between staff and children, youth and families.
- The purpose of an effective practice model is to define how the public child welfare agency engages families, youth and the community in developing and delivering a services array that meets the unique needs of those served by the agency and leads the agency to achieve desired outcomes.
- The practice model guidance is anchored in the basic belief that people can and do change. This “theory of change” is carried out when all staff in the agency are committed to the belief that families are in the best position to identify their own needs and, when fully engaged in the identification of the supports and services to best meet these needs, the end result will be change and improvement in their lives.

## How Will Outcomes be Achieved for and with Children, Youth and Families?

- A well-developed practice model will expose the resources and performance capacity needed to create quality outcomes for an agency.
- The practice model provides for the development of quality assurance processes and information flow that produces the feedback from the environment necessary for continuous improvement.
- All work that is done when creating a practice model is completed with an eye toward the improvement of outcomes of those involved with the public child welfare system.
- When leadership thinks critically, reflecting on the agency as a system and identifies desired outcomes as part of practice model development, current gaps become obvious. Opportunities then present to address deficits in resources (work force, finance, technology and office space), tasks, key processes, policy, data collection and outputs.

## Strategy

When developing a practice model, the agency defines the key components, values and principles and outcomes as part of the overarching strategy for the practice model. This will guide the agency as the service array, key processes and tools for implementation are identified.

### Key Components of a Practice Model

An effective practice model includes the following components:

#### *Overview of Outcomes*

First and foremost, the purpose of public child welfare is to improve outcomes for the target population for whom public child welfare has primary responsibility. That target population consists of the following:

- Children, youth and families where allegations of abuse and/or neglect have been made
- Children, youth and families where a high risk of abuse and/or neglect has been identified
- Children and youth who are in the custody of the public child welfare system and their families
- Children, youth and their families who are not in the custody of the public child welfare system, but for whom the provision of services or ongoing oversight is mandated by a court

Outcomes are not simply statistics, but measures of how lives have changed based on an interaction with the public child welfare agency.

#### *Overview of Values and Principles*

The field of public child welfare has an obligation to behaviorally define and model the basic values of performance with regard to the services provided to children, youth and families. These values must be relevant to all workers regardless of their professional functions, the settings in which they work, or the populations they serve.

*Example: Iowa's Department of Human Services' Child Welfare Model of Practice provides the following "Guiding Principles" statement as part of their model:*

##### *Customer Focus*

*We listen to and address the needs of our customers in a respectful and responsive manner that builds upon their strengths. Our services promote meaningful connections to family and community.*

##### *Excellence*

*We are a model of excellence through efficient, effective and responsible public service. We communicate openly and honestly and adhere to the highest standards of ethics and professional conduct.*

##### *Accountability*

*We maximize the use of resources and use data to evaluate performance and make informed decisions to improve results.*

##### *Teamwork*

*We work collaboratively with customers, employees and public and private partners to achieve results.*

## ***Overview of Service Array***

An effective public child welfare agency should develop an approach to assessment that is based on an understanding of the strengths and needs of families as they relate to the safety of children, risk of future maltreatment and the child's well-being while in the custody of the agency. The approach to assessment should reflect an ecological understanding of the factors associated with child maltreatment and the strengthening of protective capacities of the adults responsible for a child's care and development. The goal of the development of the service array will be to create a continuum of services that meets the needs of the target population that is based on accepted theory, research and data and are designed to meet specific outcomes including the cessation of future child maltreatment. These services must be readily accessible and delivered following defined practice standards.

## **Outcomes**

An effective practice model will provide direction and guidance to public child welfare staff in attaining specified outcomes for children, youth and families. Although individual agencies have particular outcomes that they strive for and articulate within their practice model relating to children, youth, families and their community, outcomes ultimately must focus on improving the safety, permanence and well-being for children, youth and families.

Practice models provide for the following foundational outcomes for the agency itself:

- Practice at the service delivery level is linked directly to the strategy of the agency, assuring service delivery is in alignment with the objectives, values and principles as listed below.
- Staff in all levels of the agency will treat each other and the families and youth it serves in accordance with the values below.
- Policy, processes, products and tools support effective casework leading to positive outcomes for children, youth and their families.
- A continuous improvement process that provides direction for planning and goal-directed change is in place and serves its purpose.
- Tasks and activities are informed by evidence and connected to the strategy of the agency so that children and youth grow up in safe and permanent environments and that their educational, medical and mental health needs are met.
- The well-being of the children and youth who come to the attention of the public child welfare system is supported by promoting their safety and permanence.
- The equitable treatment of all people must be standard practice. The process of assuring this is addressed in the practice model, providing tools for reducing disparities in outcomes for different populations within a jurisdiction.

## **Values and Principles**

The following are values and principles for the development of an effective practice model. Values and principles are to be reflected throughout the array of services delivered to children and families. The principles serve as guidance to the agency in defining the values to incorporate into each component of the service array and delivery of those services to children, youth and families. Practice models provide behavioral descriptions so staff know "what it looks like" when the following values and principles are in place:

### **Value: Shared Responsibility**

Principle: Supporting the well-being of children, youth and families is a shared government and community responsibility. The field of public child welfare supports well-being by promoting the safety and permanency of children and youth whose families are unwilling or unable to meet their needs or protect them. Public child welfare also serves as a catalyst in identifying the role and responsibility of the community to assist these same children, youth and families.

**Value: Child Centered**

Principle: Children are entitled to live in a safe and permanent home and need families to be successful.

**Value: Family Focused**

Principle: Families of origin have the right and the responsibility to raise their children. The field recognizes its responsibility to provide a range of preventative and/or supportive services to families having difficulty in providing a safe and permanent environment.

**Value: Culturally Competent**

Principle: The field has a responsibility to understand and serve children, youth and families within the context of their unique beliefs, values, race, ethnicity, history, culture, religion and language.

**Value: Inclusive**

Principle: The field of public child welfare recognizes value in the child, the biological family and individuals in the child's life participating in the assessment, planning and service delivery/treatment processes. These processes should be designed to optimize active participation and promote the expression of individual choices.

**Value: Trustworthy**

Principle: The field of public child welfare recognizes that it must be benevolent, act with integrity, perform reliably and demonstrate competence in all interactions.

**Value: Accountable**

Principle: The field of public child welfare recognizes its responsibility to itself and its stakeholders to assess and manage its performance, self-correct, innovate and enhance its ability to achieve positive outcomes.

**Value: Collaborative**

Principle: The field of public child welfare recognizes the need to work in collaboration with stakeholders and the community to promote safety, permanency and well-being for children, youth and families.

**Value: Transparent**

Principle: The field of public child welfare recognizes the need for all practices, service delivery, communications and behaviors to be easily understood, fully defined and explained, candid and open.

**Value: Data and Evidence-Informed**

Principle: The field of public child welfare recognizes that the use of data and evidence-informed practice is critical for effective decision-making on behalf of children, youth and families.

**Service Array**

Developing a set of practice and performance standards for child welfare practices across the entire service array process is one of the tasks of practice model development. Agencies that have taken on this task have typically broken down standards into sets of "overarching standards" for tasks that go across the service array (for example "documentation") and "practice standards" for specific areas of practice that have nuanced behaviors (for example "screening").

Some Agencies have gone further and developed "organizational standards" for tasks that the agency would be performing beyond practice (for example "staff development") that impacts performance related to the practice model and achievement of desired outcomes.

Below is a chart of tasks or activities that agencies have developed performance standards for when developing a child welfare practice model.

Following the chart are some sample performance standards provided as examples of standards for organizations to review as they develop their own set of performance standards.

### Service Array Process

Overarching Practices	Specific Casework Practices	Organizational Practices
<ul style="list-style-type: none"> <li>• Family Engagement</li> <li>• Documentation</li> <li>• Collaboration and coordination of services with community (internally)</li> <li>• Supervision</li> <li>• Service monitoring and evaluation</li> <li>• Case transitions</li> <li>• Communication</li> <li>• Decision-making</li> <li>• Cultural competence</li> <li>• Child safety</li> <li>• Permanence</li> <li>• Child well-being</li> <li>• Community engagement</li> </ul>	<ul style="list-style-type: none"> <li>• Screening</li> <li>• Engagement</li> <li>• Family assessment</li> <li>• Assessment (risk and safety)</li> <li>• Investigation</li> <li>• Teaming</li> <li>• Planning and goal setting</li> <li>• Service delivery</li> <li>• Monitoring and plan adjustment</li> <li>• Placement</li> <li>• Kinship providers</li> <li>• Visitation</li> <li>• Permanency planning</li> <li>• Post permanency and adoption</li> <li>• Foster parents and provider services</li> </ul>	<ul style="list-style-type: none"> <li>• Using data</li> <li>• Use of strategic supports</li> <li>• Workforce development</li> <li>• Performance management</li> <li>• Decision-making</li> <li>• Relationships with community partners</li> <li>• Cultural competency</li> <li>• Quality assurance and evaluation</li> <li>• Outreach</li> <li>• Prevention</li> <li>• Supervision</li> <li>• Management</li> <li>• Leadership</li> <li>• Organizational effectiveness</li> </ul>

Prior to the development and provision of a service array, the public child welfare agency must first build a set of theory and evidence-supported assumptions about the ecological contributors to child maltreatment that services will target. Although no one model is universally applicable to the specific causes for all child maltreatment, the National Research Council has proposed in their book, *Understanding Child Abuse and Neglect (1993)*<sup>1</sup> that

<sup>1</sup> “The emerging social interactional models emphasize the importance of viewing child maltreatment in the context of the family, community and society rather than emphasizing only individual parental psychopathology or individual stressors (Belsky, 1980, 1992; Cicchetti and Carlson, 1989; Garbarino, 1977; Parke and Collmer, 1975; Wolfe, 1991)” (p. 108) “Furthermore, interactive models recognize that risk and protective factors are not static, but change over time as individuals, their life circumstances and the society in which they live change.” (p. 109)

“The selected model views maltreatment within a system of risk and protective factors interacting across four levels: (1) the individual or ontogenic level, (2) the family microsystem, (3) the exosystem and (4) the social macrosystem. The ontogenic level involves individual characteristics and the changing developmental status of family members. The family

maltreatment be viewed within the context of family, community and society. Using the above model to inform the development of a service array in an agency will serve to support services being developed and delivered in a manner that will address the root causes of child maltreatment and provide the opportunity to reach desired outcomes.

### ***Child and Family Engagement***

- Effective assessment is only possible through quality youth and family engagement. The assessment includes both the gathering and analyzing of the data.
- Assessments must be completed using adequate procedures such as forensic interviews to accurately gather facts that will assist in case planning and service delivery.
- Effective screening of incoming referrals includes thorough safety assessment as part of the information gathering process that will allow screeners to properly triage reports and determine an appropriate response.
- Effective, ongoing safety (immediate danger) and risk assessments for families drive decision-making, service planning and delivery. Assessment is a dynamic, ongoing process not just a static event.
- Effective assessment requires youth and family engagement. Youth and family engagement entails looking at the situation from the youth and/or family's point of view, listening to their areas of concern, identifying and acknowledging their strengths and including them in setting realistic, mutually-acceptable goals for planning services and their delivery as well as providing them not only a voice in services but a choice of providers.
- Effective assessment is comprehensive and identifies underlying risk and protective factors related to child maltreatment. Thorough information gathering includes interviewing all relevant parties and gathering detailed descriptions regarding what is currently occurring within the family that is of concern and what strengths the youth and family possesses.
- Decision-making will be structured to increase consistency and accuracy; it seeks to identify strengths and solutions for every family equitably.
- Direct-service caseworkers review the assessments with their supervisor for guidance, support and professional development opportunities.
- Documentation is based in fact not opinion, is clear and concise and easily understood by the reader.

### ***Ongoing Service Planning***

- Service planning is based on ongoing comprehensive assessment.
- Services selected are individualized to meet the unique needs of the youth and family throughout the life of a case from assessment through post permanency (adoption) services.
- Services selected are grounded in evidence and consistent with current available research and accepted best-practice techniques.
- Service planning begins with engaging in two-way communications with the youth, family, providers, kin and other relevant parties.
- Effective service plans are developed with, not for, families. They incorporate realistic, mutually agreed-upon goals, are written in the language of the family and contain benchmarks reflecting measurable behavioral change.

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microsystem includes the family environment, parenting styles and interactions among family members. The exosystem consists of the community in which the family lives, the workplace of the parents, school and peer groups of the family members, formal and informal social supports and services available to the family and other factors such as family income, employment and job availability. Finally, the social macrosystem consists of the overarching values and beliefs of the culture.” (p. 110)

- Service planning efforts include communicating with other family providers and support services to assure consistency among plans with all involved human service organizations. When multiple human service organizations are involved with a family, efforts will be made on the part of the public child welfare agency to collaborate with those services and to coordinate and integrate services planning whenever possible.
- Plans are to be clearly articulated with specific goals and objectives so that youth and families know what is expected of them.
- Service planning is dynamic, based on the continuous assessment of the youth and family situation.
- All service planning requires open and honest communication about the avenues that the case might take, starting at intake and ongoing through the stages of service. Planning concurrently with the family for the permanency of the child and/or youth in the event of removal is a key skill for workers to master.
- All services are planned so that they are easily assessable and available to meet the needs of the child, youth and family.
- When service planning, resources are available to the family and youth, appropriately matched to the needs of the family and their ability to use the resource effectively. Services are relevant and consistent with evidence about effective practice. Families are given a choice of qualified providers and all available options.

### *Service Delivery*

- Service delivery follows the terms laid out in the family's plan and are adjusted as indicated by ongoing assessment of their needs.
- When multiple service systems are involved with a family, successful delivery requires linking and coordinating systems, both formal and informal, to meet the family's needs, minimize duplication of activities and support continuous movement toward agreed upon goals. Service delivery is coordinated and integrated to achieve all of the family's objectives. For every individual child, strategic community partnerships are formed to develop services that best meet the identified needs.
- Documentation of decisions and accomplishments are maintained in the case record and communicated regularly with the youth and family.
- Consistent and meaningful contact includes assessment of current status of the child, youth and family with regard to safety, risk and family service plan goals.
- Service plans contain a mix of concrete youth and family-driven services and therapeutic services that result in meaningful change.
- If reasonable efforts at service delivery do not result in the child and/or youth being safe within the family, reasons for removal of the child are clearly communicated to all involved. The family is given the opportunity to provide placement resources for consideration by the agency. Placement is done in the best interest of the child and/or youth with first consideration to kinship providers or providers within one's tribe. Maintaining a child in the least restrictive environment is paramount.
- If a child and/or youth is removed from their home and placed in the custody of the agency, the agency has accepted responsibility for the well-being of the child and services are delivered with an acceptance of that primary responsibility. These services include meeting all of the health, mental health and educational needs for children in foster care.
- Contact and service supports to children and youth in placement and their caregivers are based on individual needs, not limited to the minimum mandated by policy or statute.
- Resource families are better able to meet children and youth's needs when they are included as full members of the team. Such inclusion means providing full and honest disclosure regarding children's needs and circumstances and seeking and heeding resources parents' input regarding the needs of children in their care.
- Resource families require consistent support throughout the placement of children in their homes. Such supports include training that specifically targets the needs of the children in their care, timely linkage to appropriate clinical (e.g., individualized behavior management)

and concrete (e.g., respite, transportation) services and making consistent contact to monitor children's adjustment, family capacity and the need for additional intervention.

- Service delivery does not end at the time of return home from placement. This time of "aftercare" often requires varying degrees of intensive services, individualized to the child and families' needs to assure a permanent return home. When a child is returned home from placement, services should remain in place and be closely supervised until such time that the agency can end services based on the parents' ability to sustain child safety and well-being.
- In the event of termination of parental rights, permanent legal guardianship or reunification, an array of post-permanency services is available to the child, youth and adoptive family to prevent disruption. Families find services to be easily assessable and available to meet their needs and support the permanency of their child.
- Services are delivered within the cultural context of the children, youth and family being served. Practices implemented in the agency are culturally sensitive, respectful of human diversity and applied within a context of a family/youth engagement model for case planning and decision-making.
- Services provided by contracted providers meet the requirements of the public child welfare agency's practice model.

### ***Monitoring and Evaluation***

- Caseworkers continually provide families with benchmarks of success, milestones of progress and measures toward goals established in the planning process.
- Consistent, ongoing evaluation of services allows the worker to fully assess whether services need to continue, stop or be revised to meet the needs of the family.
- Services are monitored for impact on child safety, permanence and well-being as well as lessons learned through the delivery of the services by both the agency and community service providers.
- Documentation on the availability of quality services that are grounded in evidence and meet the needs of the child, youth and family is gathered and shared with agency leadership to ensure the provision of appropriate services for the child, youth and family.
- Plan revisions occur whenever the youth and/or family situation dictates a need for the change and not simply at predetermined time intervals.
- Collaboration is required for successful completion of service delivery. Level of collaboration is monitored throughout the life of the case.
- Case closure occurs when the family has achieved objectives and is able to provide for the safety, permanence and well-being of the child, not in accordance with arbitrary timeframes or resource limitations. Achievement of service plan objectives is clearly documented in behavioral terms within the case record and accessible for review and evaluation.
- Interventions provided or arranged for are grounded in evidence and periodically evaluated to ensure that they are achieving intended outcomes.
- Organizations assess the needs of their community and work with community leaders and service providers so that identified needs are reflected in the service array. Cultural and linguistic characteristics of the community's population must be a key factor in determining service needs. In addition, the services made available must be accessible to families to allow for utilization as needed.
- Agency leadership and direct service staff are consistently monitoring service needs of the families in their community and using that information when assessing whether their practice model has sufficient flexibility and service array to meet the needs of every child, even those with specialized individual needs.
- Organizations use data collection and monitoring efforts to assure equitable treatment of all service recipients. Public child welfare agencies use data to drive all systems-improvement efforts. Focusing closely on child and family outcomes by race and ethnicity will help eliminate disparate treatment of children, youth and families.
- Services provided by contracted providers should be continually monitored to assure that those services align with the values and principles put forth in an agency's practice model.

## *Organizational Practices*

- Cultural Competency
  - Services are delivered within the cultural context of the children, youth, and family being served.
  - Practices implemented in the agency are culturally and linguistically sensitive, respectful of human diversity, and applied within a context of a family/youth engagement model for case planning and decision-making.
  - The staff and community resources reflect the populations served.
  - Professional development and service delivery recognize the importance and strength of cultural norms.
- Quality Assurance and Evaluation
  - The public child welfare system partners with families and stakeholders to collect and analyze qualitative and quantitative data for the purpose of evaluating child welfare practices, systems and innovations.
  - Data drive, inform and monitor efforts to assure competent and equitable service coordination and delivery for all recipients and improve outcomes for children, youth, and families.
- Staff Development
  - The public child welfare system sets professional standards for staff according to nationally recognized or recommended standards.
  - The public child welfare system has an overall staff development plan that addresses initial and ongoing staff development including competencies, skills, knowledge, abilities and values needed to carry out duties related to child safety, permanency and well being.
  - Staff development is supported through allocation of resources and ongoing evaluation of staff performance.
- Supervision
  - The agency has an effective structure to review and guide key casework decisions and provides support and professional development.
- Communication
  - The public child welfare system provides and receives information in a manner clearly understood and easily accessible by stakeholders.
- Leadership
  - Leaders create, affirm and sustain an organizational culture and structure that supports a strength-based, family-centered model of practice.
  - Leaders identify and mobilize the strengths of staff and programs and work together to focus on the continuous improvement of programs, services and staff.
- Resource Identification, Development and Utilization
  - The state and local agencies identify, develop and utilize community-based services for families that come to the attention of the system and work with communities to identify and develop community options for families that seek or require services.

- Such services are accessible, culturally responsive and meet the unique needs of children and families in all jurisdictions within the state.
- Community Partnerships
  - The public child welfare system's agencies function as a member of their community, engage the needs of their community, include community representation in decision making and work with community leaders, service providers and tribes to ensure that the identified needs are reflected in service array.
  - Cultural and linguistic characteristics of the community's population must be seen as a key factor in determining service needs.
  - Services made available must be accessible to families to allow for utilization as needed.
- Outreach
  - Staff at the state and local level work in partnership with communities to identify the needs of the community's children and families and dedicate resources and take action to reach out to, educate, offer information and support families in need.
- Use of Data
  - State, county and tribal staff uses data and information collection, along with monitoring efforts, to develop strategic plans and drive service delivery. Service delivery efforts must strive for equitable treatment of all service recipients and good client outcomes. Child welfare agencies use data to drive system improvement efforts. Data collection includes consumer input and feedback through planned surveys and focus groups.
- Use of Strategic Support
  - State, county and tribal partners will strive to align strategic support systems such as human resources, training, quality assurance and information technology to the standards, values and desired outcomes of the practice model.
- Decision-Making
  - Key decisions are structured to increase consistency and accuracy, seeking to identify solutions that are child centered and family focused. Staff is provided tools and training necessary to support consistent and accurate decisions at key times in the life of a case.

### ***Necessary Skills***

Many child welfare practice models have included a component that outlines the skills necessary for staff to successfully perform to the standards and practices contained within the practice model. While listing the skills is not a necessary component of the model itself, this addition will certainly provide supportive information for implementation and monitoring of the model.

For example, if necessary skills are described as part of the practice model, agencies have the opportunity to influence staff hiring, specifically looking for new staff members with the skills or the potential to perform to those skills. Providing a description of the required skills within the practice model will also serve to assist in staff development and training, providing specific direction as to which skills are key developmental markers for staff as they receive training.

Finally, providing and defining skills necessary to implement the practice model will allow the agency to utilize the information when developing performance management processes and individual staff development plans.

It should be mentioned that the skills described in any draft of a child welfare practice model will not be fully inclusive of skills that a social worker would need to be successful. Instead, the list should be viewed as skills to be emphasized and minimally required to perform to the standards of the practice model.

Some sample skill sets and their definitions:

- Engaging

Facilitating respectful and meaningful participation including looking at the situation from each person's point of view, ensuring each person a voice, listening to their areas of concern, identifying and acknowledging their strengths and involving them in setting realistic mutually acceptable goals and plans.

- Assessing

Gathering information about reported concerns and family needs, evaluating the relevance of that information as well as identifying family strengths and community and tribal resources that may be applied to address those concerns and needs.

- Partnering

Working in respectful and meaningful collaboration with families and community to achieve shared goals.

- Planning

Setting goals, developing strategies and outlining tasks and schedules to accomplish the goals derived from the engaging, assessing and partnering process.

- Implementing

Identifying and applying the most effective and culturally appropriate services, resources and processes to meet the goals established in the planning stage.

- Evaluating

Monitoring outcomes of service plans and system programs to determine if the desired goals are being achieved and if not, to use this information to reconsider goals and strategies developed in the planning phase or services and resources identified in the implementation stage.

- Advocacy

Recognizing individual or group needs, providing intervention on behalf of a client or client group, communicating to decision makers and initiating actions to secure or enhance a needed service, resource or entitlement to effect change.

- Communication

Effectively sending and receiving information within the appropriate cultural context in a clear, concise, accurate and timely manner. Methods include verbal, non-verbal, electronic and written.

- Cultural Competence

Interacting with families without making assumptions, respecting and learning from the unique characteristics and strengths of the family and tribe while acknowledging and honoring the diversity within and across cultures and applying these skills to the partnership with the family and tribe and the options made available to them.

- Decision Making

Utilizing knowledge and information to make objective decisions to promote positive outcomes. Decision-making may include collaborating, consulting and appropriate use of supervision and multi-agency teams to develop solutions and build consensus.

## ***Key Processes***

The public child welfare agency should develop and expand the use of “best practices” so each child, youth and family receives the most effective and efficient delivery of service designed to maximize individual functioning and promote community strength and stability. The developmental life cycle of the child, youth and family must be considered in the delivery of services.

Practice models may differ based on many variables, for example, geographic location, type and responsibilities of the agency, or state vs. county-based systems. Despite these variables, certain key processes need to be in place in all practice models to support the integration of the use of the model within a system. Values and principles articulated in a practice model are put into operation through an agency’s key processes. The following are the minimum key processes to have in place:

### **Communications Strategy**

A multi-method communication strategy is one that assists the agency in informing the staff as a whole as to the purpose, benefits and goals of the practice model and their role in its implementation. Internal staff at all levels and external stakeholders must understand the value of the model and its purposes and objectives as well as its values and principles. The casework process is transparent to the community; the community is aware of the agency’s purpose and how it implements its strategy to achieve outcomes, including being familiar with tools and materials used to make casework decisions.

### **Decision-Making**

A well-established process for making decisions that is in alignment with the values linked to the practice model will help promote reliability, validity and equity in decision-making.

### **Quality Assurance**

Internal QA processes need to reach for success markers that are behaviorally-based and include the use of “best practices” so each child, youth and family receives the most effective and efficient delivery of service designed to maximize individual functioning and promote community strength and stability. This includes assuring equitable treatment of all by staff and contracted providers. Quality assurance must be continuous, not occasional “point in time” measures.

### **Data Collection and Analysis**

The public child welfare agency must be aware of environmental trends such as demographic shifts and political trends and must track longitudinal data across practices (public child welfare agency services, contracted services and community based services) that focus on the individual, family and community. It requires data that enable root cause analysis for what is and is not working in the current operation, highlight individual and unit-level performance management and “tell the story” to stakeholders and partners.

### **Case Management Policies and Procedures**

Effective practice models result in internal policies and procedures that balance family and youth engagement while ensuring compliance with non-negotiable regulations. All phases of the service delivery system must be aligned with the vision, mission and values of the system that the practice model is serving. Supervisor involvement should occur frequently and



throughout the life of a case. The value of supervisory insight and support for caseworkers when working within a practice model cannot be overstated.

### **Professional Development**

Developing staff skills and experiences in alignment with the practice model requires both training and techniques for “learning by doing”. Proactively building staff capacity for applying the practice model can be achieved through mentoring, coaching and traditional classroom training. It is the responsibility of the agency using a particular practice model to provide staff with the appropriate training and technical assistance to develop the knowledge, skills and values needed to work in accordance with the model.

### **Performance Management**

Evaluations and professional development plans are explicitly linked to the implementation of the practice model to promote accountability

## *Operations*

Operationally, the practice model will define tasks and activities to be performed by staff on the front line. These tasks and activities will be related to practices informed by evidence and focused on ensuring children grow up in safe and permanent environments and that their educational, medical and mental health needs are addressed. For a practice model to be effective, core values, principles and standards of the practice model are understood by staff in all levels of the agency and carried out in the following way operationally:

- Leadership holds the agency accountable for implementation of the practice model on a day-to-day basis.
- Middle management makes linkages to the practice model when developing policy and processes.
- Supervisors monitor and assess the implementation of the practice model in the daily performance by frontline staff.
- Staff connects the practice model to their daily work with families and communities.
- The Information Technology function provides reliable data on the outcome measures identified in the practice model for use by staff at every level of the organization.
- The fiscal function develops budgets that support acquisition of resources needed to implement the practice model.
- The HR function recruits, orients and provides ongoing professional development opportunities that assist staff at all levels of the agency in understanding and implementing the practice model in daily operations.
- The training function uses organizational and individual needs assessments to identify areas needing improvement. The training function uses information gathered to develop and deliver training and technical assistance support for ongoing implementation and practice of the model.
- The policy function formulates policy that supports the development of key processes in the implementation of the practice model.
- The quality assurance function provides reliable data from record reviews and focus groups from staff from all levels of the agency and children, youth, families and community members on the service array and outcome measures defined in the practice model for use in decision-making and planning.

Success is demonstrated by all staff being able to articulate and implement practice model values while completing planned work efforts and all key process areas being aligned with the stated agency mission, vision, values and outcomes.

## ***Implementation***

Implementation of the practice model is typically the biggest aspect of the challenge of changing an organizational culture and organizational practices. Nationally, implementation has occurred through many different plans and processes, typically depending upon the structure of the organization (state or county administered), ability to use strategic supports (such as training), and relationships with partners and stakeholders.

Regardless of any of these variables, there are certain aspects of change management, which are evidence, based and have been demonstrated to provide successful results when organizations have committed the capacity, resources, and time for the change to occur.

These strategies for implementation are detailed within the Change Management domain of the Positioning Public Child Welfare Guidance and do not need to be fully repeated here. The Change Management domain provides leaders with necessary guidance for general change management, but also the key processes to use to advance the practice model as the defined desired future state of their organization and begin to take steps toward implementation.

This process for implementation will be most successful when the practice model is developed in a manner that is specific enough to be clear and well defined to those planning for implementation and general enough to be made operational through practices at the local level using local knowledge and expertise. Once a base practice model of values, principles, standards and skills is in place, implementation work through specific strategies, practices, communications and training can begin.

In support of the change management guidance, it is most important to note that for successful practice model implementation to occur, the following elements must also be in place:

- Communication plans
- Resource development
- Capacity building plans
- Role clarity
- Monitoring and evaluation plans
- Tools that support the use of the practice model in the field

With the proper plans, tools, resources, and staff “buy in” in place, a well written, clear, and easily communicated practice model can serve as the anchor for practice improvement and ultimately improved child welfare outcomes for the future.

### **Communication Plan**

The practice model must be communicated to staff and stakeholders on an ongoing basis and demonstrated continuously through daily behaviors. For staff, communication begins with new worker training and continues through performance management. Working within the construct of the practice model should be positively reinforced and behaviors not consistent with the practice model should be identified and corrected. For stakeholders, communication begins with the sharing of information such as strategic plans and budgets and continues with ongoing transparency of how the work gets completed in the agency.

Here is an example of a communication plan template that walks users through the process of developing a communication plan.

## Resource Development

Resource development includes more than just hiring new staff. For a practice model to be effective, non-personnel resources will have to be dedicated to achieve desired outcomes.

Non-personnel resources include but are not limited to the following:

- Increased use of technology to complement the implementation of an effective practice model. Some technology resources would include: a SACWIS (or other statewide alternative) system that is user friendly and information friendly, laptops and cell phones for staff and web-based communications that are available to internal and external stakeholders. These items will assist caseworkers in being more available and in better communication with families and supervisors.
- Capacity to convene groups that allows for greater input and collaboration among those involved in service delivery.
- Communication strategy that will assist the agency in informing the local community as to the purpose, benefits and goals of the practice model.
- Availability of resources for workers to perform their job, such as state vehicles, office space that is usable, functional chairs, office supplies and effective lines of communication.
- Visitation space in the community.
- For the practice model to be successful at the operations level, front line staff has to commit to and participate in ongoing training and technical assistance for skill development and development of an understanding of desired outcomes and best practice models.

## Effective Individual and Agency Capacities

To implement the practice model, the agency must be resourced with a workforce in alignment with the strategy and with the ability to achieve desired outcomes. The workforce would be well trained in applying a theoretical model of engagement and the principles in the practice model along with applicable laws and regulations. To be effective, the agency places an emphasis on quality supervision that develops workforce capacity and supports the mission, values and principles of the agency's practice model. Frontline staff members have individual development plans that support development of the knowledge, skills and values needed to implement the practice model. Workforce must be developed to allow for appropriate workload and have the necessary technological and administrative support staff in place.

The infrastructure is built to support the monitoring of the implementation of the practice model.

## Roles and Responsibilities of Staff and Stakeholders

Staff that are accountable for the day-to-day operations and actual implementation of the practice model as well as stakeholders that reflect the cultural identity of the community served must be involved from the start of practice model development. This promotes buy-in, ongoing commitment and results in a more effective practice model that will meet the needs of the specific community and families served.

The following is basic list of critical stakeholders to involve:

- family and youth
- community leaders
- contracted providers
- judges
- elected officials
- community at large
- public human service agencies
- law enforcement
- education
- medical community

- university partners
- juvenile probation
- attorneys
- advocacy groups
- tribes
- ombudsman
- faith-based community
- media

By fully engaging those most critical to the process, the result will be a well-developed practice that supports positive outcomes for children, youth and families.

Stakeholders need and value two-way communications with the agency. Stakeholders further value appreciation of input by the agency, effective use of resources, competent and committed staff, transparency from the agency and agency leaders and commitment to the values and principles within the practice model.

“Supporting the well-being of children, youth and families is a shared government and community responsibility” is a guiding principle for a practice model. Therefore, it is public child welfare leadership’s responsibility to accurately inform stakeholders of the success and challenges in the implementation of the practice model and it is the responsibility of all key stakeholders to become informed and actively participate in the development, implementation, monitoring and continuous improvement of the practice model.

- Agency Responsibilities
  - Leadership guides and informs practice model development and reflects the values and principles in the practice model in its decisions.
  - Management chooses, develops and oversees the implementation of key processes, policies and tools that support the values and principles of the practice model.
  - Supervisors and frontline staff make case decisions in the delivery of services that support the values and principles of the practice model.
- Stakeholder Responsibilities
  - Participate in practice model development, providing input and feedback as the process unfolds.
  - Provide ongoing feedback regarding implementation of the practice model at all levels of the organization.
  - Agencies that provide services to families and youth through contracts with the public agency and community partners know the practice model of the public child welfare agency and can connect it to their own agency strategy and daily key processes and operations.
- Youth and Families Responsibilities
  - Participate in individual family assessment and planning processes with public child welfare staff
  - Provide honest input and feedback to public child welfare staff based on real life experiences, strengths and concerns.
  - Families, youth and community stakeholders know the core values, principles and standards of practice of the practice model and their connection to service provision by the agency.

Success would be demonstrated by all stakeholders (children, youth, families and community) working in an integrated way with direct service public child welfare staff to achieve agreed upon outcomes.

## Monitoring, Evaluation and Updating

Monitoring and evaluation will occur through the use of continuous improvement processes. Continuous improvement as a well-practiced process and “way of doing business” at all organizational levels is essential to making decisions around the effectiveness of the practice model. Continuous improvement can be used to assess the quality and impact of implementation of the service array developed from the practice model. Good continuous improvement defines and uses sponsor groups, continuous improvement teams and working committees made up of staff from all levels of the organization, families, youth and community stakeholders.

Outcome measurement will require a conscious effort to define measurable outcomes and collect data. Quantitative and qualitative data related to the outcomes in the practice model are collected, analyzed and used by the agency to make changes, both rapid and long-term, to policy, process, products and services.

Once developed, a practice model will be based in good practice and strong values and serves as an anchor to hold onto in times of change. The practice model that appropriately sets forth principles, values and capacities necessary to accomplish the mission serves as a touchstone for stability in the face of changes in leadership and other crises; it does not change along with them.

Practice models are unique to your community. Consideration for updating the practice model should be based on the following:

- The needs of families change
- Data are gathered
- New knowledge emerges
- Information provided by children, youth and families suggests the change
- Information suggests that the workforce doesn’t believe the practice model speaks to the current reality
- Stakeholders and the community change
- Social trends emerge or change
- Technology changes
- Desired outcomes change
- Outcomes determine that the practice model is fundamentally flawed

## Tools, Guides and Resources that Support the Practice Model

While a practice model is about embedding principles and values into a work process, details of that work process must be developed and direct service workers need to be given tools to facilitate the delivery of the model. The following is a list of tools, guides and resources that should accompany the implementation of a practice model:

- Screening or Triage tool
- Safety assessment tool
- Risk assessment tool
- Family Assessment tool
- Case documentation template
- Structured decision-making guide and framework
- Family service plans
- Permanency plans
- Data collection tools
- Minimum standards of service
- Independent living plan

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- Substitute care environment assessment tools
  - Reunification process guidelines
  - Quality Review Instruments