

NATIONAL CHILD WELFARE RESOURCE CENTER FOR
ORGANIZATIONAL IMPROVEMENT
&
NATIONAL RESOURCE CENTER FOR
PERMANENCY AND FAMILY CONNECTIONS

An Introduction to the Practice Model Framework: A Working Document Series

July 22, 2008

© National Child Welfare Resource Center for Organizational Improvement
P.O. Box 9300 • 34 Bedford Street
Portland, ME 04104-9300
Phone: 1.800.HELPKID (435.7543) • Fax: 207.780.5817

A Practice Model Framework

The National Child Welfare Resource Center for Organizational Improvement, in collaboration with the National Child Welfare Resource Center for Family Centered Practice and Permanency Planning, is in the process of developing a framework to help child welfare agencies and Tribal social service programs develop and implement a comprehensive, written, and articulated practice model.

The *Practice Model Framework* series will focus on the approach to practice that the Children’s Bureau promotes—child welfare practice that is child-focused, family-centered, individualized to meet specific needs of the children and families served, enhanced to strengthen parental capacity, community-based, culturally responsive, outcome oriented, and collaborative. The framework will be just that—a framework; we will not be advocating any one practice model, but rather some beneficial elements, characteristics, approaches, and strategies for designing, implementing, and monitoring an effective practice model. We’re gathering information to develop this framework from interviews with child welfare practitioners and leaders, from research that has been done on practice models, and by analyzing the samples of practice models we have collected from various state and county agencies.

This working document is intended to let you know what we have learned thus far, provide you with information on the plan for and direction of the project, and spark discussion and feedback on this topic.

What is a Practice Model?

For the purpose of the Practice Model Framework series, the following definition is what we mean by the term “practice model”.

At its most basic level, a child welfare practice model is a conceptual map and organizational ideology of how agency employees, families, and stakeholders should unite in creating a physical and emotional environment that focuses on the safety, permanency, and well-being of children and their families. The practice model contains definitions and explanations regarding how the agency as a whole will work internally and partner with families, service providers, and other stakeholders in child welfare services. A practice model is the clear, written explanation of how the agency successfully functions.

The practice model is prescriptive in how services should be provided as articulated in agency regulations, policies, and procedures, yet allows for appropriate flexibility and professional discretion to support effective casework practice. It includes the practice activities and rationale that form the case process.

Simply stated, the practice model should make an explicit link connecting the agency’s policy, practice, training, supervision, and quality assurance with its mission, vision, agency values, and strategic plan; the agency’s practice model applies to each of these pieces and throughout the life of a case. It is the agency’s guide to the daily interactions among employees, children, families, stakeholders, and community partners working together to achieve defined outcomes.

Recommended elements of a child welfare practice model are:

- Agency mission, vision, and values
- Practice principles
- Standards of professional practice
- Strategies, methods, and tools to integrate the practice principles, agency values, and standards of professional practice into daily practice

Defining the Definition

It is important for child welfare professionals reading this framework to understand how the definition of practice model was derived. Each child welfare agency has a practice model. This is not a new concept. What they may not have, however, is a clearly written and articulated practice model. Practice models are sometimes buried in agency policy which makes it inaccessible to staff, families, and other stakeholders.

To define what we mean by the term “practice model”, we used multiple resources including scholarly research and the experiences of state and county agencies that have created their own practice models.

There are many social work models that agencies have adopted and adapted over the years as a framework for providing services to children and their families. Most concisely, Fassler¹ states that a social work practice model “prescribes what to do, can be used in multiple fields of practice, includes a ‘style’, includes sequences, includes techniques, and preferably, is empirically tested”. The ‘style’ that Fassler mentions could refer to the fundamental values and over-arching goals held by the child welfare agency. The best practice behaviors to achieve those goals and support those values form a ‘style’ that is unique to the agency. For instance, one state child welfare agency makes it very clear that a big part of their child welfare practice is how they treat their colleagues; how agency staff members work together and with other providers sets a tone and provides a clear example for how the agency expects to serve families.

Christensen & Antle² state “without an alternative conceptual map or practice model to guide them, the worker is at risk for responding to the systemic pressures they feel, rather than to building a consensus for change with the family”. One of the purposes of an articulated practice model is to ensure that staff members understand the agency’s philosophy on working with children and families. All child welfare agencies intend to work towards improving the lives of children. Explicitly stating how staff members are expected to work towards achieving improved outcomes for the families they work with and building that understanding into the agency culture is crucial in making and sustaining desired changes.

Using Federal Guidance

The Children’s Bureau of the Administration for Children and Families, United States Department of Health and Human Services has developed straight-forward principles indicating what they expect state, county, and tribal child welfare agencies to consider when creating practice. According to the Children’s Bureau³, child welfare practice should be:

- | | |
|--|--|
| ▪ Child-focused | ▪ Enhanced to strengthen parental capacity |
| ▪ Family-centered | ▪ Community-based |
| ▪ Individualized to meet the specific needs of children and families | ▪ Culturally responsive |
| ▪ Collaborative | ▪ Outcome oriented |

In order to be clear, below are the definitions⁴ of how we interpret the principles mentioned above.

Child-Focused

Definition: The safety, best interests, well-being, and needs of the child are paramount. Whenever possible, the child's views, thoughts, and ideas are expressed and taken into consideration when considering service provisions and plans.

Assumption: A child's safety, permanence, and well-being are the primary concerns of child welfare. As cases involve these issues, the child should be able to express his or her opinions and views on the status of his or her case.

Family-Centered

Definition: In the delivery of services to children involved in the child welfare system, the jurisdiction's practice is to work with and support the entire family, including fathers, as we address the abuse or neglect of a child within that family.

Assumption: The most fundamental needs of children, such as safety, nurturing, and belonging, cannot be addressed effectively without attending to the entire family's needs.

Individualized to Meet the Specific Needs of Children and Families

Definition: The capacity of public and private agencies to address concretely the needs of each child and family and not simply providing services because they are available or are the latest program du jour.

Assumption: One size does not fit all. Every family and child is different, as is their environment and the circumstances that brought them to the attention of the child welfare system. The ability to individualize services to parents enhances parental capacity to care for their children.

Collaborative

Definition: Collaborative casework involves the family, workers from various public and private agencies, and community resources to ensure the child's safety, permanence, and well-being. It is a system of care that is seamless and includes a continuum of services and resources to meet the needs of children and families.

Assumption: Families involved with the child welfare system are often involved in an array of other services. Working together ensures efforts are coordinated and integrated to produce services that are supportive of accomplishing family goals.

Enhanced to Strengthen Parental Capacity

Definition: Working with parents no longer means that we are doing things to or for them or their children. Rather, we are supporting them in being good parents and learning to make the best short- and long-term choices for their children.

Assumption: Parents, not the State, should care for their children. The correct role for State child welfare agencies is to work with families to prepare them to care for their children. This prevents the State, through foster care or other placements, from assuming the role of long-term caregiver.

Community-Based

Definition: Community-based practice first and foremost means that the services for families engaged in child welfare are provided in and by their community.

Assumption: We focus our interventions within the communities in which the families we are serving reside.

Culturally-Responsive

Definition: “A system is considered culturally competent when there is professional, formalized competence throughout the system in policies, procedures, outreach, advocacy efforts, and training. Cultural competence, sensitivity, and relevance is demonstrated through the array of services, delivery, framework, and recognition of the importance of community-based, informal support networks, such as churches, extended kinship networks, and social organizations. Cultural competence is demonstrated when there are skilled staff who are aware of cultural issues within the community and who understand the diversity of the community.”⁵

Assumption: The child welfare system serves children and families of all cultural backgrounds and should provide services and casework that is relevant and sensitive to the needs of a diverse population.

Outcome Oriented

Definition: Meeting the needs of children and families should result in outcomes that are defined, measurable, and achievable. Having standards to be met and outcomes to achieve result in movement and positive change. Outcomes are influenced by the strategies and activities used to create them and should be monitored throughout the life of the case to ensure completion and a positive result.

Assumption: Positive outcomes are the results of appropriate strategies and activities in child welfare casework. They are defined by the use of the additional principles described above.

The Children’s Bureau also encourages agencies to have ongoing internal reviews and work toward improving performance through thoughtfully designed administrative systems, such as case reviews, quality assurance, training systems, supervision, and supervisory case review tools. Measuring and improving performance, having accountability for outcomes, and ensuring the timeliness of engaging families are key activities in which successful agencies engage.

This *Practice Model Framework* series is being developed with the federal guidance in mind as it is at the crux of the Child and Family Services Reviews and, most importantly, reflects the key concepts of safety, permanence, and well-being of children and their families.

Understanding the Purpose of a Practice Model

After speaking with several child welfare agency representatives across the country, it became clear that the reasons for implementing a practice model were simple yet important. Following the implementation of a practice model:

- Agency staff members will know what their jobs are and how to do them correctly. This is also true for those who are expected to supervise. They will appreciate stable expectations and priorities.
- Agency staff, families, and other stakeholders will understand the agency’s purpose and what it does. Staff members will have a common understanding of this information when working with partners (providers, courts, other parts of the agency, etc.)
- Each agency staff member at every level of the agency’s structure will be on the “same page” in his or her understanding of agency procedures, policies, and practices, in addition to the rationale behind them, in order to be able to hold him or herself and other staff members accountable for providing the best services to children and their families. A practice model will provide a framework to use when encountering circumstances that fall outside the norm and when making critical decisions.
- The agency’s systems of service provision, training, quality assurance, and policy creation will be aligned under the same philosophical vision for consistency.
- The practice model should be integrated into everything agency staff members do in their workplace. This means treating their fellow staff members and other service providers with the same respect and guiding principles used when working with families.

Observations Thus Far

Through interviews with child welfare professionals and an analysis of several state and county practice models, interesting observations have been made related to the variety of practice models used across the country.

In the *Practice Model Framework* series, we will discuss the benefits and disadvantages of various practice model styles and elements. A practice model is effective only when it is tailored to the unique needs of the agency; there is no “one size fits all” model. Therefore, the *Practice Model Framework* series is intended to get agency leaders thinking about the benefits and potential disadvantages of assorted models. Thus far, the following ‘points to consider’ have surfaced as a result of our interviews and review of various practice models. These points will be described in more detail in the upcoming *Practice Model Framework* series briefs.

- There are many challenges to building and operationalizing an effective practice model. It is often a very long process—although well worth the time and effort.
- The act of creating or modifying a practice model should take on the elements being encouraged in the model itself. In other words, engaging stakeholders, using strengths-based language, and allowing for flexibility should be actions taken *in developing* the model—actions you would encourage staff to take *as a result* of the model.
- Involving stakeholders—including staff at all levels and areas of the agency (e.g., caseworkers, supervisors, directors, quality assurance, licensing); foster and adoptive families; youth; the courts; and private providers—makes the practice model stronger and more comprehensive

and sets the standards for encouraging effective collaboration, communication, and practice consistency.

- Agencies need to consider the level of detail and direction to include in their practice models. Determining the appropriate balance of direction and staff discretion is a challenge; some practice models we've seen allow for more flexibility than others.
- Nearly all of the practice models we have reviewed have included a description of the agency's primary goals, principles, or values. This is a good place for agencies to begin when developing, implementing, or revising a practice model as it is the foundation of the model.
- The implementation process is easier for some agencies than others. It requires strong leadership and an invested staff. To promote the investment of staff, plan to provide ample opportunities for them to discuss their concerns regarding how their work will be affected by any large changes set forth by the practice model.

What's To Come?

The upcoming Practice Model Framework series of briefs will contain more information and elements to help child welfare agencies in their practice model-related work.

More information on this topic will be covered in the upcoming practice model briefs. Based on the experiences of successful child welfare agencies across the country, you will learn more about:

- Developing and Articulating a Practice Model
- Implementation Strategies
- Ensuring Effectiveness Through Continuous Structured Feedback

If you would like to provide feedback on this document, please contact Angie Herrick Bordeaux at 207.780.5822 or abordeaux@usm.maine.edu.

¹ Fassler, A. (2006). Development of a social work practice model for out-patient psychosocial treatment of opiate addicted clients in substitution. *Weltkonferenz International Federation of Social Workers*, 14.

² Christensen, D. N., & Antle, B. (2006). Engaging child welfare families: A solution-based approach to child welfare practice, 1. Available online: <http://muskie.usm.maine.edu/helpkids/telefiles/Family%20Engagement.pdf>.

³ JBS Child Welfare Review Projects. (March 2007). *Children's Bureau Child and Family Services Reviews Practice Principles*. Available online: http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/hand-2.htm.

⁴ National Child Welfare Resource Center for Organizational Improvement. (January 2008). *The Child and Family Services Review Practice Principles: Critical Principles for Assessing and Enhancing the Service Array*

⁵ Child Welfare League of America. (n.d.). *AACAP/CWLA Values and Principles for Mental Health and Substance Abuse Services and Supports for Children in Foster Care*. Available online: <http://www.cwla.org/programs/bhd/mhvaluesandprinciples.htm>