CHILD AND FAMILY PRACTICE MODEL PACKET

The Child and Family Practice Model (CFPM or Practice Model) is a comprehensive and culturally responsive approach to child welfare practice and system level change. It is designed to improve safety, permanency and well-being outcomes for all children and reduce disparities in outcomes for communities and Tribes whose children are in care the longest and experience the worst outcomes. This packet of materials contains information on the Practice Model as well as the organization and system elements needed to ensure successful and sustainable implementation.

1. Child and Family Practice Model At a Glance

   *Short narrative description of the Practice Model.*
   - Includes summary findings from system reviews and analyses that inform and guide implementation of the Practice Model.
   - Developed with the involvement and guidance of families, communities and Tribes.
   - Model has been implemented in four pilot counties and refined through usability testing and further recommendations from communities, Tribes and other system partners.

2. Child and Family Practice Model Schematic

   *Graphic depiction of how the Practice Model is envisioned to work.*
   - Emphasizes that model is not linear – rather all parts are envisioned to work together and build on each other.
   - Shows families, communities and Tribes at the center of the model – and then a concentric and interconnected set of circles that highlight Values and Principles, Front-Line Practice Approach, eight Core Practice Elements, Practice Behaviors, and Organization and System Capacity. Shows Theoretical Framework - *Partnership, Culture and Humility* - as Model’s foundation.
3. Theoretical Framework

*Summary of conceptual approach for Practice Model.*

- Notes the ways in which the Practice Model departs from historical approaches to working with children and families.
- Includes specific CFPM Values and Principles.

4. Organization and System Capacity

*Summary of building blocks for agencies and organizations to support implementation of the Practice Model.*

- Provides descriptions of the activities needed to support and reinforce the theoretical orientation and practice skills that are part of the Practice Model.

5. Practice Behaviors

*Summary of actions for social workers and agency staff to use in implementing the Practice Model.*

- Intended as a helpful tool to guide actions and make explicit what is needed.
- Speaks to interactions between caseworkers and families, children, youth, communities and Tribes.
- Goal is to ensure staff and agency behaviors are consistent with the Practice Model’s Front-Line Practice Approach.
- Align with all elements of the Practice Model and are organized to create a reminder to "LEAN IN, LIFT UP and CONNECT TO CULTURE."

The Child and Family Practice Model was developed as part of a five-year federally funded project to reduce long-term foster care. To learn more, visit [www.reducefostercarenow.org](http://www.reducefostercarenow.org) or contact CFPMinfo@cfpic.org. The contents of this document are solely the responsibility of the authors and do not necessarily represent the official views of the Children’s Bureau, who funded the CAPP/CFPM project under Cooperative Agreement 90CT0153.
AT A GLANCE
CHILD AND FAMILY PRACTICE MODEL

Guide for child welfare agencies and their partners to use in working with vulnerable children, youth and families.

• The Child and Family Practice Model is a guide for public agencies and their partners to follow in reducing disproportionate representation and disparate outcomes and improving the lives of children, youth and families in the Child Welfare System.

• The Practice Model is informed by findings from local system reviews and analyses that address the gap between the Model’s vision and how systems that serve children and families are organized. Areas of review include agency policies, procedures and supervisory practices.

• The Model includes four elements that must come together for the Model to be effective: a theoretical framework that provides the foundation for the model, a set of guiding values and principles for all actions; a front-line practice approach that informs and guides all interaction with children and families; and the development of organizational and system capacity to support the changes that are sought through the Model.

• The Model is prescriptive in how services should be provided as articulated in individual 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.

• The Model serves as an agency’s guide to the daily interactions among employees, children, families, stakeholders, and community partners and Tribes who are working together to achieve improved outcomes for vulnerable children and families.
SYSTEM REVIEW AND ANALYSES

A review of the child welfare system and the way it influences interactions with children and families.

- The child welfare agencies and community partners that developed the Practice Model conducted local system reviews to better understand how well their systems serve children and families who are disproportionately represented or experience disparate outcomes.
- Key findings from these reviews and the experiences shared by community and tribal partners have informed the development of the Child and Family Practice Model and guide its implementation.
- System reviews were invited by the pilot sites and reflect their commitment to improving both practice and services.
- Cross-cutting issues in system review findings show that challenges are shared across sites and by many jurisdictions. Key findings can be organized by the thematic areas addressed by the Practice Model and include:
  - Exploration and Engagement
    - The need for practitioners to more effectively prioritize child and family supports and better engage families, youth and caregivers.
  - Power of Family
    - The need to demonstrate respect for family structure and increase parent and youth voice in decision-making.
  - Circle of Support
    - The need to prioritize informal supports for children and their families and the need to partner with communities and Tribes to more effectively support their children.
    - The need for supports and services that are well-coordinated and more individualized to the family’s culture and needs.
  - Healing Trauma
    - The need to lift up and focus on the layers of trauma experienced by children and families, including the personal history of trauma and the trauma of child welfare interventions in the lives of families, communities and Tribes.

THEORETICAL FRAMEWORK

Basic beliefs that provide the foundation for improved practice, system and organizational changes.

- A theoretical framework provides the foundation that informs and supports the practice, system and organizational changes that are sought through the Child and Family Practice Model.
- The CFPM theoretical framework reflects a shift away from the traditional child rescue movement where children need to be saved from parents who are ill-prepared to care for them to one that recognizes family, community and Tribal strengths and engages in true partnership to understand and meet the needs of children. In particular, the theoretical framework acknowledges the impact of broad social, racial, cultural
and historical factors in the lives of families and the importance of practice and system level changes that are rooted in humility as well as sensitivity and responsiveness to culture.

VALUES and PRINCIPLES

*Guiding beliefs intrinsic to implementation of the Model.*

- The Child and Family Practice Model is grounded in a core set of values and principles that inform and guide all actions and implementation of the model. Core values for the model include *The Power of Family; Healing; Community and Collaboration; Honesty, Transparency and Trust; Safety; Fairness and Equity; Empowerment;* and *Accountability and Results*. For each of these values, the Model articulates what these values look like in action – a set of practice principles to guide agency, community and Tribal actions in implementing the Model.

FRONT-LINE PRACTICE APPROACH

*Holistic method for agencies and communities to invoke when working with children and families.*

- The Child and Family Practice Model includes a comprehensive and interconnected approach to guide agency and community interactions with vulnerable children and families. Four front-line practices define and guide this approach: *Exploration and Engagement; Power of Family; Healing Trauma;* and *Circle of Support*. These four practices come together in a blended, interdependent way and must work equally to form effective child and family practice.

CORE PRACTICE ELEMENTS

- Within the Front-Line Practice Approach are eight Core Practice Elements that are essential to effective implementation – *Inquiry; Engagement; Self-advocacy; Advocacy; Well-being Partnerships; Recovery, Safety & Well-being; Teaming;* and *Shared Commitment & Accountability*. Each of these is supported by a set of Practice Behaviors that spell out distinctive actions for agency staff to employ when interacting with children, families, community members and stakeholders.
Helping agencies and systems meet the challenge.

- Fundamental to the Child and Family Practice Model is the development of organizational and system capacity to support and reinforce the theoretical orientation and practice skills that are part of the Practice Model.
- Key building blocks to address barriers and support quality practice include
  - An active, involved community partnership
  - Shared commitment to the Practice Model
  - Capacity building and installation
  - Effective, sustained implementation support
- Positive outcomes for children and families will result when all parts of the organization and system are working in concert to address systemic barriers and build system capacity to support implementation of the Child and Family Practice Model.

PRACTICE BEHAVIORS

A summary of actions for social workers and agency staff to use in implementing the Practice Model.

- Practice Behaviors are a compilation of actions that are needed and desired to successfully implement the Child and Family Practice Model.
- Practice Behaviors serve as a guide and tool to make explicit what is needed in interactions that occur between caseworkers and families, children, youth, communities and Tribes.
- All Practice Behaviors are consistent with the broader Front-Line Practice Approach that provides guidance and direction for the implementation of the Practice Model.
SCHEMATIC
FROM SYSTEM REVIEW and ANALYSES to CHILD and FAMILY PRACTICE MODEL DEVELOPMENT

Themes and Key Learnings from System Review and Analysis and Community/Tribal Partners

Cross-cutting issues show that challenges are shared across sites and by many counties.
Key findings can be organized by the thematic areas addressed by the practice model and include:

EXPLORATION and ENGAGEMENT
• The need for practitioners to more effectively prioritize child and family supports and better engage families, youth and caregivers.

POWER of FAMILY
• The need to demonstrate respect for family structure and increase parent and youth voice in decision-making.

HEALING TRAUMA
• The need to lift up and focus on the layers of trauma experienced by children and families, including the personal history of trauma and the trauma of child welfare interventions in the lives of families, communities and tribes.

CIRCLE of SUPPORT
• The need to prioritize informal supports for children and their families and the need to partner with communities and tribes to more effectively support their children.
• The need for supports and services that are well-coordinated and more individualized to the family’s culture and needs.

Partnership, Culture and Humility
Theoretical Foundation
THEORETICAL FRAMEWORK
CHILD and FAMILY PRACTICE MODEL

The conceptual framework applied in child welfare work has changed considerably over time. Child welfare has its roots in the child rescue movement where children needed to be saved from undeserving parents. Many of these beliefs were embedded in paradigms of patriarchy, whiteness, privilege, positivism and ethnocentrism¹. This resulted in system interactions and practice approaches that were particularly problematic for African-American and American Indian populations.

More recently, the child welfare system has focused on helping families with a complex set of needs through professional diagnosis and treatment of dysfunction. The theory is: if the problem is properly diagnosed, then prescribed treatment will provide the expected outcome. Families are the recipients of assessment and need to be compliant in following the course of treatment prescribed by the social work expert or the courts. Compliance with the case plan rather than measurable change in behavior and skills is defined as success.² Developers of the Practice Model believe this conceptual framework has contributed to the substantial gap in understanding and responsiveness to the needs of African-American and American Indian families in current child welfare practice.

The CFPM theoretical framework is a departure from the more traditional frame and builds on broader cultural experiences and beliefs about families, communities and Tribes. While consistent with theories of Family-Centered Practice and Solution-Based Casework, the theoretical framework acknowledges the impact of broad social, racial and historical factors in the lives of the diverse families being served by public child welfare and the need for humility and culturally responsive partnerships with supportive communities and Tribes to understand and meet the needs of their children. The Practice Model is based on the belief that we can most effectively address disparities in outcomes and thereby achieve positive permanency outcomes for all children when we:

- Acknowledge the history of racism and discrimination in our community; recognize its impact on institutions, communities, Tribes, families and children; and actively address one’s own biased or inaccurate assumptions about race, class, or sexual orientation to create visible change in our behaviors and interactions;
- Move from a medical/professionally-driven model of helping, to one that recognizes the parents, children, youth, families, Tribes and

communities as true partners in developing solutions;

- Recognize issues of social justice and the unequal distribution of power and resources as service delivery is planned;
- Consistently and repeatedly partner with the child or youth, birth parents, and entire extended maternal and paternal family and support community and Tribes in solution- and outcome-focused planning and decision making; and
- Engage the broader community and Tribes in problem posing and solving rather than attempting to fix all problems alone.

The values and practice principles in the Child and Family Practice Model flow from this theoretical foundation for how change will occur. They provide administrators and practitioners with a firm foundation for making decisions and guide their interactions with children, families, community and Tribal members. Each value is exemplified by practice principles that demonstrate the value in action.
<table>
<thead>
<tr>
<th>VALUES WE BELIEVE IN...</th>
<th>PRACTICE PRINCIPLES – OUR VALUES IN ACTION...</th>
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<tbody>
<tr>
<td>The Power of Family[^3]</td>
<td>We demonstrate this by ensuring that every child and youth has a lifelong, loving, legal family and by partnering with all family members and caregivers in planning and decision-making, including working together early and continuously to develop and support safe family relationships and multiple paths to permanency.</td>
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<tr>
<td>Healing</td>
<td>We demonstrate this by making all of our interactions and interventions with children, families and communities sensitive and responsive to the trauma and loss they may have experienced.</td>
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<tr>
<td>Community and Collaboration</td>
<td>We demonstrate this by building partnerships with community and Tribes to ensure that services and interventions reflect the diverse needs of the families and children we serve. This includes partnering with natural neighborhood supports, schools, Tribal supports, faith-based and other cultural community supports identified by families.</td>
</tr>
<tr>
<td>Honesty, Transparency and Trust</td>
<td>We demonstrate this by being authentic and truthful in every interaction we have with children, youth, families, partners and one another, by showing respect and regard for each person’s unique lived experience, strengths and beliefs, and by being transparent about our decision making and our outcomes.</td>
</tr>
<tr>
<td>Safety</td>
<td>We demonstrate this by creating an environment where power is shared and trust is created to enable a child, youth, birth parent, extended family, community and Tribe to actively work together toward change that will result in safety for the child or youth.</td>
</tr>
<tr>
<td>Fairness and Equity</td>
<td>We demonstrate this by expanding our awareness and understanding of institutional and personal bias; increasing our knowledge, respect and regard for all ethnicities, cultures, gender, sexual identity, socio-economic backgrounds and perspectives; and asking the groups that are most affected by our policies, services, and interventions to guide their development.</td>
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</tbody>
</table>

[^3]: The terms family and families are used broadly throughout the CFPM Practice Model. The CFPM definition of family and families includes blood and adoptive relatives, step-families and unrelated persons that have an emotionally significant relationship. For American Indian youth and families this term includes their tribe and tribal relations as understood under the tribes’ customs and traditions. Youth, family and for American Indian youth, tribes are best and uniquely qualified to identify who fits this description.
<table>
<thead>
<tr>
<th>Empowerment</th>
<th>We demonstrate this by affirming the unique strengths and needs of each child, youth and family and by encouraging their voice and choice in decisions about their lives.</th>
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</thead>
<tbody>
<tr>
<td>Accountability and Results</td>
<td>We demonstrate this by employing services and interventions that are backed by evidence of their effectiveness and by continuing to track and analyze data to improve all of our practices and policies.</td>
</tr>
</tbody>
</table>
Organizational and System Capacity

With an active involved community and local leadership, organizational commitment, system capacity and support for implementation, all parts of the organization and system work in concert to address systemic barriers, support quality practice and ensure accountability to shared goals and outcomes for the children and families being served.

I. An Active, Involved Community Partnership

Local child welfare agencies, organizations and leaders demonstrate commitment to community partnerships that respect and incorporate the unique contributions of communities and Tribes. These partnerships guide ongoing local practice and system changes. The following are core partnership activities:

• Listening sessions to learn about and begin to address historical trauma and mistrust of agencies and systems
• Working with community and Tribal partners to identify system barriers to improved outcomes for children and families and implement action plans to address those barriers
• Collaborating with community and Tribal partners to establish pathways to culturally relevant and trauma-informed services to meet the underlying needs of children and their families
• Meaningfully involving community and Tribal partners in training, coaching and ongoing system supports for effective, sustained implementation of the Child and Family Practice Model
• Ensuring partnership meetings, forums and feedback loops are sustained so that community and Tribal partners are continuously connected to and help guide ongoing child welfare practice and system changes to achieve improved outcomes for children and their families

II. Shared Commitment to the Practice Model

There is shared commitment by local child welfare agencies, organizations, leaders and partners to:

• Adopt the Child and Family Practice Model as the central framework for all interactions with children and families involved with the child welfare system
• Dedicate staffing resources to form and link local implementation and leadership teams and employ implementation science to “drive” successful implementation and support of the Practice Model locally.
• Work continuously to:
  o Establish internal and external communication and feedback loops to intentionally connect Implementation Teams to practice and leadership levels and promote “practice-informed policy” and “policy-enabled practice”
  o Identify, develop and support use of a broad culturally relevant service array responsive to the underlying needs of local children and their families
o Align all parts of the system to support the practice and system changes reflected in the Practice Model

III. Capacity-Building and Installation

Local Implementation Team(s) works with staff, supervisors, trainers, coaches, agency and community partners, administration and leadership/advisory teams to:

- Educate, prepare and meaningfully involve staff and partners in implementation planning, cross-system coordination, capacity-building and readiness activities
- Develop, adapt or enhance Practice Model training and coaching curricula and service delivery plans in partnership with community and Tribal partners to support Practice Model integration and implementation at all levels of the organization and system, building on local strengths, resources, strategic direction and needs
- Train and prepare practitioners’ supervisors, managers and executive leadership, and other coaches, in:
  o Practice Model Mastery - building fluency in applying the 23 Practice Behaviors in the context of families, communities, Tribes, as well as within child welfare and mental health/behavioral health agencies, leadership, provider organizations and systems
  o BehaviorallyFocused Coaching - understanding the coaching role of supervisors, managers, executive leadership, and other internal and external coaches, in supporting system alignment, implementation and fidelity use of the Practice Model
  o Strategies for incorporating coaching in supervision, unit meetings, and other forums to build competency at all levels of the organization and system in applying the Practice Model

IV. Effective, Sustained Implementation Support

Community and Tribal partners are connected to and supporting implementation in meaningful ways, such as acting as key advisors, playing roles in training or coaching, acting as members of Implementation or Fidelity Assessment Teams, etc.

Linked Leadership and Implementation Teams are working adaptively and collaboratively with staff and partners to ensure a supportive, aligned and transparent system of culturally responsive practice, services and supports.

Local Implementation Teams carry ongoing responsibility for the day-to-day management and coordination of all activities that support, assess and improve implementation of the Practice Model, including:

- Participating in internal and external communication and feedback loops to ensure ongoing coordination and support for implementation of the Practice Model
- Ensuring all staff and partners who have been trained in and are implementing the Practice Model receive ongoing behaviorally focused coaching supporting high fidelity use of the Practice Model
- Ensuring that fidelity to the model is assessed by agency and community partner observer teams annually and that fidelity results and implementation data are considered in relation to outcome data and used for continuous quality improvement
PRACTICE BEHAVIORS
CHILD and FAMILY PRACTICE MODEL

Practice profiles, or PRACTICE BEHAVIORS as CFPM calls them, define in behavioral terms the interactions between caseworkers and families, children, youth, communities and Tribes. CFPM Practice Behaviors are consistent with:

➢ CFPM FRONT-LINE PRACTICE APPROACH – This approach continuously explores and engages a broad network of family, cultural, community and tribal relationships in an ongoing Circle of Support that values family and cultural strengths, solutions and resources, attends to trauma, loss and other underlying needs, keeps children safe, and supports the family and their well-being during and after child welfare system involvement.

CORE PRACTICE ELEMENTS – There are eight practice elements or “active ingredients” for the Child and Family Practice Model:

1. INQUIRY: Uses inquiry and mutual exploration with the family to find, locate and learn about other family members and supportive relationships of children, youth and families within their communities and Tribes.
2. ENGAGEMENT: Seeks out, invites in, values and makes central the power, perspectives, abilities and solutions of families and their supportive communities and Tribes in all teaming and casework practice.
3. SELF-ADVOCACY: Recognizes and supports the power of individuals and families to speak about their own well-being and self in finding solutions and continuing to grow.
4. ADVOCACY: Speaks out for children, youth and families based on their strengths, resources and cultural perspectives in order to support them in strengthening their family, meeting their needs, finding their voice and developing the ability to advocate for themselves (includes caseworkers, attorneys, tribal and community representatives, CASA’s, service providers, etc.).
5. TEAMING: Recognizes and appreciates the strength and support that a family’s community, cultural, tribal and other natural relationships can provide, which inspires and insists that not only the family is engaged, but the family’s entire system of support so that the family’s underlying needs can be met.
6. SHARED COMMITMENT AND ACCOUNTABILITY: Every assessment and decision is the product of the work of both the social worker and the family, and in many cases inclusive of the collaborative work within the child and family team.
7. WELL-BEING PARTNERSHIPS: Understands and addresses health, education, spiritual and other family needs through on-going partnerships with families and their supportive communities and Tribes, including exploring and responding sensitively to the current and historical trauma and loss family members and caregivers may have experienced.
8. RECOVERY, SAFETY AND WELL-BEING: Based on the strengths, resources and perspectives of families and their supportive communities and Tribes, identifies, locates, advocates for and supports use of culturally sensitive services, supports, healing practices and traditions to address trauma, loss, behavioral health, recovery, child safety and other child and family needs.
### EXPLORATION & ENGAGEMENT

**CORE PRACTICE ELEMENTS**

**INQUIRY** – Uses inquiry and mutual exploration with the family to find, locate and learn about other family members and supportive relationships of children, youth and families within their communities and tribes.

**ENGAGEMENT** – Seeks out, invites in, values and makes central the power, perspectives, abilities and solutions of families and their supportive communities and tribes in all teaming and casework practice.

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<thead>
<tr>
<th>LEAN IN</th>
<th>COMPLETE PRACTICE BEHAVIORS</th>
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<tbody>
<tr>
<td><strong>Listens with Openness</strong></td>
<td>Approaches all interactions with families, communities and tribes with openness. Listens without making assumptions and communicates a genuine desire to learn about the family and their culture, community and tribes by consistently asking global questions followed by more descriptive questions that encourage exchange and learning about family strengths, beliefs, traditions, life situation and who/what is important to family members. Uses language that everyone can understand and frequently checks in on communication styles and terms to ensure understanding.</td>
</tr>
<tr>
<td><strong>Explores Relationships</strong></td>
<td>Uses tools such as mapping to explore family relationships, natural circles of support and to identify safety issues and how they can be addressed. Explores with children how, when and with whom they feel safe, what is good in their lives, where they want to live, what worries them and what they wish for. Continuously encourages the family to identify natural supports to be included on their team.</td>
</tr>
<tr>
<td><strong>Actively Finds Connections</strong></td>
<td>Seeks information from children, youth, mothers and fathers about non-custodial parents, maternal and paternal grandparents, aunts and uncles, brothers and sisters, Godparents, tribal members, and other significant relationships. Asks early and ongoing, “Who is in your family? Who are you connected with in your community? Who are the keepers of family history? Who in the family do you turn to for reunions, gatherings, ceremonies and at other times of celebration, loss and grief?” Gives reasons why their answers are helpful. Consistently models honest and respectful communication by introducing self, communicating a sincere desire to be respectful (“I would like to be respectful, how should I address you?”) and by addressing individuals by the name or title they request. Is open and honest about the situation, explains relevant facts and information, is clear about information or action being requested, and facilitates dialogue regarding how the requested information and actions will affect the situation and support the child and family.</td>
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<td><strong>Nurtures Honest Dialogue</strong></td>
<td>Follows up inquiry and search activities by: (1) working quickly and leaving no stone unturned to establish paternity and facilitate the child’s connection with paternal relationships and resources, and (2) contacting family, cultural, community and tribal connections not just as placement options, but as important team members and sources of support for the child and family.</td>
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# POWER of FAMILY

## CORE PRACTICE ELEMENTS

**SELF-ADVOCACY** – Recognizes and supports the power of individuals and families to speak about their own well-being and self in finding solutions and continuing to grow.

**ADVOCACY** – Speaks out for children, youth and families based on their strengths, resources and cultural perspectives in order to support them in strengthening their family, meeting their needs, finding their voice and developing the ability to advocate for themselves (includes caseworkers, attorneys, tribal and community representatives, CASA's, service providers, etc.).

## LIFT UP

<table>
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<tr>
<th>COMPLETE PRACTICE BEHAVIORS</th>
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<tbody>
<tr>
<td><strong>Links Family</strong></td>
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<tr>
<td><strong>Interactions are Affirming</strong></td>
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<tr>
<td><strong>Facilitates Sharing</strong></td>
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<td><strong>Team Solutions</strong></td>
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<tr>
<td><strong>Uses Cultural Lens</strong></td>
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<td><strong>Promotes Speaking Out</strong></td>
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# CIRCLE of SUPPORT

## CIRCLE of SUPPORT

**TEAMING** – Recognizes and appreciates the strength and support that a family’s community, cultural, tribal and other natural relationships can provide, which inspires and insists that not only the family is engaged, but the family’s entire system of support so that the family’s underlying needs can be met.

**SHARED COMMITMENT AND ACCOUNTABILITY** – Every assessment and decision is the product of the work of both the social worker and the family, and in many cases inclusive of the collaborative work within the child and family team.

## COMPLETE PRACTICE BEHAVIORS

<table>
<thead>
<tr>
<th>CONNECT</th>
<th>COMPLETE PRACTICE BEHAVIORS</th>
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<tr>
<td><strong>Caregiver Respect &amp; Resources</strong></td>
<td>Demonstrates respect to caregivers by having candid discussions and developing shared understanding with caregivers about their rights, role and expectations in being/becoming the child’s caregiver, including caregiver participation on the child and family support team, responsibilities to support the child’s health, education, spiritual and other needs, and responsibilities to support the child’s family relationships and cultural, community and tribal connections. Provides information about resources available based on their role as a family member, non-relative extended family member (NREFM) or other care provider before the child/family needs to access/utilize them.</td>
</tr>
<tr>
<td><strong>Optimal Team Environment</strong></td>
<td>Creates an environment for open and honest communication with the family and the family team about child safety, permanency and court timeframes so that the team’s planning and decision-making is informed, relevant, and timely. Models accountability and trust by following through with representations and agreements. Admits and takes responsibility for one’s own biases, missteps and mistakes.</td>
</tr>
<tr>
<td><strong>Natural Supports</strong></td>
<td>Establishes, continuously brings together and supports the child and family’s team, which includes natural family, cultural, community and tribal supports and others providing services to the family such as social workers, attorneys and services providers.</td>
</tr>
<tr>
<td><strong>Normalizing Needs</strong></td>
<td>Understands normal is different for everyone and checks on what is “normal” for the family and their culture, community and tribes. Facilitates critical thinking and discussion with the family and their team about the family’s underlying needs, how they define the problem and what success looks like. Listens attentively, uses language and concepts that the family has used, and incorporates the family’s strengths, resources, cultural perspective and solutions in all casework, decision-making, case plans, court reports, meeting notes and other documentation.</td>
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<tr>
<td><strong>Explores Team Roles</strong></td>
<td>Explores with team members what roles they can play over time to strengthen child safety and support the family, and then continually engages and reinforces the team in those roles. Facilitates the team to discuss, understand and adapt to changing team member roles – for instance, when reunification efforts stop, helps the team explore, identify and honor a new role for the parent.</td>
</tr>
<tr>
<td><strong>Continuous Dialogue &amp; Adjustment</strong></td>
<td>Facilitates continuous dialogue with the family and their team regarding whether/how the agreed-upon practices, services, supports and visitation plans are working and facilitates adjustments/follow-through based on family and support team discussions, assessments, and decisions.</td>
</tr>
<tr>
<td><strong>Teams Post-Permanency</strong></td>
<td>Emphasizes the importance of the family’s support team even beyond the time of child welfare agency involvement. Before the case ends, facilitates shared understanding and agreement of team member roles and commitments in maintaining a post-permanency circle of support for the child and family, including identifying a system navigator who is aware of agency supports and services (including mental health and substance abuse) and will act as an ongoing liaison and advocate for the family team when contacted about system supports and services the child and family may need.</td>
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# HEALING TRAUMA

## CORE PRACTICE ELEMENTS

### WELL-BEING PARTNERSHIPS –
Understands and addresses health, education, spiritual and other family needs through on-going partnerships with families and their supportive communities and tribes, including exploring and responding sensitively to the current and historical trauma and loss family members and caregivers may have experienced.

### RECOVERY, SAFETY AND WELL-BEING –
Based on the strengths, resources and perspectives of families and their supportive communities and tribes, identifies, locates, advocates for and supports use of culturally sensitive services, supports, healing practices and traditions to address trauma, loss, behavioral health, recovery, child safety and other child and family needs.

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## CULTURE

<table>
<thead>
<tr>
<th>COMPLETE PRACTICE BEHAVIORS</th>
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<tbody>
<tr>
<td><strong>Customized Visitation</strong></td>
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<tr>
<td>With the family, caregiver and team continually assesses, arranges and structures culturally appropriate visitation activities in the most natural environment possible that supports the child and the parent/child relationship.</td>
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<tr>
<td><strong>Using Experiential Coaching</strong></td>
</tr>
<tr>
<td>Assesses with the family and their team the need for interactive, experiential coaching during visitation and at other times of natural parent/child interaction to improve parenting skills; follows through with identifying, arranging or advocating for this when needed.</td>
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<tr>
<td><strong>Listening for Loss</strong></td>
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<tr>
<td>Regularly listens to the family’s story, acknowledges and validates feelings of grief and loss they share by reflecting and reaffirming what was heard. Supports family members to explore their history and experiences, and how this may be impacting their current life situation and underlying needs. Includes naming and acknowledging the many types and layers of trauma the family may have experienced (historically what happened to their community and culture; past experiences of violence, loss, abuse, removal, etc.; recent trauma/loss experiences of child). Encourages family members to address their history with extended family, cultural, community and tribal leaders, therapists, drug treatment providers, and others identified by the family as important to them.</td>
</tr>
<tr>
<td><strong>Tailoring Supports to Underlying Needs</strong></td>
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<tr>
<td>Explores, values, connects the family to and advocates for a broad array of services, supports, cultural practices and traditions that can assist the child and family with loss, grief, hurt, pain, healing and recovery (e.g. “Who and what is helping – and/or in the future could help – with child and family's physical, mental and emotional health, substance abuse issues, education, spiritual and other needs? Are there cultural or community practices and traditions that you think could support family members' healing, health, wholeness and well-being?)</td>
</tr>
<tr>
<td><strong>REcovery and Well-Being</strong></td>
</tr>
<tr>
<td>Through teaming processes creates shared agreement on the safety issues to be addressed and the culturally sensitive services, supports, practices, traditions and visitation plan that will address child safety and support family and cultural relationships and address trauma, loss, behavioral health, drug/alcohol recovery, child safety, child and family well-being and other underlying needs identified by the family and their team. Works continuously to identify, locate, develop, fund, advocate for, link the family to and support the use of the agreed-upon practices, services and supports.</td>
</tr>
</tbody>
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