





# NC Department of Health and Human Services

## Division of Social Services

## Presentation to Benchmarks

**September 10, 2020**

# What is a practice model?

A practice model or practice framework details the values and principles that guide a system's approach to working with children and families and describes activities and techniques that are critical to achieving desired outcomes.*

*Child Welfare Policy and Practice Group. Adopting a Child Welfare Practice Framework

# What are Practice Standards

- Descriptions of:
  - How workers should interact with children, youth and families from the beginning to the end of child welfare services
  - How supervisors and leaders should support workers and help them be successful
- They make a practice model teachable and observable

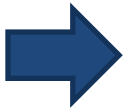
# Why have a Practice Model with Practice Standards

- Consistent services in all 100 counties true to the state's values:
  - safety focused
  - family centered
  - trauma informed
  - culturally competent
- To improve outcomes for families

# How do practice model and practice standards fit together?

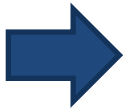
**Practice Models**

provide a structure to achieve an agency's mission



**Essential Functions**

are the core ways workers interact with children, youth and families throughout child welfare services



**Practice Standards**

describe the specific behaviors child welfare staff, supervisors and leaders should be using.

# Example of a Practice Standard

**Essential Function: Communicating**

Definition: Timely and consistent sharing of oral and written information so that meaning and intent are understood in the same way by all parties involved. Open and honest communication underpins successful performance of all essential functions in child welfare.

Example Core Activity:

- Check with children, youth and families to assure understanding

| Behavioral Practice Standard | Expected | Developmental | Unacceptable |
|---|---|---|---|
| Ensures two-way understanding when talking with children, youth and families | • Summarizes what the worker has heard and asks if that is correct<br>• Summarizes agreed upon actions or decisions and asks if anything is unclear<br>• Provides follow up clarifications | • Understands the importance of clarifying understanding but does not yet do so consistently | • Does not make efforts to listen or check that the worker has understood what the family has said<br>• Does not follow up to ensure the family has a clear understanding or what the worker has said or what has been agreed to |

# What choices have been made?

## NC DHHS is implementing Safety Organized Practice (SOP)

- SOP has a menu of tools for workers to use with families and children. Examples include:
  - Structured decision-making (SDM) tools
  - Harm and danger statements
  - Behaviorally specific case plans
  - Safety networks
- NC will contract with NCCD to update and revalidate SDMs and train on SOP

# What Choices have been made

- NC will anchor tools of SOP within broader practice standards that will support SOP implementation and will make clear what NC means by safety focused, trauma informed, family centered and culturally competent practice.
- The statewide practice standards will be documented and referred to as North Carolina's Child Welfare Practice Model.


Safety Focused
Engaging
Assessing
Communicating
Implementing
Planning
Trauma Informed
Family Centered
Culturally Competent

# Essential Function Definitions--Communicating

Timely and consistent sharing of spoken and written information so that meaning and intent are understood in the same way by all parties involved. Open and honest communication underpins successful performance of all essential functions in child welfare.

# Engaging

**Empowering and motivating families to actively participate with child welfare in the functions of assessing, planning, and implementing by communicating openly and honestly with the family, by demonstrating respect, and by valuing the family's input and preferences. Engagement begins upon first meeting a family and continues throughout child welfare services.**

# Assessing

**Gathering and synthesizing information from children, families, support systems, agency records, and persons with knowledge to determine the need for child protective services and to inform planning for safety, permanency and well-being. Assessing occurs throughout child welfare services and includes learning from families about their strengths and preferences.**

# Planning

**Respectfully and meaningfully collaborating with families, communities, tribes and other identified team members to set goals and develop strategies based on the continuous assessment of safety, risk, family strengths and needs through a child and family team process. Plans should be revisited regularly by the team to determine progress towards meeting goals and make changes when needed.**

# Implementing

Carrying out plans that have been developed. Implementing includes linking families to services and community supports, supporting families to take actions agreed upon in plans and monitoring to assure plans are being implemented by both families and providers, monitoring progress on behavioral goals, and identifying when plans need to be adapted.

# What choices have been made?

- DHHS will develop and implement its practice model and practice standards in partnership with county DSSs, with robust input from diverse groups of partners and stakeholders, and with assistance from the Center for Support of Families.
- Design Teams will play a central role in providing input



# CFSP Commitments and Design Teams

| | |
|---|---|
| **SAFETY** | Children and youth will live in safe, stable and nurturing environments. |
| **PERMANENCY** | Children and youth in foster care will live in safe, stable and nurturing homes and exit the foster care system to safe permanent homes in a timely manner. Older youth who turn 18 in the foster care system will transition successfully to adulthood. |
| **WELL-BEING** | Families will have enhanced ability to meet their children and youths' well-being needs, including physical, social-emotional, behavioral and educational needs. |
| **CONTINUOUS QUALITY IMPROVEMENT** | Services provided to children and families will be positively impacted by a continuous quality improvement process that is consistent across the state. |
| **WORK FORCE DEVELOPMENT** | North Carolina will build and support a stable child welfare workforce that is well-qualified, trained, supervised and supported to promote positive outcomes for children, youth and families. |

# Design Team Process

- CSF presented an overview to design teams of the development of the practice model to design teams at their August meetings
- Beginning at September meetings, design teams will offer input on practice standards for essential functions
- In 2021, design teams will review and give feedback on draft practice standards

# Benchmarks June 2020 to June 2021

**July 31, 2020 -** Essential functions selected (complete)

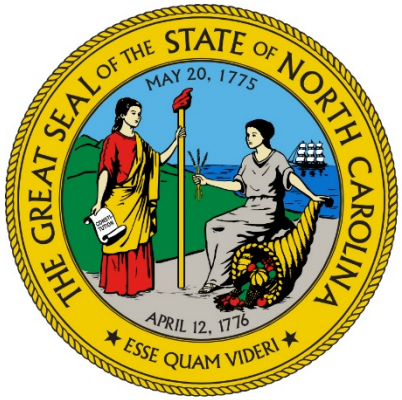
**January 31, 2021 -** Core activities, practice standards completed for one essential function; others underway

**June 30, 2021 –**

- Core activities, practice standards for all essential functions completed
- Selection of elements of SOP that will be trained by NCCD

# Benchmarks by June 2022

- Child welfare staff will be trained in the practice standards
- NCCD will update, revalidate and train NC staff on SDM tools including structured intake
- Changes will be made in policy and pre-service training to align with the practice standards and SOP
- NCCD will begin training North Carolina staff on Safety Organized Practice


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# Questions