



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

**Division of Social Services**

## **North Carolina Department of Health and Human Services Permanency Planning Services Track Training**

### **Participant's Workbook Day One**

**September 2024**



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## Instructions

This course was designed to guide child welfare professionals through the knowledge, skills, and behaviors needed to engage with families in need of child protection services. The workbook is structured to help you engage in the lesson through reflection and analysis throughout each week of training. Have this workbook readily available as you go through each session to create a long-lasting resource you can reference in the future.

If you are using this workbook electronically: Workbook pages have text boxes for you to add notes and reflections. Due to formatting, if you are typing in these boxes, blank lines will be “pushed” forward onto the next page. To correct this when you are done typing in the text box, you may use delete to remove extra lines.

## Course Themes

The central themes of the Permanency Planning Track Training are divided across several course topics.

- Purpose, Practice Standards, and Legal Aspects
- Diversity, Equity, Inclusion, and Belonging
- Indian Child Welfare Act of 1978 (ICWA)
- Communicating
- Family Engagement
- Assessing in Permanency Planning Services
- Trauma-Informed Care
- Permanency Plans and Concurrent Planning
- Attachment
- Family Time
- Shared Parenting
- Working with Relatives
- Partners in the Permanency Planning Process
- Permanency Planning with the Family
- Permanency Planning Family Services Agreement
- Child and Family Team Meetings
- Authentically Engaging Children and Youth
- Family-Centered Permanency Planning
- Quality Contacts
- Preparing for Permanency
- Engaging Relatives
- Placement

- Placement with Relatives
- Monitoring the FSA
- Achieving Permanency
- Adoption
- Documentation
- Worker Safety

## Training Overview

Training begins at 9:00 a.m. and ends at 4:00 p.m. If a holiday falls on the Monday of training, the training will begin on Tuesday at 9:00 a.m. This schedule is subject to change if a holiday falls during the training week or other circumstances occur. The time for ending training on Fridays may vary and trainees need to be prepared to stay the entire day.

Attendance is mandatory. If there is an emergency, the trainee must contact the classroom trainer and their supervisor as soon as they realize they will not be able to attend training or if they will be late to training. If a trainee must miss training time in the classroom, it is the trainee's responsibility to develop a plan to make up missed material.

### Pre-Work Online e-Learning Modules (If Applicable)

There is required pre-work for the Permanency Planning Track Training in the form of online e-Learning modules. Completion of the e-Learnings is required prior to attendance at the classroom-based training. The following are the online e-Learning modules:

1. North Carolina Worker Practice Standards
2. Safety Organized Practice
3. Understanding and Assessing Safety and Risk
4. Understanding and Screening for Trauma

### Transfer of Learning (TOL) Tool

The Permanency Planning Track Training Transfer of Learning (ToL) tool is a comprehensive and collaborative activity for workers and supervisors to work together in identifying worker goals, knowledge gain, and priorities for further development throughout the training process. In four distinct steps, the worker and supervisor will highlight their goals and action plan related to participating in training, reflect on lessons and outstanding questions, and create an action plan to support worker growth. The tool should be started prior to beginning the Permanency Planning Track Training and revisited on an ongoing basis to assess growth and re-prioritize actions for development.

- Part A: Training Preparation: Prior to completing any eLearning and in-person Track Training sessions, the worker and supervisor should meet to complete Part A: Training Preparation. In this step, the worker and supervisor will discuss their goals for participation in training and develop a plan to meet those goals through

pre-work, other opportunities for learning, and support for addressing anticipated barriers.

- Part B: Worker Reflections During Training: The worker will document their thoughts, top takeaways, and outstanding questions regarding each section. This level of reflection serves two purposes. First, the practice of distilling down a full section of training into three takeaways and three remaining questions requires the worker to actively engage with the material, subsequently forming cognitive cues related to the information for future use in case practice. Second, prioritizing takeaways and questions by section allows workers to continually review information to determine if questions are answered in future sessions and supports the development of an action plan by requiring workers to highlight the questions they find most important.
- Part C: Planning for Post-Training Debrief with Supervisor: The worker considers the takeaways and questions they identified in each section and creates a framework to transfer those takeaways and questions into an action plan.
- Part D: Post-Training Debrief with Supervisor: Provides an opportunity for the supervisor and worker to determine a specific plan of action to answer outstanding questions and to further support worker training.

While this ToL is specific to the Track Training in North Carolina, workers and supervisors can review the takeaways and questions highlighted by the worker in each section of training on an ongoing basis, revising action steps when prior actions are completed, and celebrating worker growth and success along the way.

### **Training Evaluations**

At the conclusion of each training, learners will complete a training evaluation tool to measure satisfaction with training content and methods. The training evaluation tool is required to complete the training course. Training evaluations will be evaluated and assessed to determine the need for revisions to the training curriculum.

All matters as stated above are subject to change due to unforeseen circumstances and with approval.

## Learning Objectives

### Day 1

<b>Purpose, Practice Standards, and Legal Aspects</b>
<ul style="list-style-type: none"> <li>• Learners will be able to define permanency.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to define emotional and relational permanency and describe the benefits of each type of permanence.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will describe the interconnection of legal, relational, and cultural permanence.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to distinguish permanency planning roles and responsibilities from other child welfare system job roles.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to describe where their roles and responsibilities fall within the case process.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to utilize associated placement forms:                             <ul style="list-style-type: none"> <li>• Eligibility, payment, and reporting forms</li> <li>• Determination of Foster Care Assistance Benefits form</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to describe the case transfer process.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to initiate information gathering to support case transfers that provide them with a clear understanding of case and family characteristics.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to develop a clear plan for case transfer processes so all necessary information is collected prior to finalizing case transfer.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to explain the policy requirements for case transfers.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to outline federal and state laws that govern child welfare policies related to children and families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to access relevant state and federal laws to inform their case decisions.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to discuss how state and federal laws impact child welfare case practice.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to describe the behaviors and elements that encompass family-centered practice and how they impact safety, permanency, and well-being outcomes.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to explain the various types of court hearings involving children and families and their roles in each of the hearings.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to explain their roles and responsibilities related to court and court-related activities.</li> </ul>

<b>Diversity, Equity, Inclusion, and Belonging</b>
<ul style="list-style-type: none"> <li>• Learners will be able to explain the history of institutional racism in child welfare and its impact on disproportionality in child welfare.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to discuss the impact of institutional racism in child welfare on safety, permanence, and well-being outcomes for children and families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to describe how marginalized children and families have been historically overrepresented in child welfare.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to identify institutional racism in assessment and decision-making processes.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to define and recognize underrepresentation and overrepresentation in the child welfare system and identify the underlying causes.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to recognize how disproportionality leads to inequitable service provision and disparate outcomes for children and families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to explain the concepts of diversity, equity, inclusion, and belonging and the role and importance of each in child welfare.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to discuss methods of self-reflection and self-awareness to uncover biases that may influence their ability to engage children and families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to explain the importance of cultural humility and inclusion when conducting assessments and making decisions with and for families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to demonstrate an understanding of cultural humility as a lifelong process of self-awareness and learning from other cultures.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to share examples of advocating for fair and culturally appropriate In-Home Services for children and families.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will engage in supervisory coaching to explore and mitigate implicit and explicit biases in their role as child welfare specialists.</li> </ul>
<b>Indian Child Welfare Act of 1978 (ICWA)</b>
<ul style="list-style-type: none"> <li>• Learners will be able to determine when tribal involvement is required based on family history and federally required standards.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to independently initiate contact with tribal representatives for required notices and for case planning purposes.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to defend the need for tribal involvement in case processes and prioritize tribal voice in decision-making.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to differentiate between reasonable efforts and active efforts.</li> </ul>

<b>Indian Child Welfare Act, continued</b>
<ul style="list-style-type: none"> <li>• Learners will understand how to comply with legal and practical Notice to Tribes of placement, case status, and court-related activities for children who are identified as an “Indian child” under ICWA.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to apply active efforts to Permanency Planning Services for ICWA-involved children and families.</li> </ul>
<b>Communicating (found throughout the curriculum)</b>
<ul style="list-style-type: none"> <li>• Learners will be able to engage in difficult conversations with parents and other important adults with confidence and empathy.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to demonstrate engagement techniques that support families through crucial case conversations.</li> </ul>
<b>Family Engagement</b>
<ul style="list-style-type: none"> <li>• Learners will be able to describe the behaviors and elements that encompass family-centered practice and how they impact safety, permanency, and well-being outcomes.</li> </ul>
<ul style="list-style-type: none"> <li>• Learners will be able to demonstrate family engagement skills when permanency planning with caregivers.</li> </ul>

## Day One Agenda

### Permanency Planning Services Track Training

- I. Welcome and Introductions

#### **Purpose, Practice Standards, and Legal Aspects**

- II. North Carolina Practice Model
- III. Purpose and Overview of Permanency Planning Services
- IV. Roles and Responsibilities of Permanency Planning Social Workers
- V. Case Transfer
- VI. Legal Definitions and Legal Aspects
- VII. Reasonable Efforts
- VIII. The Court Process
- IX. Family-Centered Practice

#### **Diversity, Equity, Inclusion, and Belonging**

- X. Institutional Racism in Child Welfare Systems in the United States
- XI. Cultural Humility, Inclusion, and Considerations for Decision-Making
- XII. Identifying and Addressing Bias

#### **Indian Child Welfare Act of 1978 (ICWA)**

- XIII. Relationships with Tribes and Nations

#### **Communicating**

- XIV. Communicating Skills
- XV. Crucial Conversations

#### **Family Engagement**

#### **End-of-Day Values Reflection**

Welcome & Introductions

**Welcome & Introductions**

---

Name

---

County where you work

---

Position you hold within the agency

---

What brought you to Child Welfare Permanency Planning Services work?

---

What skill, unrelated to your work, could you teach others?

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Track Training Overview

**Training Resources**

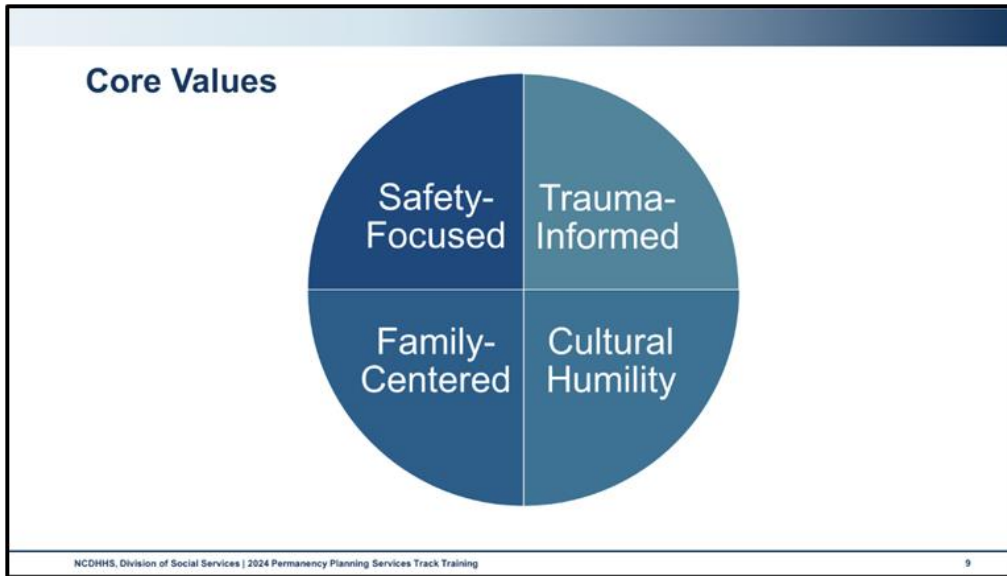
<ul style="list-style-type: none"><li>• Follow lecture</li><li>• Record notes</li><li>• Complete activities</li></ul> <p><b>Participant Workbook</b></p> 	<ul style="list-style-type: none"><li>• Appear in order of use</li><li>• Listed in Appendix</li></ul> <p><b>Handouts</b></p> 	<ul style="list-style-type: none"><li>• North Carolina Child Welfare forms</li></ul> <p><b>Tools</b></p> 	<ul style="list-style-type: none"><li>• North Carolina Child Welfare Policies &amp; Procedures</li></ul> <p><b>Policy Manual</b></p> 
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## Purpose, Practice Standards, and Legal Aspects

### North Carolina Practice Model



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**Reflections**

- Where do you excel?
- Where are the areas you can grow?

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**What areas do you excel in?**

**Where are the areas you can grow?**



**What**

**Consider the specific services provided to children and families in Permanency Planning Services. Also, consider the specific tasks and roles of Permanency Planning Social Workers.**

Family-Accessible Language

**Why**

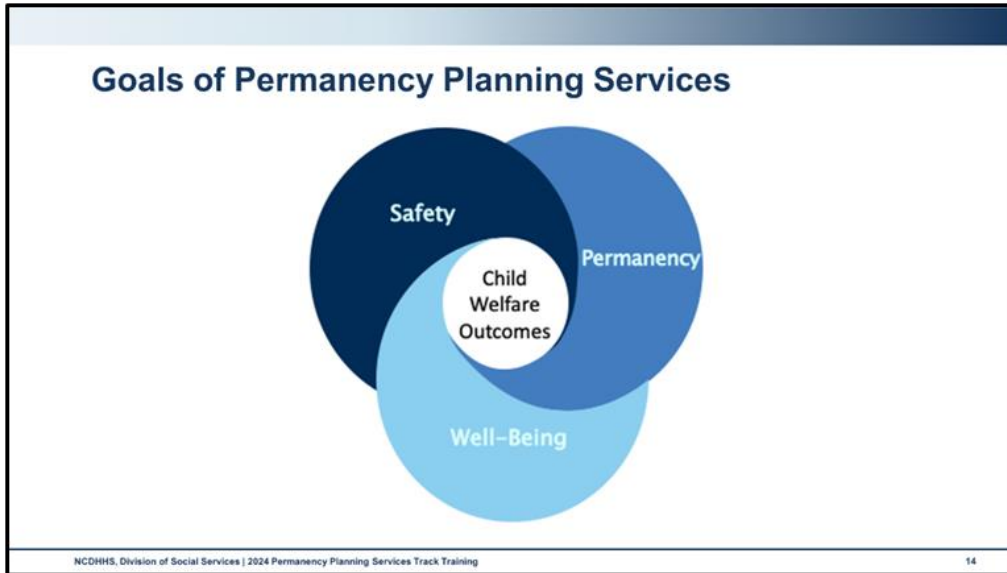
**Consider the goals, outcomes, and objectives of Permanency Planning Services.**

Family-Accessible Language

**When**

Consider the timeframes for which Permanency Planning Services are delivered.  
**HINT:** review the “required timeframes” section.

Family-Accessible Language

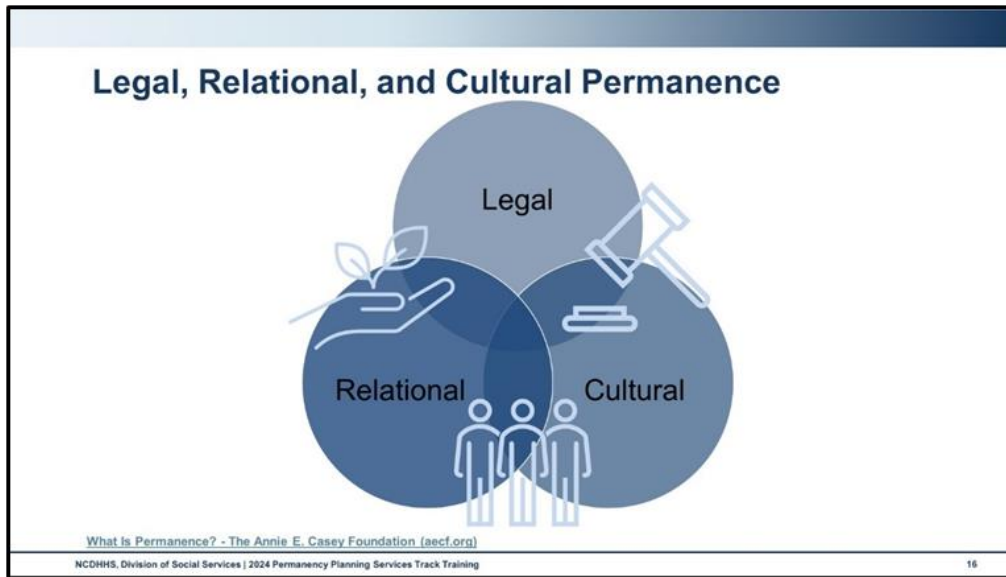


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Activity: What is Permanency?

Using the materials at your table, create a visual representation of permanency, as it relates to foster care. There is no “right” way to do this activity. It can be as simple or as creative as time and imagination allows. Feel free to use words, draw pictures, write a poem, or otherwise express your definition of “permanency.”

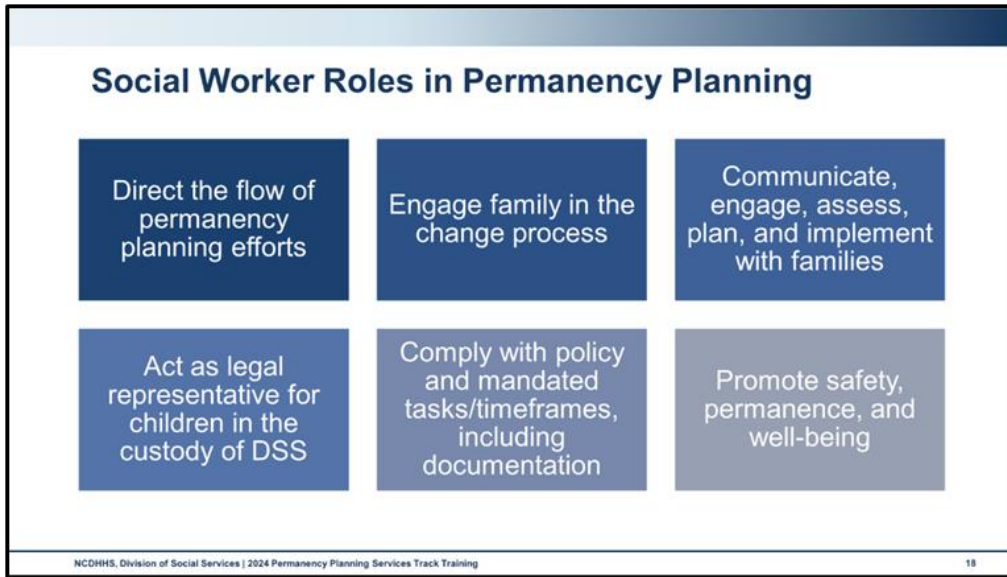


Legal permanence means that a child’s relationship with a parenting adult is recognized by law—that the adult is the child’s birth, kin, foster, guardianship, or adoptive parent. When we talk about the permanency goal, we are talking about the legal permanence of the child, whether that be reunification, adoption, or guardianship.

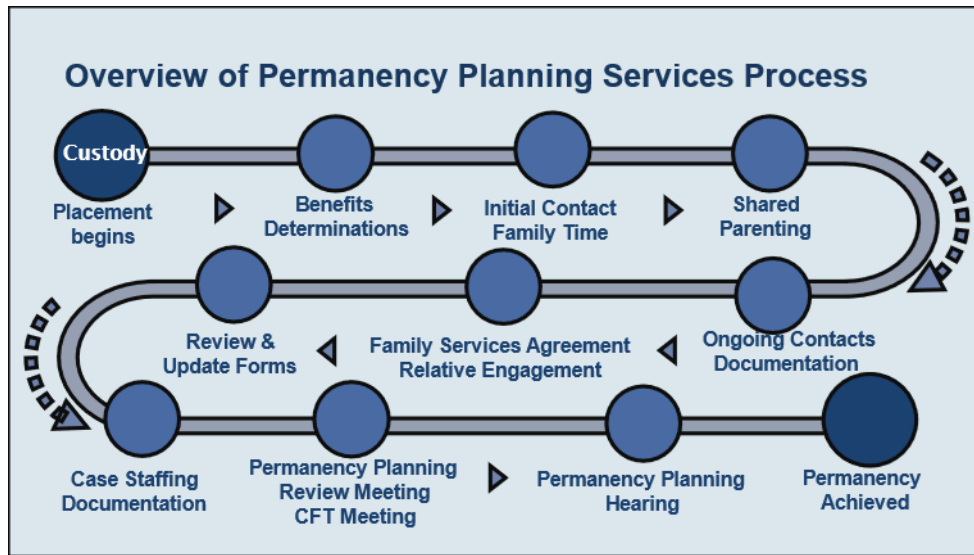
Relational permanence recognizes the many types of important long-term relationships that help a child or young person feel loved and connected - relationships with brothers and sisters, family friends and extended family, and former foster family members. Relational permanence is about connections, and the more connections that a child can cultivate, the more supported they will feel.

Cultural permanence is about being able to form organic relationships with people who belong to the communities with which they identify. Culture is a source of strength and resilience and should be supported and preserved at every step of a child’s journey in child welfare. Cultural permanence is especially important for children and youth of color or those who identify as LGBTQ+.

## Roles and Responsibilities of Permanency Planning Social Worker



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Compare your team’s work to the Permanency Planning Required Timeframes listed in the Appendix.

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## Case Transfer



### Case Transfer



Knowledge



Relationship

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### Handout: Case Transfer Best Practices Guide

Social Workers can use the following guide to structure case transfer meetings.

Suggested Participants:

1. Transferring Social Worker
2. Transferring Supervisor
3. Newly-Assigned Social Worker
4. Newly-Assigned Supervisor
5. Family Team Members (Parents, child, family support, etc.)
6. Placement Provider

Suggested Agenda:

1. Introductions
  - a. All attendees introduce themselves, their role, and their relationship with the family.
    - i. Newly-assigned social worker and supervisor should provide the family with their contact information.
  - b. Transferring Social Worker reviews the purpose of the meeting and facilitates the development of group agreements. To facilitate, the Transferring Social Worker might ask, "What do group members need in order to make this a safe and respectful place for our discussion?"
    - i. Group agreements might include:
      1. Make space for everyone on the team to contribute.
      2. One person talks at a time; everyone will have a chance to share their thoughts.
      3. Respect confidentiality.
      4. All ideas are valid.
      5. Respect the perspective of everyone in the room, even if your perspective does not align with theirs.
      6. Stay strengths-based and results-driven.
2. Child Welfare Involvement
  - a. Review why child welfare is involved with the family.
  - b. Review North Carolina Safety Assessment Tool and North Carolina Risk Assessment Tool.
  - c. Discuss interventions that have been used to prevent removal and the outcomes of those interventions.
3. Family Strengths
  - a. Review Family Assessment of Strengths and Needs Tool.
  - b. Discuss the parental protective factors identified during the assessment.
  - c. Ask family members and other supports present at the meeting to identify additional strengths the family possesses.
4. Family Supports
  - a. Identify existing supports, including family, informal, and formal supports.
  - b. Explore additional supports, including additional options for relative or fictive kin placements if the child is not already placed in a relative or fictive kin setting.

- c. Discuss options for how to include additional family and informal support in current or future planning.
- 5. Family Needs
  - a. Review Family Assessment of Strengths and Needs Tool.
  - b. Discuss steps to address needs with family, informal, or formal support options.
  - c. Ask family members and other supports present if other needs are present and/or if they have any questions or concerns regarding the needs identified in the Family Assessment of Strengths and Needs Tool.
- 6. Next Steps
  - a. Discuss Continuing Needs and Safety Requirements (DSS-5010a) to review ongoing family needs and activities to address identified safety concerns.
  - b. Review upcoming important dates (i.e. court hearings, other team meetings).
  - c. Newly-assigned social worker schedules the next home visit.

Other Helpful Tips:

1. When transferring from CPS Assessment or In-Home Services to Permanency Planning, contacts with the family must be made within seven days of the case decision (CPS Assessment) or out-of-home placement.
2. This initial contact with the CPS Assessment or In-Home Services social worker can be in addition to a formal case transfer meeting, giving the family another opportunity to meet and engage with the Permanency Planning social worker prior to terminating their professional relationship with the CPS Assessment/In-Home Services social worker.
3. Be sure to use clear, concise language that all team members can understand. Avoid jargon and acronyms and define the terms that you use that may not be commonly understood outside of a child welfare space.
4. It is important that both social workers, the parents, and children all participate in the case transfer meeting to ensure that the relationship established between the transferring social worker and the family is transitioned to the newly assigned social worker.

**Initial Contacts**



NC Child Welfare Policy, Permanency Planning Services

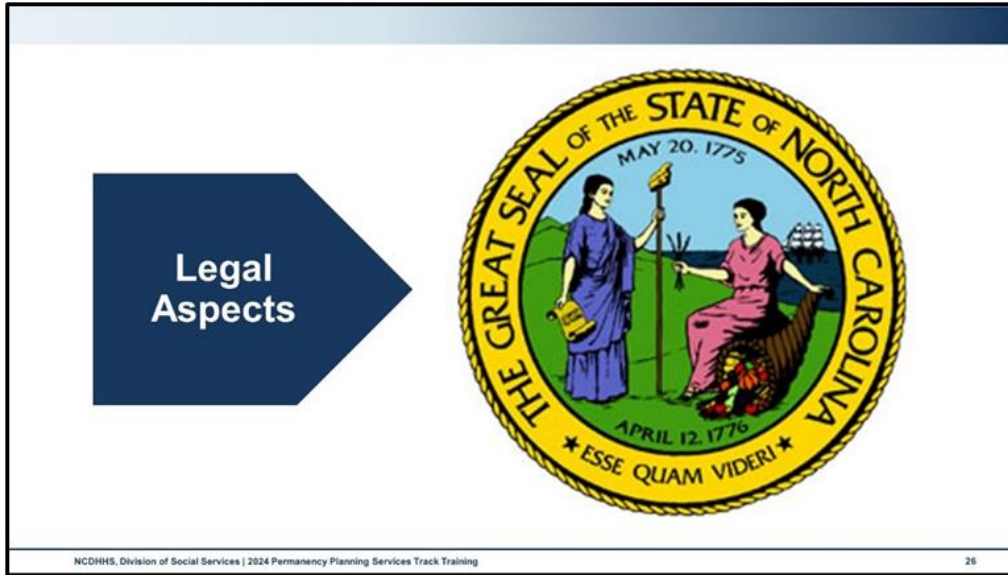
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## Legal Definitions and Legal Aspects



Refer to the Appendix for a Federal Laws Overview handout.

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### Legal Impact of Decisions and Liability

- Legal responsibility for one's acts or omission.
- By assuming custody of a child, child welfare workers accept a certain degree of legal responsibility for the child's health, safety, and well-being.
- Liability applies to all child welfare practices - not just when a child is agency custody.



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Handout: Liability

Liability means “legal responsibility for one’s acts or omissions.”

- By assuming custody of a child, child welfare workers accept a certain degree of legal responsibility for the child’s health, safety, and well-being.
- Liability applies to all child welfare practices - not just when a child is in agency custody.

The failure of a person or entity to meet responsibility leaves them open to a lawsuit for any resulting damages or a court order to perform. Additionally, professional consequences can occur when responsibilities are not met.

Awareness is important, but don’t let concerns about potential liability paralyze you. To win a lawsuit, the suing party (also known as the plaintiff) must prove the legal liability of the defendant, if the plaintiff’s allegations are shown to be true. This requires evidence of the duty to act, the failure to fulfill that duty, and the connection of that failure to some injury or harm to the plaintiff.

Anyone can file a lawsuit. It doesn’t mean there’s necessarily anything to it or that it has merit. Of course, the fact that a case is frivolous does not minimize inconvenience, frustration, and the possibility of expense, but the good news is most of the time you are not personally liable.

Possible actions that can be brought against social workers and DSS fall into several categories. The category is outlined and examples of violations within each category are given below:

<b>Civil</b>
<ul style="list-style-type: none"> <li>• Breach of confidentiality / improper release of information (most common)</li> <li>• Sexual misconduct (also common)</li> <li>• Lack of informed consent to treatment</li> <li>• Ineffective treatment/results</li> <li>• Negligence; malpractice (rare)</li> </ul>
<b>Civil Rights or Constitutional Rights</b>
<ul style="list-style-type: none"> <li>• Due process concerns (governmental procedures must be fair)                         <ul style="list-style-type: none"> <li>○ Ex: failure to follow proper procedure for removal of a child from home</li> </ul> </li> <li>• Privacy                         <ul style="list-style-type: none"> <li>○ Ex: unauthorized disclosure of information</li> </ul> </li> <li>• MEPA/IEP, ICWA, ADA violations</li> </ul>
<b>Criminal</b>
<ul style="list-style-type: none"> <li>• Intentional injuries, such as assault, battery</li> <li>• Other criminal acts, such as sexual exploitation</li> </ul>

In addition to lawsuits, there are potential professional consequences when there has been a failure to meet professional responsibility.

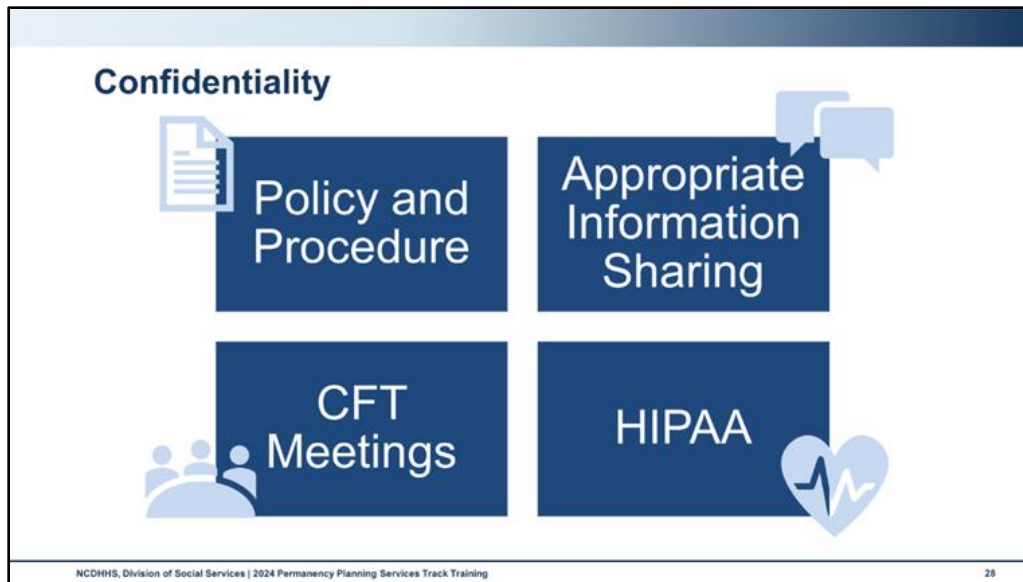
<b>Administrative disciplinary actions</b>
<ul style="list-style-type: none"> <li>• Reprimand</li> <li>• Transfer</li> <li>• Demotion</li> <li>• Dismissal</li> </ul>
<b>Professional Sanctions</b>
<ul style="list-style-type: none"> <li>• NASW censure for unethical conduct or unprofessional behavior</li> <li>• Adjudication through professional review</li> <li>• Suspension or revocation of membership</li> <li>• No recourse here for <i>incompetent</i> practice</li> </ul>

Your biggest liability is not following the law and policy.

Adherence to law and policy is what allows your agency to protect you from whatever personal liability you may face.

The best defense is best practice. This means:

- Knowledge of and compliance with laws, policies, & procedures that apply to social work practice.
- Careful, professional, legal practice.
- Adherence to the NASW Code of Ethics.
- Conscientious use of supervision and bi-level review.
- Preservation of confidences & protection of records within legal limits.
- Thorough, accurate, and timely recording of client information.
- Avoidance of illegal behavior and inappropriate behavior toward clients.



As child welfare social workers, you must balance a child and family's needs for confidentiality with the need for interagency collaboration to support family change and achieve safety goals. When giving or receiving assistance with a case, there are times that you may share oral or written information with community partners. Those community partners include:

1. Law enforcement officers when being asked to assist or when the county director informs them about reports of abuse.
2. The prosecutor when responding to reports of confirmed abuse, when providing a summary for a review requested because a petition was not filed, or when necessary to carry out mandated responsibilities.
3. The court when an evaluation report is required for a dispositional hearing or at the time of a scheduled review. N.C.G.S. § 7B-801 enables the court to be open for adjudicatory hearings regarding juveniles unless the judge determines that the court should be closed.
4. Public and private mental health providers when necessary.
5. Public and private healthcare providers when necessary.
6. Multidisciplinary teams, such as the Child and Family Teams, Child Fatality Review Team, and the Community Child Protection Team.
7. Institutional staff who may be assisting in Family Services Agreements.
8. School personnel when necessary to assist in service delivery.
9. DHHS personnel responsible for licensing or approving daycare, foster care, group care, or institutional child-caring facilities.
10. DSS representatives such as Work First and other child welfare programs assist with the development and provision of permanency planning.

Reasonable Efforts

**Reasonable Efforts in Child Welfare Services**

Diligent use of preventive and reunification services

Accessible, available, and culturally-appropriate services to improve capacity of families to provide safe and stable homes

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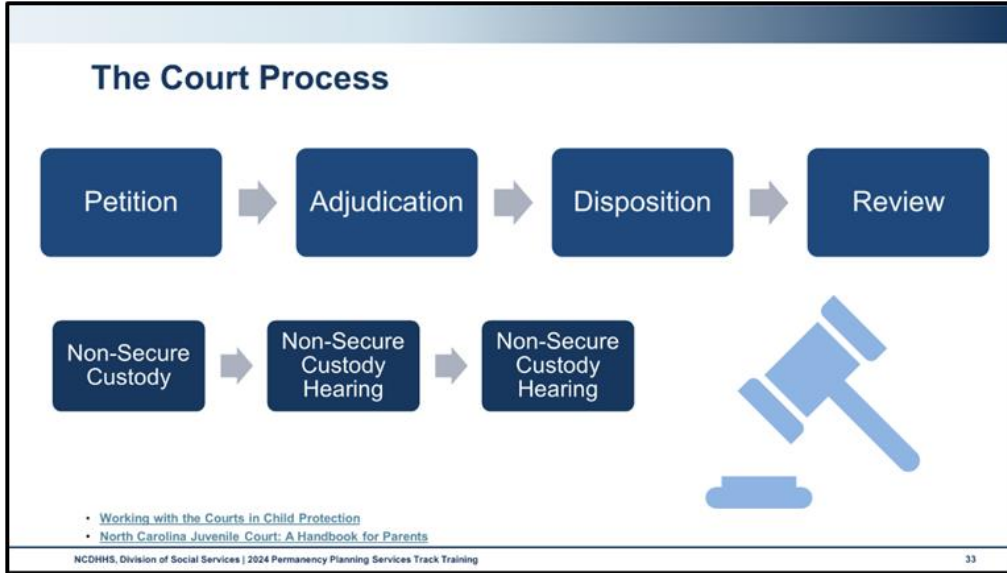
## The Court Process

**Powers of Juvenile Court**

- Power to subpoena witnesses
- Power to subpoena documents and records
- Power to assist CPS investigations
- Power to make negative “reasonable efforts” determinations
- Power to hold individuals in contempt
- Power to order treatment
- Inherent power of the position

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Handout: The Court Process

Proceeding	Timeframe	Overview
Petition	Initiates court process	<p>Your agency must file a petition requesting adjudication of abuse, neglect, and/or dependency:</p> <ul style="list-style-type: none"> <li>• When safety-related circumstances necessitate the need for immediate removal.</li> <li>• Due to the family’s unwillingness to accept critically needed services and those services are necessary to keep the family intact.</li> <li>• When despite agency efforts to provide services, the family has made no progress towards providing adequate care for the child and those services are necessary to keep the family intact.</li> </ul>
Adjudicatory hearing	No later than <b>60 days</b> from the filing of the petition unless continued for cause	<p>At the adjudication hearing, the court decides whether CPS can prove the allegations in its petition. The child welfare agency’s attorney will present evidence through the testimony of the social worker, law enforcement officers, or other witnesses, including any experts. Documents such as medical records or photographs also may be entered into evidence. The attorneys for the parents and the child will have the right to question or cross-examine the witnesses and to present evidence. The parents may testify, as may other family members or neighbors who have knowledge of the facts alleged in the petition or of the care the parents provided their children.</p>
Dispositional Hearing	<b>Immediately following adjudication.</b> If not, it shall be concluded within 30 days of the adjudication hearing	<p>At the dispositional hearing, the judge decides what the best plan is for the child and what services will be ordered. For example, the court may enter an order that mandates counseling and rehabilitative services. The judge will also decide where the child will live, whether there are any relatives that can help take care of the child, and what</p>

		<p>type of visits the parent will have with their child. The judge may also order each parent to receive certain services, such as substance abuse treatment, parenting classes, or domestic violence counseling. Essentially, the dispositional hearing determines what will be required to resolve the problems that led to CPS intervention.</p>
Initial Reviews	<p>Within <b>90 days</b> of the dispositional hearing</p>	<p>The review hearing is an opportunity to evaluate the progress that has been made toward completing the case plan and any court orders and to revise the plan as needed. At each review hearing, the judge is given information about what each parent has been doing, how the child is doing, and whether there are any needs that haven't been addressed. The court must decide if the plan that was made during disposition is working and if any changes are needed. Review hearings should guide the case to permanency for the child.</p> <p>Review Hearings occur for cases where children remain in their homes and are not in DSS custody.</p>
Ongoing reviews	<p>At least every <b>6 months</b> after the initial review</p>	<p>Same as the initial hearing outlined above.</p>
Permanency Planning Review Hearings	<p>Initial within 90 days of dispositional hearing and ongoing every 6 months thereafter</p>	<ul style="list-style-type: none"> <li>• Proceedings held for children in out-of-home placement.</li> <li>• Much like the Review Hearings outlined above. Additionally, permanent plans are set and reviewed through this process.</li> <li>• Permanency Planning Review Hearings cease after TPR if the court determines there is no longer a need for concurrent planning.</li> </ul>

While the court process follows a prescribed path, there is nuance as to the timeframes depending upon when a child enters custody.

It is possible that DSS initiates court proceedings during In-Home Services by filing a juvenile petition without filing for non-secure custody. When this occurs, the process is followed as outlined. It is possible that during the disposition or at a subsequent review hearing, the court may order that the child enter foster care. When this occurs, the case continues in the established court process and the review hearings become “Permanency Planning Review Hearings.”

If the child enters foster care by way of a non-secure custody order, a separate court process is enacted. This process can occur at either the CPS Assessment or In-Home Services stage of the child welfare process.

Proceeding	Timeframe	Overview
Non-Secure Custody Order	Initiates entry into foster care	Accompanies a petition alleging abuse/neglect/dependency and immediate safety needs of the children
Initial Hearing/Non-Secure Custody Hearing	Within <b>7 days</b> of non-secure.  May continue up to 10 business days with the consent of the parent and GAL, if appointed	The main purpose of the initial hearing is to determine whether the child should be placed in substitute care or remain with or be returned to the parents pending further proceedings. The critical issue is whether measures can be put in place to ensure the child’s safety.
Second Hearing on Continued Non-Secure Custody	Within 7 business days of the initial non-secure hearing	Determine the need for continued non-secure custody.  Inquiry as to location of parents, engagement of relatives to provide placement, the safety of children who remain in removal parents’ home, MEPA, and ICWA
Subsequent Non-Secure Custody Hearings	Occur at least every 30 calendar days after the second hearing until the dispositional hearing  Subsequent hearings can be waived only with the consent of the parents and GAL.	Same as the second hearing outlined above.

Termination of Parental Rights

The Involuntary Termination of Parental Rights process follows a similar court process outlined above.

Proceeding	Timeframe	Overview
TPR Petition	Initiates TPR proceedings <ul style="list-style-type: none"> <li>• Within 60 days of the hearing setting adoption as the permanent plan</li> <li>• If a child has been in out-of-home placement for 12 of the most recent 22 months if no exception exists</li> </ul>	Outlines reasonable efforts to reunify with parents, continuation of safety threats, and the ways in which TPR is in the best interest of the child.
TPR Hearing	No later than <b>90 days</b> from filing the petition or motion	A termination of parental rights (TPR) hearing is divided into two stages, adjudication and disposition. At adjudication, the party requesting TPR must prove to the judge by clear and convincing evidence that grounds exist for termination. If the judge decides that grounds do not exist, the judge will dismiss the case. If the judge decides that the grounds do exist, the judge moves to the disposition stage and must decide whether TPR is in the child’s best interest.
Post TPR Hearing	Within <b>6 months</b> after the TPR order has been entered and ongoing every 6 months thereafter	Ensure that every reasonable effort is being made to finalize the permanent plan for the child.

Foster Care 18-21 Program

When a young adult enters the Foster Care 18-21 program by signing a Voluntary Placement Agreement (DSS-597), court reviews continue. The initial court review hearing occurs within 90 days of signing the VPA and additional hearings occur at the discretion of the court although the young adult or DSS may request additional hearings at any time. No GAL is appointed for Foster Care 18-21 cases.

## Family-Centered Practice

**What is Family?**

Visualize families you have worked with as a child welfare social worker.

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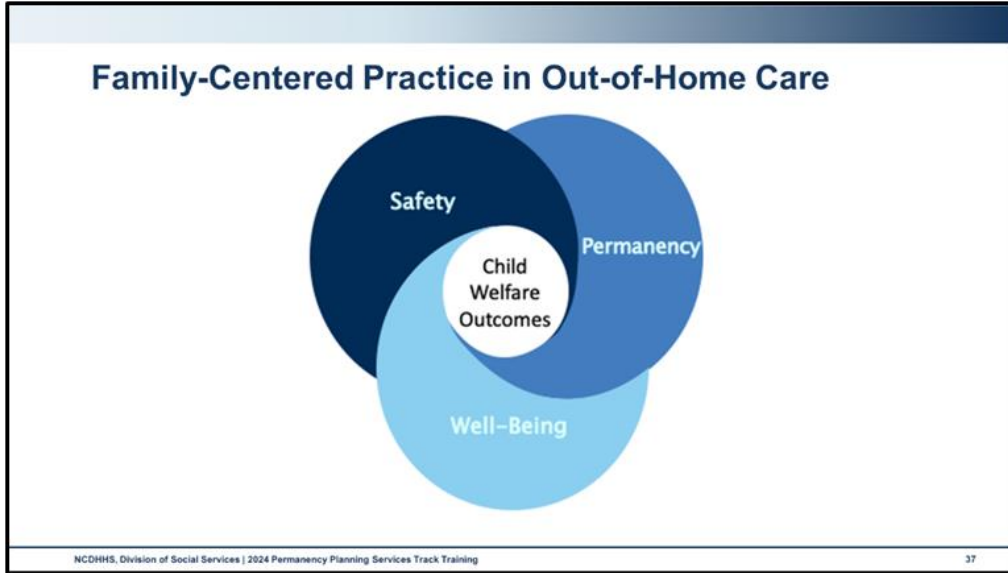
Worksheet: Underlying Beliefs of Family-Centered Practice

Underlying Beliefs of Family-Centered Practice
Safety of the children is the first concern.
Children have a right to their family.
The family is the fundamental resource for nurturing children.
Parents should be supported in their efforts to care for their children.
Families are diverse and have the right to be respected for their special culture, and racial, ethnic, and religious traditions; children can flourish in different types of families.
A crisis is an opportunity for change.
Inappropriate interventions can do harm.
Families who seem hopeless can grow and change.
Family members are our partners.
It is our job to instill hope.
Principles of Partnership
Everyone desires respect.
Everyone needs to be heard.
Everyone has strengths.
Judgments can wait.
Partners share power.
Partnership is a process.
Inappropriate interventions can do harm.
Families who seem hopeless can grow and change.
Family members are our partners.
It is our job to instill hope.

**Use the space on the next page as you consider the tasks and activities you do with families and on behalf of families that demonstrate each belief and principle.**

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Reflection and Check-In

**Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any “aha moments”.**

## Diversity, Equity, Inclusion, and Belonging

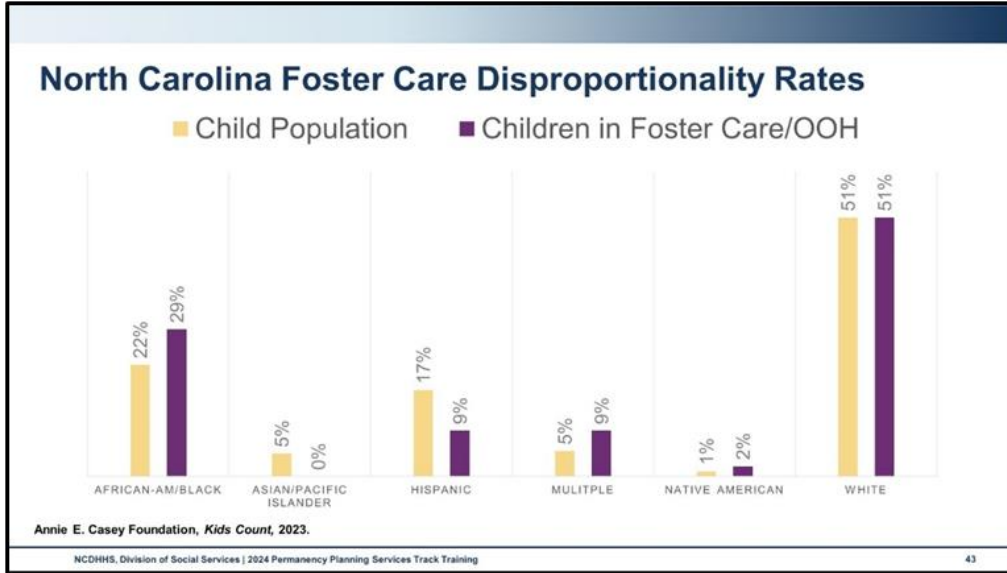
Institutional Racism in Child Welfare Systems in the United States

Video: The Racist Roots of the Child Welfare System

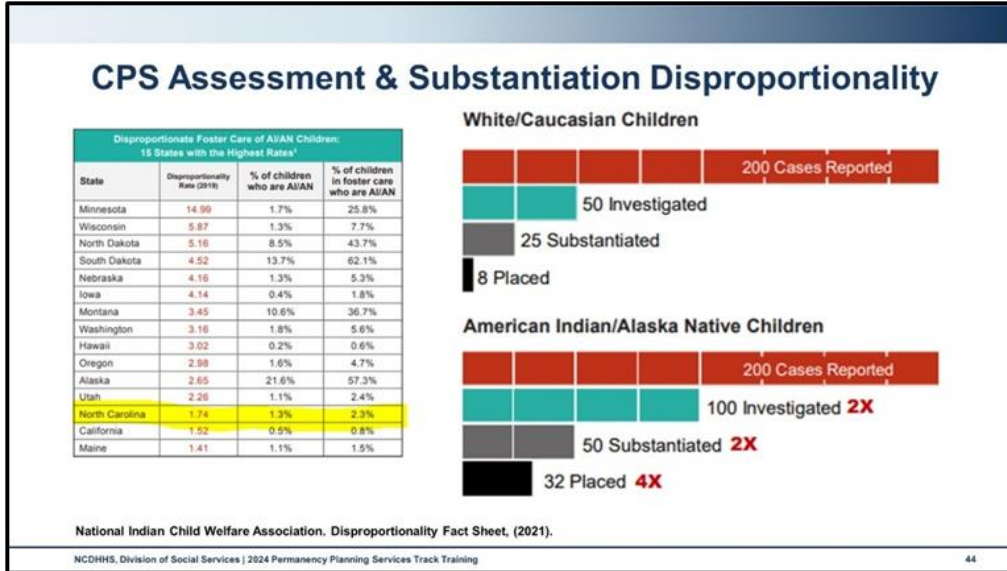
[https://www.youtube.com/watch?v=UsJCFWi\\_lbE](https://www.youtube.com/watch?v=UsJCFWi_lbE)

**How does this history impact the work you are doing today?**

**How does institutional racism show up in your cases or your regions today?**



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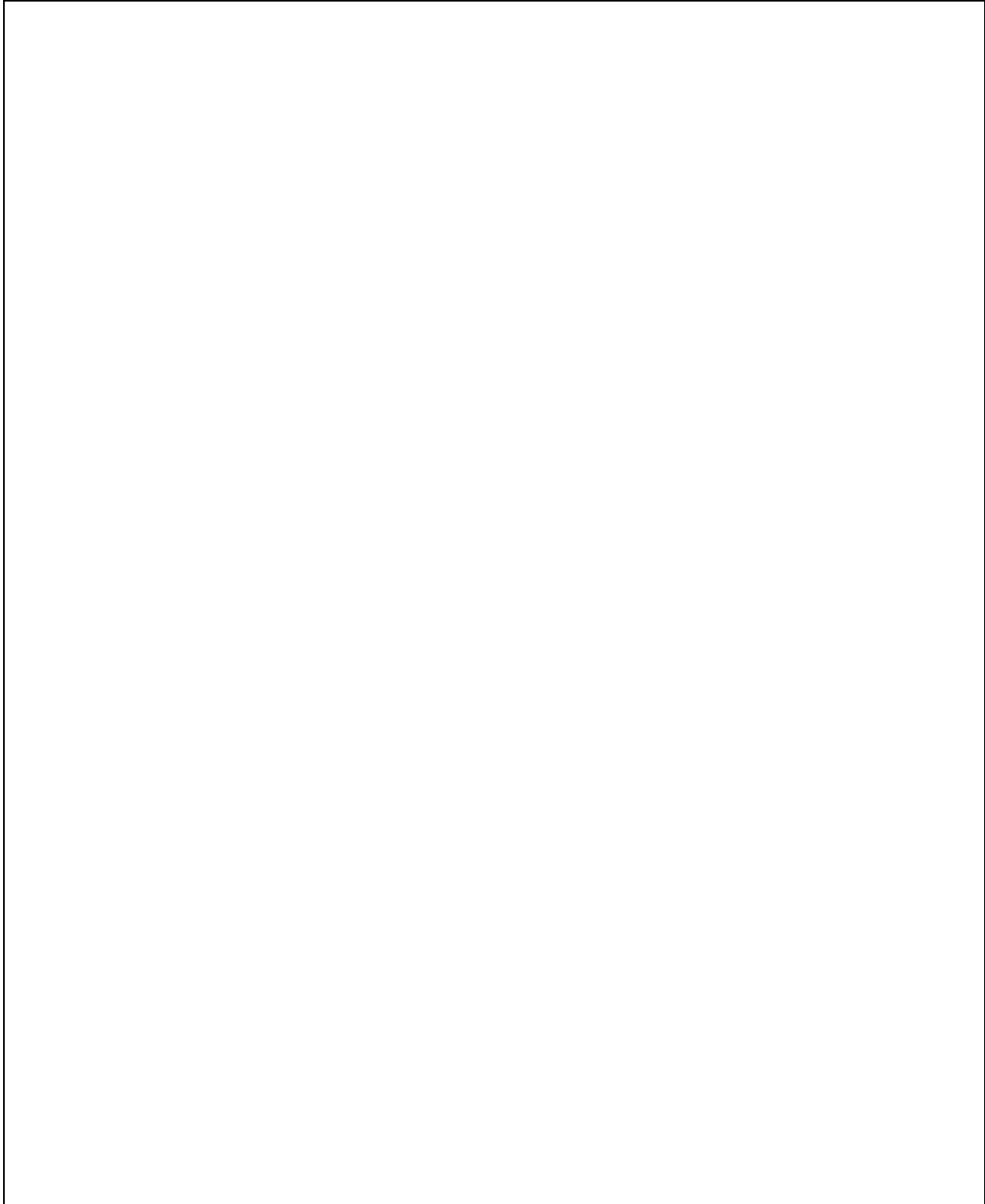


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Video: Implicit Bias in Child Protection

<https://www.youtube.com/watch?v=lkxXzzNKUMs>

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Debrief

**What are your reflections on this information?**

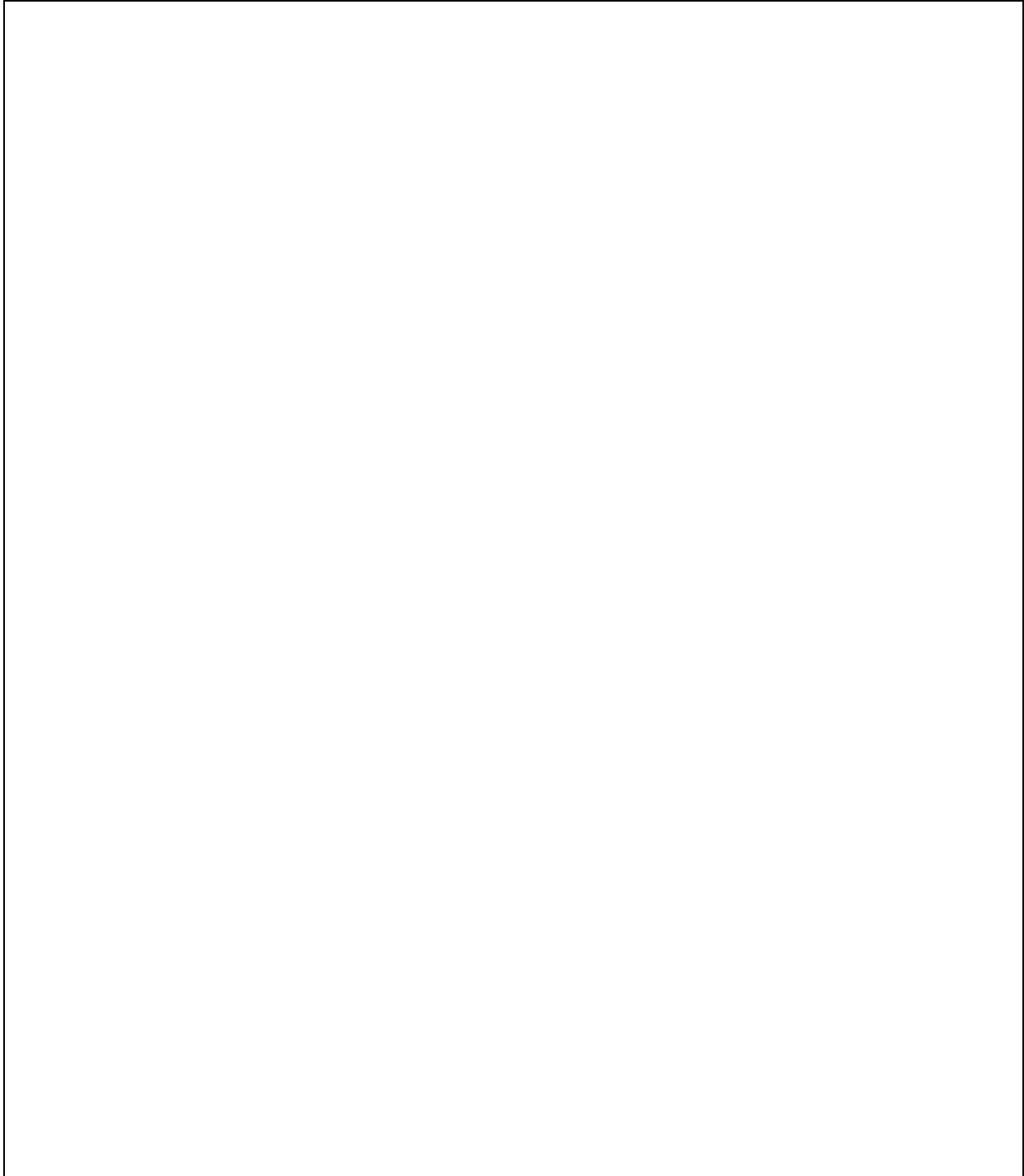
**How does this history impact your work with children and families today?**

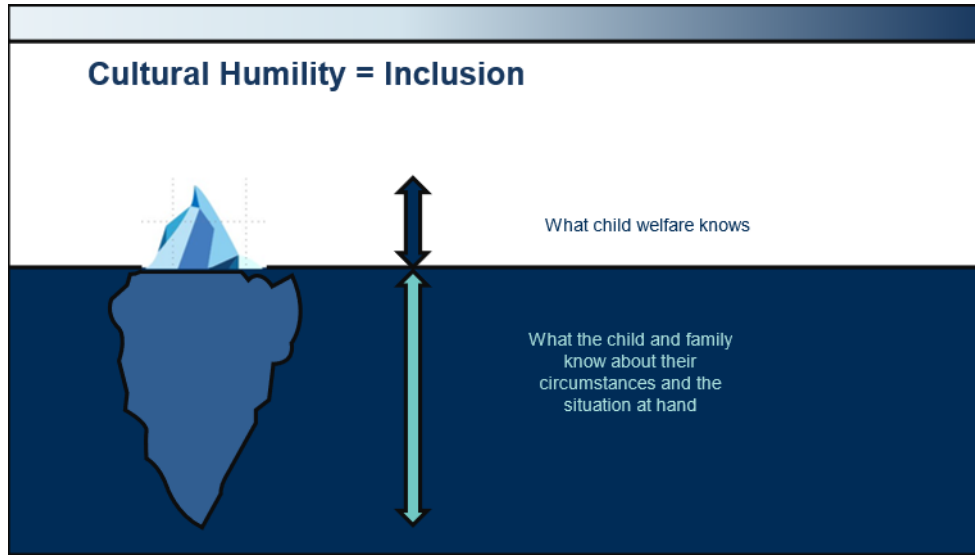
## Cultural Humility, Inclusion, and Considerations for Decision-Making

Video: What Exactly is Cultural Humility?

<https://www.youtube.com/watch?v=UR58nYjm5xo&t=1s>

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Activity: Child Welfare Practice Strategies to Center Families

**PART 1: Create a list of aspects of your culture that make your family unique and may not be visible or known to outsiders.**

**What about your family culture would CPS be challenged to understand without explanation or context?**

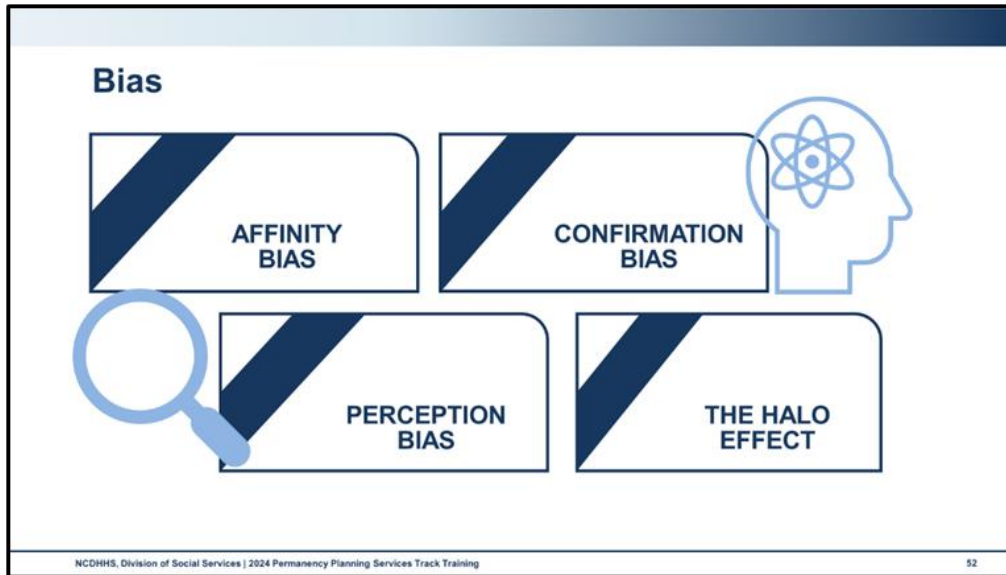
**What in your culture might be interpreted negatively without that family context and information?**

**PART 2: Discuss your answers to Part 1 with your group and answer the following questions:**

**How would CPS get your family to talk about those topics?**

**How do you practice inclusion with families in CPS?**

## Identifying and Addressing Bias



Affinity Bias: The tendency to warm up to people who are similar to ourselves; favoring those who have things in common with us.

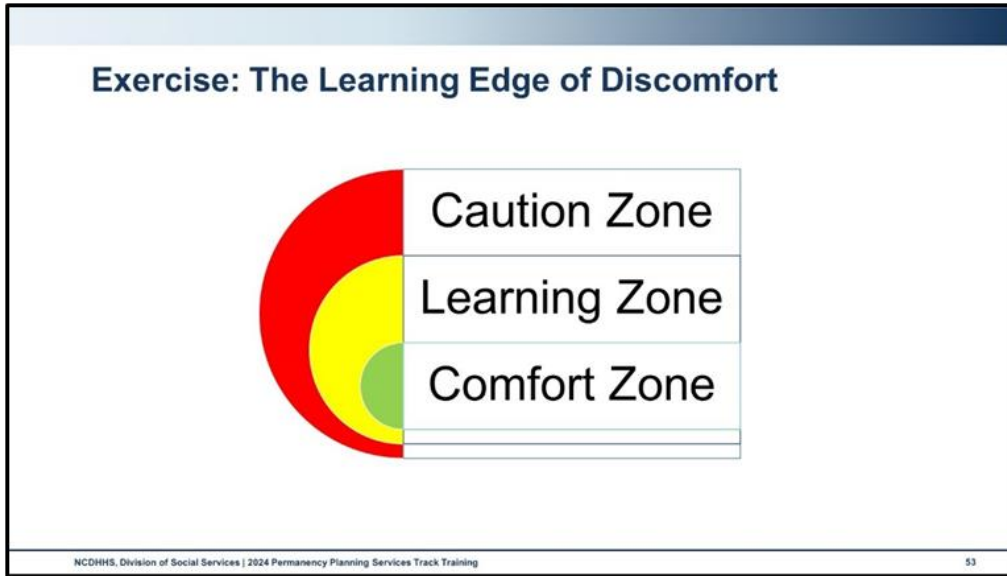
Confirmation Bias: Seeking out evidence that confirms our initial perceptions, ignoring contrary information.

Perception Bias: The tendency to form stereotypes and assumptions about certain groups that make it difficult to make an objective judgment about individual members of those groups.

The Halo Effect: The tendency to think everything about a person is good because our first impression of them was good.

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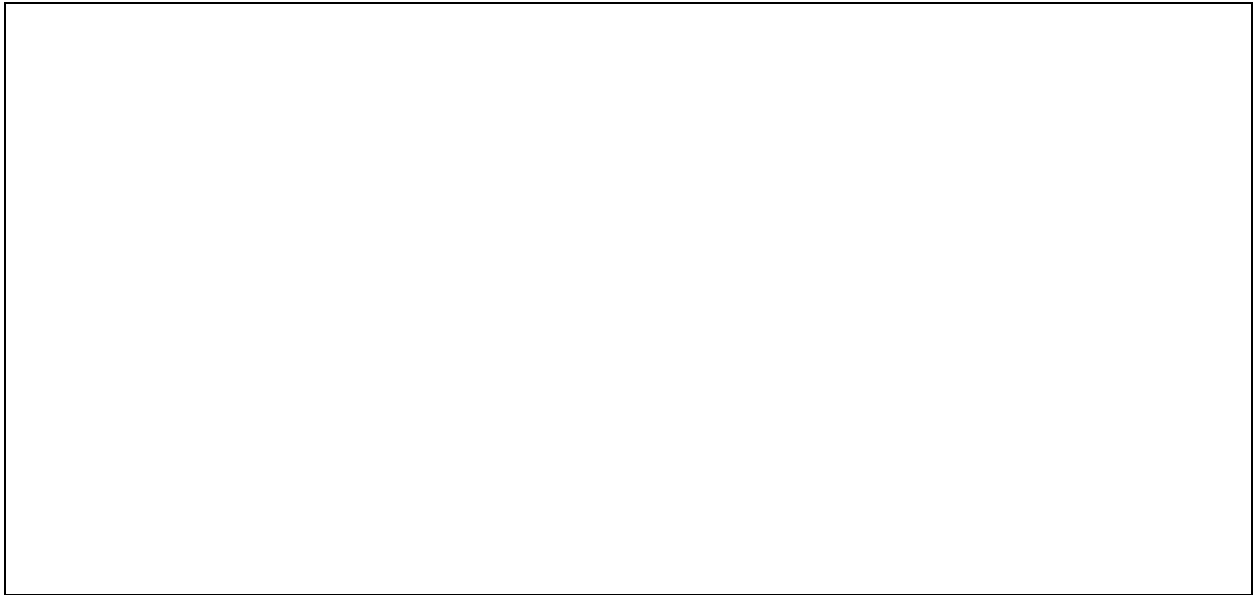
Activity: Learning Zones



**What about this work have I found challenging and what did I do about it?**

**How do I reflect on my own biases?**

**How do I mitigate or prevent negative impact from my biases?**



**How will you sit with the discomfort of the learning zone to learn about families?**



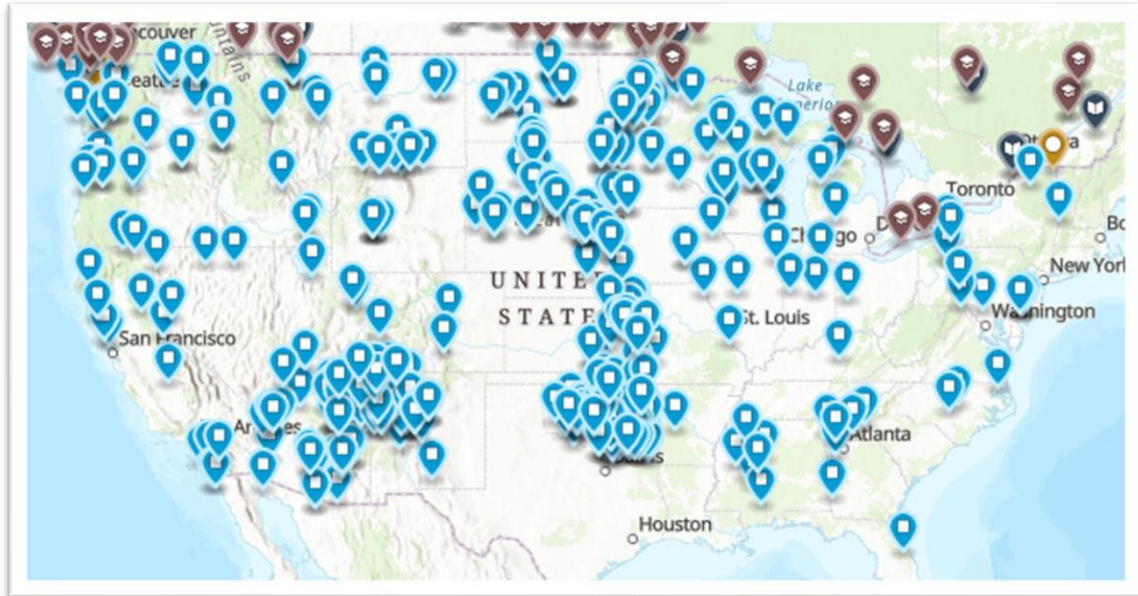
Reflection and Check-In

**Refer to the Record of Reflections and Values handout at the end of the Appendix and use the space to record values reflections from what you learned in this section of training. Your values reflections should include concepts learned that resonate with you and include any “aha moments”.**

## Indian Child Welfare Act of 1978 (ICWA)

Video: The Indian Child Welfare Act

[https://youtu.be/JRA\\_mCUvz-s?si=ff6BO83XzGyxflzy](https://youtu.be/JRA_mCUvz-s?si=ff6BO83XzGyxflzy)



**Additional Resources:** YouTube The Heart of ICWA series, National Indian Child Welfare Association <https://www.nicwa.org/>, Eastern Band of Cherokee Indians Family Support Services <https://phhs.ebci-nsn.gov/family-support-services/>

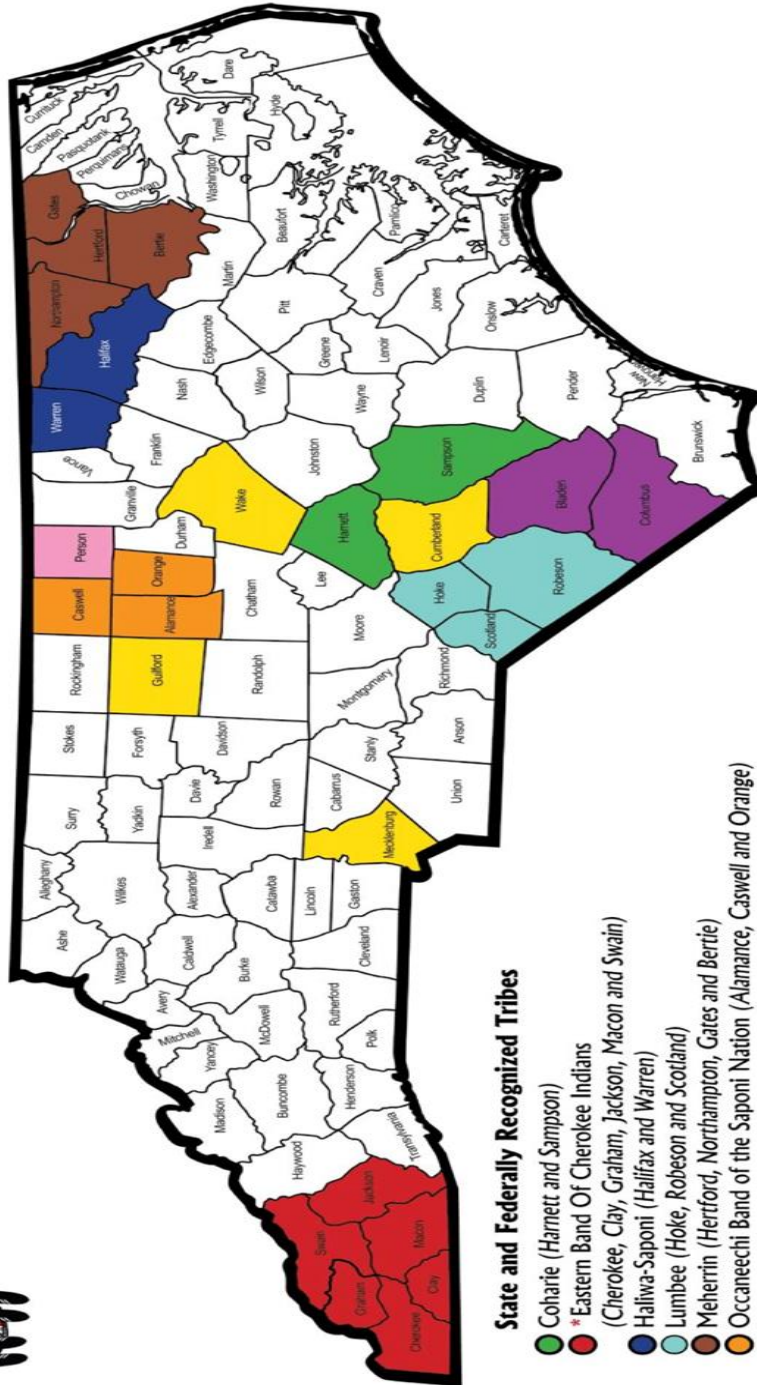
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Relationships with Tribes and Nations



N.C. TRIBAL AND URBAN COMMUNITIES

N.C. COMMISSION OF INDIAN AFFAIRS



State and Federally Recognized Tribes

- Coaharie (Harnett and Sampson)
- \* Eastern Band Of Cherokee Indians (Cherokee, Clay, Graham, Jackson, Macon and Swain)
- Haliwa-Saponi (Halifax and Warren)
- Lumbee (Hoke, Robeson and Scotland)
- Meherrin (Hertford, Northampton, Gates and Bertie)
- Occaneechi Band of the Saponi Nation (Alamance, Caswell and Orange)
- Sappony (Person)
- Waccamaw Stouan (Bladen and Columbus)
- \* Federally Recognized

Areas in Color indicate counties where the eight Recognized Tribes of North Carolina reside.

Counties in yellow (Mecklenburg, Guilford, Cumberland and Wake) Location of American Indian Associations

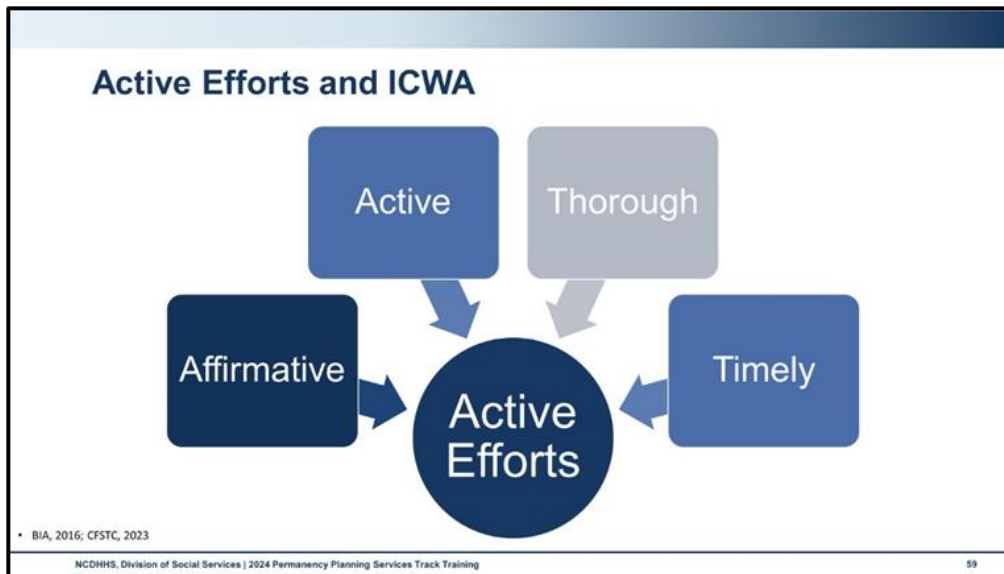
Map published by the North Carolina Commission of Indian Affairs.

2020



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Active efforts are to be tailored to the facts and circumstances of the case and may include, for example:

1. Conducting a comprehensive assessment of the circumstances of the Indian child's family, with a focus on safe reunification as the most desirable goal;
2. Identifying appropriate services and helping the parents to overcome barriers, including actively assisting the parents in obtaining such services;
3. Identifying, notifying, and inviting representatives of the Indian child's tribe to participate in providing support and services to the Indian child's family and in Family Team meetings, permanency planning, and resolution of placement issues;
4. Conducting or causing to be conducted a diligent search for the Indian child's extended family members, and contacting and consulting with extended family members to provide family structure and support for the Indian child and the Indian child's parents;
5. Offering and employing all available and culturally appropriate family preservation strategies and facilitating the use of remedial and rehabilitative services provided by the child's tribe;
6. Taking steps to keep siblings together whenever possible;
7. Supporting regular visits with parents or Indian custodians in the most natural setting possible as well as trial home visits of the Indian child during any period of removal, consistent with the need to ensure the health, safety, and welfare of the child;
8. Identifying community resources including housing, financial, transportation, mental health, substance abuse, and peer support services and actively assisting the Indian child's parents or, when appropriate, the child's family, in utilizing and accessing those resources;
9. Monitoring progress and participation in services;
10. Considering alternative ways to address the needs of the Indian child's parents and, where appropriate, the family, if the optimum services do not exist or are not available;

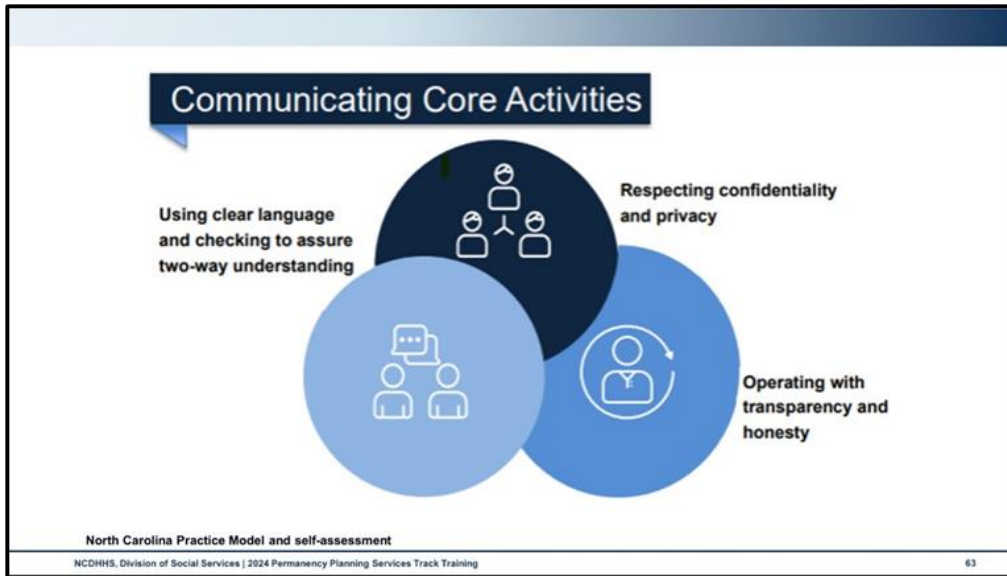
11. Providing post-reunification services and monitoring.

To explore this topic further on your own time, visit <https://turtletalk.files.wordpress.com/2016/12/december2016guidelines.pdf> for Guidelines for Implementing the Indian Child Welfare Act developed by the United States Department of the Interior, Bureau of Indian Affairs.

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# Communicating

## Communicating



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Worksheet: North Carolina Practice Standards – Communicating

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

## North Carolina Worker Assessment: Communicating

### Introduction

Communicating is defined as 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.

There are four Communicating core activities: (1) use clear language and checking to assure two-way understanding, (2) using respectful, non-judgmental, and empowering language, (3) operating with transparency, and (4) respecting confidentiality and privacy.

Table 1. Core Activity: Using clear language and checking to assure two-way understanding

Practice Standard 1: Ensure clarity when communicating				
	A	S	N	Notes
I use clear, specific, understandable oral and written communication	(1)	(2)	(3)	
I share important information with families verbally and in writing	(1)	(2)	(3)	
Practice Standard 2: Adapt communication to family needs and preferences, and provide consistent information to all family members who need it				
	A	S	N	Notes
I consider language barriers, preferences, literacy, and tailor communication	(1)	(2)	(3)	
I use preferred gender pronouns	(1)	(2)	(3)	
I attend to the child and family's language and use their words	(1)	(2)	(3)	
I ask families for their communication preferences	(1)	(2)	(3)	
I share appropriate information, provide consistent information	(1)	(2)	(3)	
Practice Standard 3: Allow time to enhance two-way communication with families through questions and checks for understanding				
	A	S	N	Notes

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I seek to allow enough time for two-way communication	(1)	(2)	(3)
I inform families of time limits, fully present, schedule follow-up meeting	(1)	(2)	(3)
I actively listen to families, reflect back	(1)	(2)	(3)
I ask questions for deeper understanding	(1)	(2)	(3)
I encourage and respond to questions from families, confirm understanding	(1)	(2)	(3)

**Table 2. Using respectful, non-judgmental, and empowering language**

Practice Standard 4: Speak with youth and families in a non-judgement, respectful manner				
	A	S	N	Notes
I convey interest and respect through body language	(1)	(2)	(3)	
I use consistently objective, strengths-based language	(1)	(2)	(3)	
I regularly seek out families' feelings, validate them	(1)	(2)	(3)	

**Table 3. Operating with transparency and honesty**

Practice Standard 5: Clearly and openly express to youth and families what is expected from them and what they can expect from child welfare				
	A	S	N	Notes
I explain the role of child welfare, what to expect, decision points, timeframes	(1)	(2)	(3)	
I fully inform families of options and opportunities, seek options from families	(1)	(2)	(3)	

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I follow through with commitments, explain changing circumstances	(1)	(2)	(3)	
I set timeframes for responses to questions, follow through	(1)	(2)	(3)	
I answer questions honestly	(1)	(2)	(3)	
<b>Practice Standard 6: Always tell the truth, including during difficult conversations, in a manner that promotes dialogue</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I acknowledge mistakes and misunderstandings	(1)	(2)	(3)	
I acknowledge when information is not known, cannot be shared	(1)	(2)	(3)	
I consistently model transparency and honesty	(1)	(2)	(3)	
I share important information without threatening or attacking, promotes dialogue	(1)	(2)	(3)	

Table 4. Core Activity: Respecting confidentiality and privacy

<b>Practice Standard 7: Diligently respect confidentiality while sharing information when necessary and appropriate</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I clarify and follow legal expectations for confidentiality, explain what can be shared	(1)	(2)	(3)	
I follow-up with my supervisor on what can be shared	(1)	(2)	(3)	
I take the release of information process seriously	(1)	(2)	(3)	
I ensure families know their right to revoke release of information	(1)	(2)	(3)	
I anticipate and minimize breaches of confidentiality	(1)	(2)	(3)	

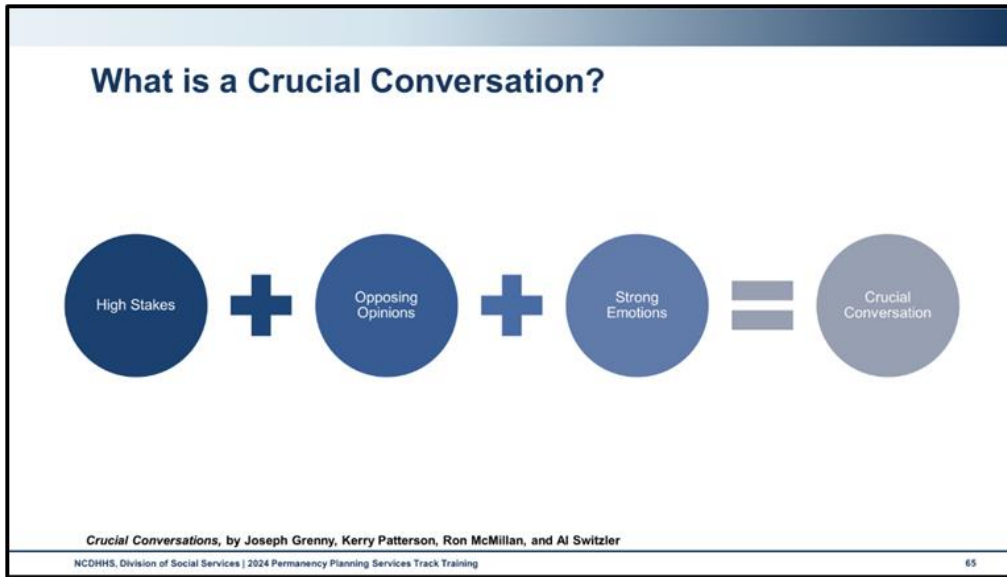
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

I understand that families perceive confidentiality as isolating, discuss confidentiality, obtain releases

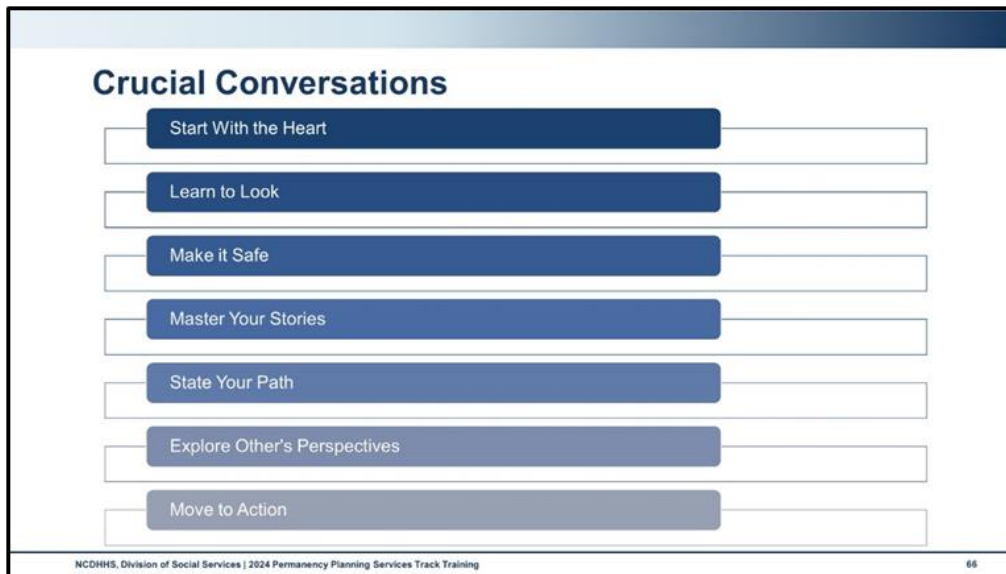
(1) (2) (3)



## Crucial Conversations



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Steps	How Do I Do This?
Start with the Heart.	Start from a genuine, well-intentioned place. Start a conversation gently.
Learn to Look.	Look for signs of stress, conflict, and emotional elevation. Notice when your safety is at risk. Manage your own response tendencies. Look for language and behavior that could escalate the conversation.
Make it Safe.	Notice when others don't feel safe to respond, check to make sure you are listening well and validating. Keep highlighting the common goal. When you notice a risk, "step out" of the conversation and work to restore safety.
Master Your Stories.	Manage intended and unintended bias and check how you see others. "Stories" are assumptions we make about why others are doing what they are doing. Assumptions can interfere with your conversation.
State Your Path.	Share very specific concerns and a clear explanation of the purpose of the conversation. Talk about your experience and inquire about the ways of others. Speak cautiously to be clear and not too soft or too firm.
Explore Others' Perspectives.	Active listening becomes key, and empathy is critical. Validate the person's feelings while maintaining the importance of what needs to be accomplished.
Move to Action.	Make decisions and commit to action together.

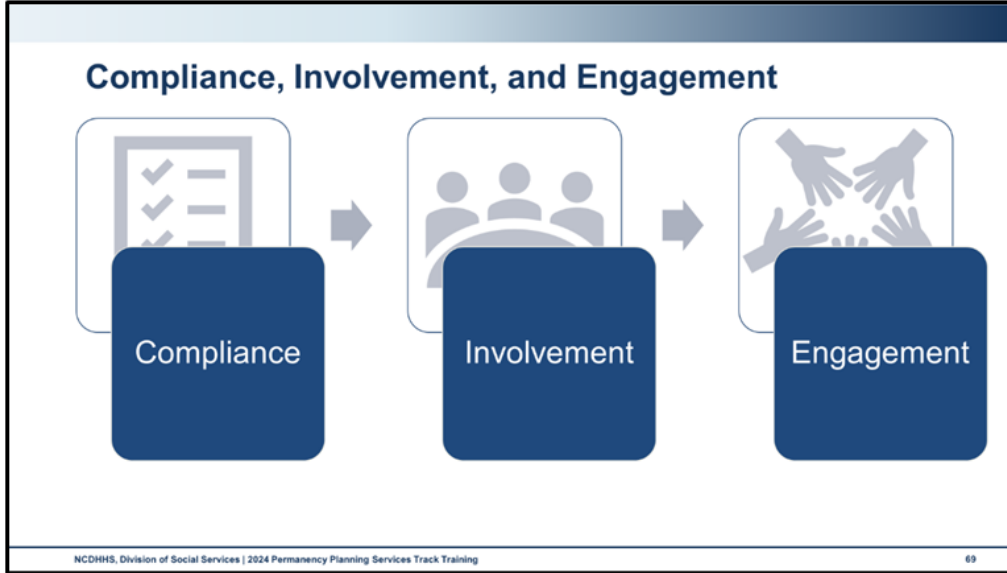
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Reflection and Check-In

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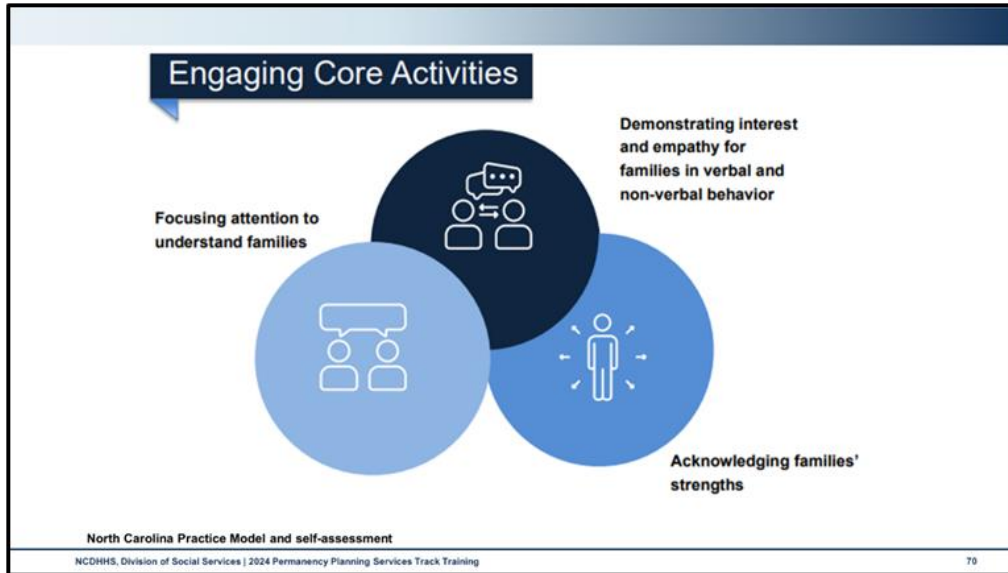
## Family Engagement



### Compliance – Collaborated Definition

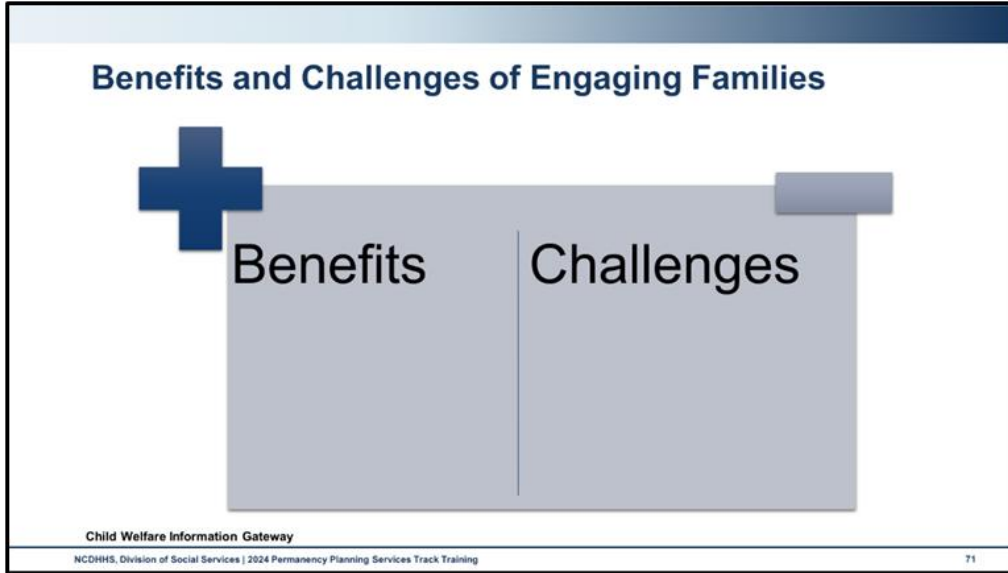
### Involvement – Collaborated Definition

### Engagement – Collaborated Definition



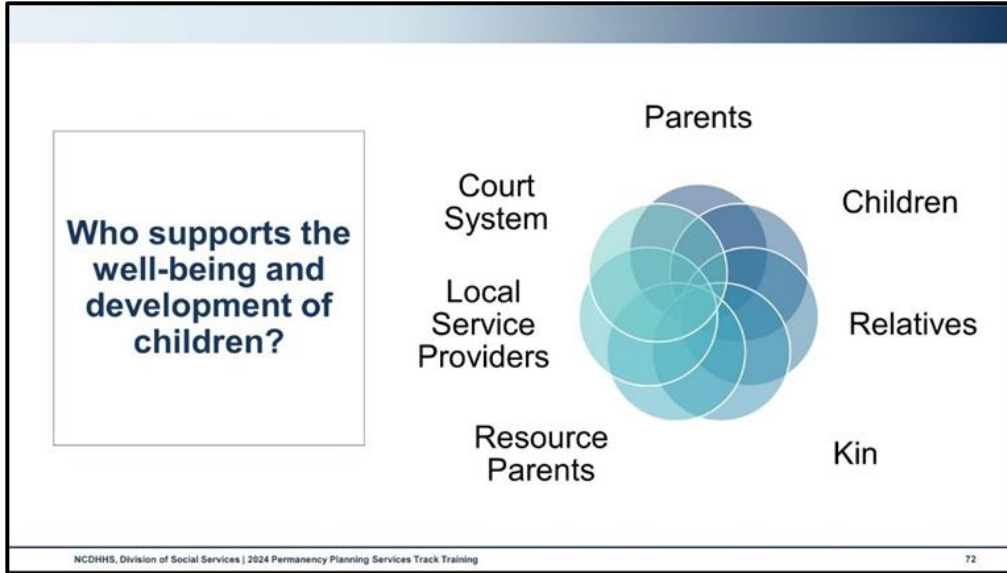
After completing the matching game with your team, refer to the engagement section of the North Carolina Practice Standards Worker Self-Assessment located in the Appendix to check your work.

**Use this space to record notes.**



**What are the benefits of family engagement?**

**What are the challenges of family engagement?**



Use this space to record notes.



Reflection and Check-In

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## End-of-Day-Values Reflection

Use this space to record questions and reflections about what you have learned.

**In small groups at your table, share at least one value from this training today that will shape how you support and advocate for families in Permanency Planning Services. Use this space to record notes from the group conversation.**

## Bibliography of References

### Day One

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North Carolina Worker Practice Standards Guide



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# Worker Practice Standards Desk Guide

**Practice Standards** are essential behaviors in working with agencies, staff, and families that apply to all members of the child welfare system, including leaders, supervisors, and workers. For workers, Practice Standards describe how they should interact with children, youth, and families from the beginning to the end of child welfare services. Each essential function has accompanying core activities, which embody that function, and practice standards, or desired behaviors that staff at all levels should be saying and doing to practice in accordance with the Practice Model and to help achieve positive outcomes for children, youth, and families.



## North Carolina's Practice Model Pyramid



### What is a Practice Model?

*Practice Models provide a framework or organizing principles to guide the agency to achieve their mission and values.* (Child Welfare Policy and Practice Group. Adopting a Child Welfare Practice Framework)

### What is a Practice Standard?

*Practice Standards provide guidance to workers on the concrete actions and behaviors they should be demonstrating to carry out the agency's Practice Model.* (Metz, A., Bartley, L., Blase, K. & Fixsen, D. (2011). A guide for creating practice profiles. Chapel Hill, NC: National Implementation Research Network, FPG, Child Development Institute, UNC.)



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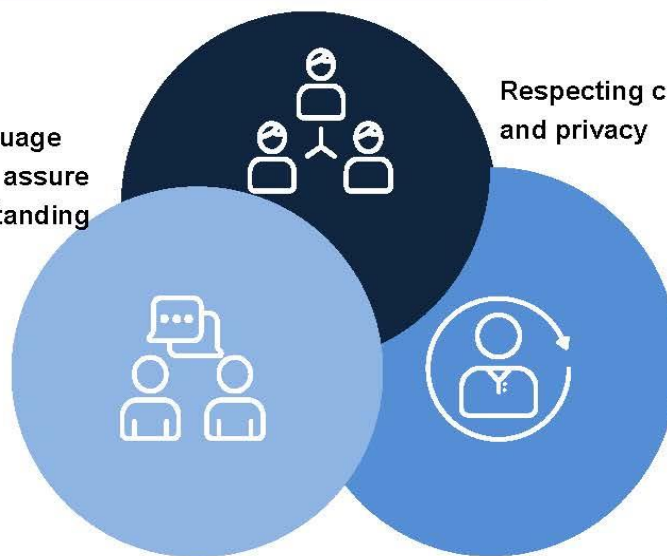
## Key Behaviors and Core Activities

**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.5j*

#1	Ensure clarity when communicating.
#2	Adapt communication to family needs and preferences and provide consistent information to all family members who need it.
#3	Allow time to enhance two-way communication with the family through questions and checks for understanding.
#4	Speak with the family and youth in a non-judgmental, respectful manner.
#5	Clearly and openly express to youth and the family what is expected from them and what they can expect from child welfare.
#6	Always tell the truth, including during difficult conversations, in a manner that promotes dialogue.
#7	Diligently respect confidentiality while sharing information when necessary and appropriate.

### Communicating Core Activities

Using clear language and checking to assure two-way understanding



Respecting confidentiality and privacy

Operating with transparency and honesty



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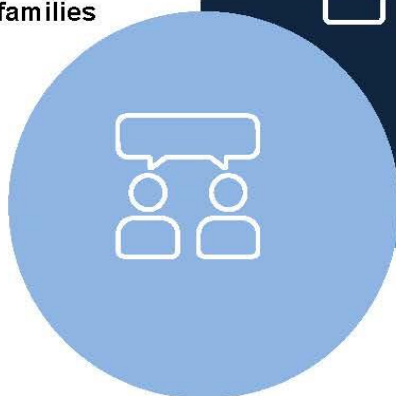
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**Engaging:** *Empowering and motivating families to actively participate with child welfare in the functions of assessing, planning, and implementing by communicating openly and honestly with the family, demonstrating respect, and valuing the family's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

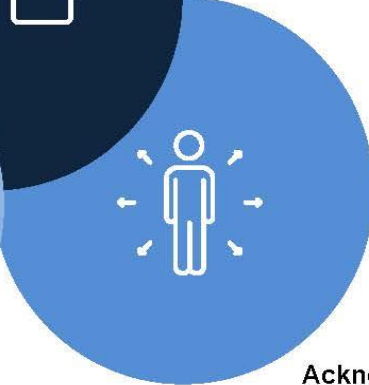
#1	Be fully present when meeting with the family.
#2	Prepare in advance to be able to connect with the family.
#3	Consider the family's perspective in all exchanges and actions.
#4	Recognize the family's perspectives and desires.
#5	Use body language to convey interest in the family.
#6	Acknowledge and celebrate strengths and successes.

## Engaging Core Activities

Focusing attention to understand families



Demonstrating interest and empathy for families in verbal and non-verbal behavior



Acknowledging families' strengths





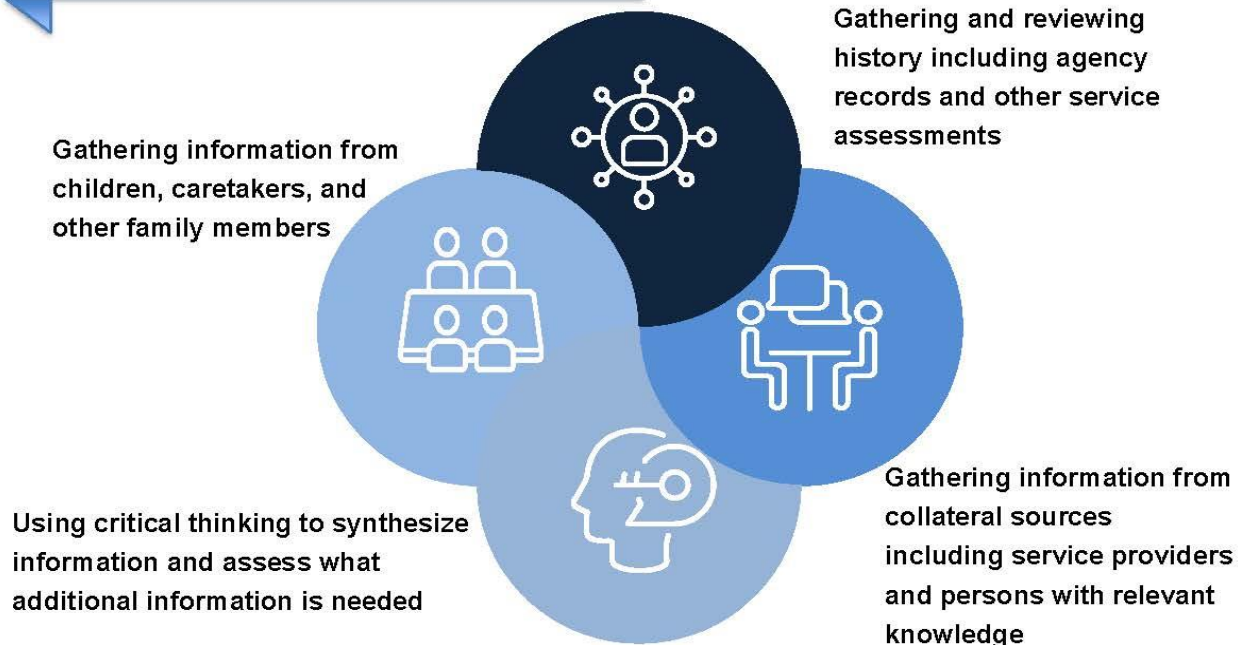
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**Assessing:** *Gathering and synthesizing information from children, families, support systems, agency records, and persons with knowledge to determine the need for child protective services and to inform planning for safety, permanency, and well-being.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

#1	Differentiate between information and positions.
#2	Take time to get to know the family and explain the assessment process.
#3	Ask questions based on information needed and at ease asking uncomfortable questions.
#4	Stay open to different explanations of events in the record, keeping biases in check.
#5	Balance what is read in the record and what the family shares.
#6	Obtain all sides if there are differing positions among collaterals, engaging the family in the process.
#7	Synthesize information and consider sources, relevance, and timelines.
#8	Remain non-judgmental when processing information.

## Assessing Core Activities





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**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 changes made when needed.*

#1	Engage the family in understanding assessment and history, focusing on strengths to customize the plan.
#2	Discover root causes and underlying reasons for the family's involvement.
#3	Believe and practice the importance of preparation both for self and for the family for teaming and planning.
#4	Actively engage the family in identifying their team.
#5	Promote the family's voice as the cornerstone of the meeting.
#6	Facilitate and engage participants throughout, acknowledging and managing conflict.
#7	Revisit case plan regularly, willing to modify or update as needed, but at a minimum per policy.

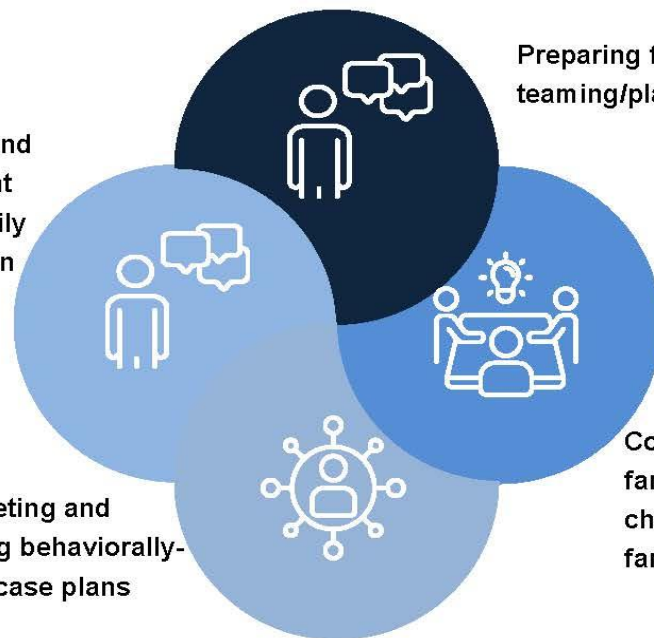
## Planning Core Activities

Synthesizing and integrating current and previous assessment information and family history to inform plan

Preparing families for the teaming/planning process

Completing and revising behaviorally-based case plans

Conducting child and family meetings with children, youth, and families





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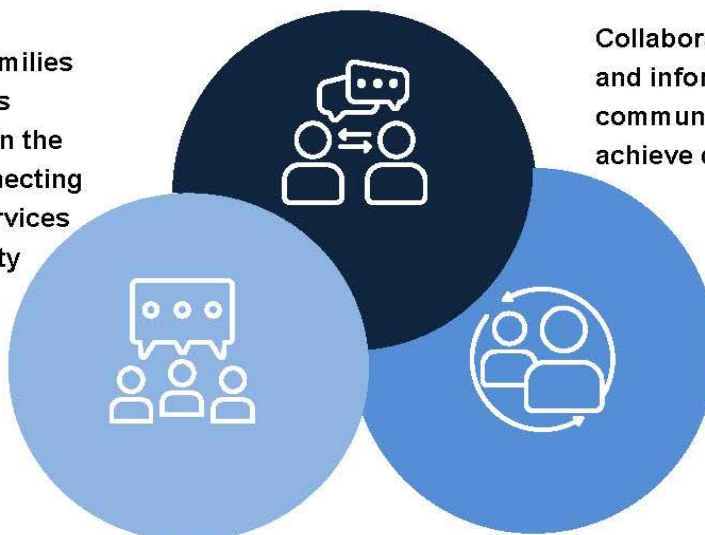
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**Implementing:** *Carrying out plans that have been developed. Implementing includes linking families to services and community supports, supporting families to take actions agreed upon in plans and monitoring to assure plans are being implemented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

#1	Support the family to take action.
#2	Work with the family to find solutions to problems.
#3	Explain to the family what services are and what they could do for the family to provide information and informed decisions.
#4	Offer an array of service providers to choose from if there are choices to be had.
#5	Advocate with and for the family with providers regarding what behavioral change is expected to ensure quality service delivery.
#6	Access natural supports in the community to assist the family to achieve their goals.
#7	Check in on an ongoing basis with the family on progress with the Family Services Agreement.
#8	Assess progress in implementing actions of the plan, making adjustments as needed.
#9	Track service delivery for the achievement of safety, permanency, and well-being outcomes for the family.

## Implementing Core Activities

Supporting families to take actions agreed upon in the plan and connecting families to services and community support



Collaborating with providers and informal supports in the community to help families achieve desired outcomes

Coaching with families and partnering with providers to assure plans are being implemented, progress is made, and outcomes achieved





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## Strategies for Applying Practice Standards in Your Everyday Work

### Communicating

- Use clear understandable language, both when speaking and writing, avoiding acronyms and jargon.
- Understand the unique communication needs of the family, including communication preferences or language barriers. If barriers exist, ensure that appropriate language services are provided.
- Continually practice active listening, which means asking questions to both understand and show you are listening.
- Through your words and actions, show the family interest, respect, and empathy. Examples include leaning in when they speak, head nodding to show understanding, and being transparent with note taking.
- Make sure you understand and can explain the “why” behind certain requirements and decisions with the family.
- Always respect the family’s right to privacy and be cognizant of who you are sharing information with, what you are sharing, where you are sharing, and why you are sharing.
- Have honest discussions with the family regarding expectations, both yours and theirs. Be sure to follow up and follow through on your conversations.
- Model transparency and honesty, including when information is not known, difficult, or incorrect.

### Engaging

- Be fully present by eliminating any potential distractions.
- Review previous notes from meetings with the family and prepare follow-up questions and items to discuss. Demonstrating your preparedness shows the family that you respect your time together.
- Treat the family as the “expert” of their own situation. They know their strengths and struggles best.
- Put the family first in conversations and consider the perspective of the child and family. For example, engaging relatives for placement is important from an agency perspective, but can be extremely meaningful from the family’s perspective.
- Show empathy and acknowledge any struggle experienced by the family when talking through courageous conversations.
- Empower the family to feel confident, encouraging their active involvement in problem solving and planning, and help the family identify their own strengths and successes.
- Engage the family through body language and demonstrate interest, empathy, and understanding when they speak.



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## Assessing

- Ask open-ended, strengths-based questions.
- Be transparent and share the purpose of gathering and assessing information, and who may be contacted as part of the process.
- Understand that assessing is an ongoing skill and never ends during the life of a case.
- Provide space for reflection on opinions and biases and how they could impact your work. Brainstorm strategies to mitigate bias with your supervisor.
- Prepare ahead and review what is in the record to understand what has worked for the family in the past, while also being cognizant of what the family is communicating with you in the present.
- Know what questions to ask that will elicit the most comprehensive answers and share along the way what is being learned by those questions.
- Gather information and observations from a wide variety of collateral sources, while understanding they may also contain opinions and biases as well.
- Be inquisitive, not judgmental through the assessing process.
- Before contacting collaterals, engage the family in what information is being obtained and when you intend to make contact, when it is possible to do so.

## Planning

- Create buy-in for the family by involving them from the beginning, ensuring that their voice is used throughout the plan.
- Fully process information gathered to best inform case planning.
- Dig deep to understand and address the root cause for child welfare involvement, using creative ideas and solutions that are congruent with the needs of the family.
- Check for plan alignment with the root cause of involvement. The family should not be asked to complete tasks that are not directly tied to concerns.
- Prepare yourself for Child and Family Team Meetings (CFTs) by thoroughly reviewing the case history, documenting questions, and consulting with your supervisor.
- Prepare the family for CFTs by explaining the purpose, letting them know what to expect, and engaging them in setting the agenda.
- Help the family identify relatives, friends, and others to be involved in the planning process as an advocate and source of support.
- Thoroughly review plans to ensure that the plan's goals and objectives continue to tie back to the family's assessment and reason for involvement.
- Update the plan accordingly when tasks are completed so the family can see and feel progress.





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## Implementing

- Partner with the family on determining services and service delivery and what will work best for their family.
- Offer to make initial phone calls to assist in navigating a complex service array system.
- Bust barriers to accessing services, such as lack of transportation, lack of a communication device, or lack of funds.
- Help the family fully understand the purpose of each service so that they understand what progress will look like.
- Use a three-step process of: "What is going well?"; "What needs to happen?"; and "What are our next steps?".
- Continuously assess services with the family and adjust as needed. Reassess barriers once services begin to ensure the family can continue to be successful or if changes are needed.
- Always remember the power differential that exists and that the family may be unsure of how to advocate for themselves with providers, therefore you must advocate both for and with them.
- Consider the family's interests, culture, and faith when exploring natural supports that may help them feel confident and supported during the process.
- Celebrate along with the family when progress is made, and goals are achieved.

## Resources

North Carolina Worker Practice Standards

Practice Standards Worker Self-Assessment

Transfer of Learning Tools: Self-Assessment, Peer Review, and 360-Degree Evaluation

## Permanency Planning Required Timeframes

PERMANENCY PLANNING SERVICES

### Required Timeframes

<ul style="list-style-type: none"> <li>• Date of Non-Secure Custody Order</li> </ul>	<ul style="list-style-type: none"> <li>• Permanency Planning Services case begins</li> </ul>
<ul style="list-style-type: none"> <li>• Within 24 hours of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Verification of Custody Letter given to placement provider and the juvenile’s school</li> </ul>
<ul style="list-style-type: none"> <li>• Within 3 days after the day of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Determination of Foster Care Assistance Benefits and/or Medical Benefits Only (DSS-5120) initiated</li> </ul>
<ul style="list-style-type: none"> <li>• Within 7 business days of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Determination of Foster Care Assistance Benefits and/or Medical Benefits Only (DSS-5120) completed</li> </ul>
<ul style="list-style-type: none"> <li>• Within 7 calendar days of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Face-to-face visit with child(ren); this contact is in addition to any contact or interaction with the child(ren) on the day of placement</li> <li>• Face-to-face contact with placement provider (at least one adult caretaker) in the provider’s home; this is in addition to any contact or interaction with the placement provider(s) on the day of placement</li> <li>• Family Time (visitation) for child(ren) with parent(s)/caretaker(s) and sibling(s)</li> <li>• Complete the following:                             <ul style="list-style-type: none"> <li>○ Face-to-face contact with parent(s)/caretaker(s)</li> <li>○ Initial Health Screening (Health Summary Form – Initial Visit) (DSS-5206)</li> <li>○ Educational Stability addressed (Child Education Status) (DSS-5245) or NC Best Interest Determination Form (DSS-5137) completed) including BID meeting (within 5 school days) prior to any school change</li> <li>○ SIS Client Entry Form (DSS-5027)</li> <li>○ Child Placement and Payment System Report (DSS-5094)</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• Within 14 calendar days of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Shared Parenting meeting</li> <li>• Family Time and Contact Plan (DSS-5242) developed jointly with parent(s)</li> <li>• Family Time and Contact Plan developed for siblings to visit each other (if in separate placements) (DSS-5242)</li> </ul>
<ul style="list-style-type: none"> <li>• Within 30 calendar days of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Develop the Permanency Planning Family Services Agreement (DSS-5240)</li> <li>• Develop the Transitional Living Plan (TLP) (DSS-5096a) for any child 14 years old or older</li> </ul>

PERMANENCY PLANNING SERVICES

**Required Timeframes**

	<ul style="list-style-type: none"> <li>• Make diligent efforts to identify and notify adult relatives and other persons with legal custody of a sibling of the juvenile. When it is safe and appropriate children must be placed with relatives.</li> <li>• All information about diligent efforts to locate must be documented and filed with the court.</li> <li>• Complete the following:             <ul style="list-style-type: none"> <li>○ Relative Notifications [e.g., via Relative Notification Letter (<a href="#">DSS-5317</a>)</li> <li>○ Health Summary Form - 30-day Comprehensive Visit (<a href="#">DSS-5208</a>)</li> <li>○ Health History Form (<a href="#">DSS-5207</a>), and provide copies to the placement provider</li> <li>○ Review and update (if needed) the Child Education Status (<a href="#">DSS-5245</a>)</li> <li>○ Review of the Family Assessment of Strengths and Needs (<a href="#">DSS-5229</a>)</li> <li>○ Review of the Risk Assessment (<a href="#">DSS-5230</a>)</li> </ul> </li> <li>• Begin the child(ren)'s life book</li> </ul>
<ul style="list-style-type: none"> <li>• Within 60 calendar days of placement</li> </ul>	<ul style="list-style-type: none"> <li>• Initial Permanency Planning Review and complete the following:             <ul style="list-style-type: none"> <li>○ Permanency Planning Review (<a href="#">DSS-5241</a>)</li> <li>○ Family Strengths and Needs Assessment (<a href="#">DSS-5229</a>)</li> <li>○ Family Reunification Assessment (<a href="#">DSS-5227</a>)</li> <li>○ Review and update (if needed) the Permanency Planning Family Services Agreement (<a href="#">DSS-5240</a>)</li> </ul> </li> <li>• Adjudicatory Hearing (within 60 days of the filing of the petition, unless the judge orders it be held later)</li> </ul>
<ul style="list-style-type: none"> <li>• Within 90 days of the 60-day CFT/PPR (150 calendar days of placement), and every 90 days thereafter throughout the life of the case</li> </ul>	<ul style="list-style-type: none"> <li>• Permanency Planning Review and complete the following:             <ul style="list-style-type: none"> <li>○ Permanency Planning Review (<a href="#">DSS-5241</a>)</li> <li>○ Review and update the Permanency Planning Family Services Agreement (<a href="#">DSS-5240</a>)</li> <li>○ Family Strengths and Needs Assessment (<a href="#">DSS-5229</a>)</li> <li>○ Family Reunification Assessment (<a href="#">DSS-5227</a>)</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• Every 12 months</li> </ul>	<ul style="list-style-type: none"> <li>• Update the Education Status (<a href="#">DSS-5245</a>)</li> <li>• Update the Health History Form (<a href="#">DSS-5207</a>)*</li> <li>• Complete Redetermination of Foster Care Assistance Benefits and/or Medical Assistance Only (<a href="#">DSS-5120A</a>)</li> </ul>

## Case Transfer Best Practices Guide

Social Workers can use the following guide to structure case transfer meetings.

### Suggested Participants:

1. Transferring Social Worker
2. Transferring Supervisor
3. Newly Assigned Social Worker
4. Newly Assigned Supervisor
5. Family Team Members (Parents, child, family supports, etc.)
6. Placement Provider

### Suggested Agenda:

1. Introductions
  - a. All attendees introduce themselves, their role, and their relationship with the family
    - i. Newly assigned social worker and supervisor should provide the family with their contact information
  - b. Transferring Social Worker reviews the purpose of the meeting and facilitates development of group agreements. To facilitate, Transferring Social Worker might ask "What do group members need in order to make this a safe and respectful place for our discussion?"
    - i. Group agreements might include
      1. Make space for everyone on the team to contribute.
      2. One person talks at a time; everyone will have a chance to share their thoughts
      3. Respect confidentiality.
      4. All ideas are valid.
      5. Respect the perspective of everyone in the room, even if your perspective does not align with theirs.
      6. Stay strengths-based and result-driven
2. Child Welfare Involvement
  - a. Review of why child welfare is involved with the family
  - b. Review North Carolina Safety Assessment Tool and North Carolina Risk Assessment Tool
  - c. Discuss interventions that have been used to prevent removal and outcomes of those interventions
3. Family Strengths
  - a. Review Family Assessment of Strengths and Needs Tool
  - b. Discuss the parental protective factors identified during assessment
  - c. Ask family members and other supports present at the meeting to identify additional strengths the family possesses
4. Family Supports
  - a. Identify existing supports, including family, informal, and formal supports
  - b. Explore additional supports, including additional options for relative or fictive kin placements if the child is not already placed in a relative or fictive kin setting
  - c. Discuss options for how to include additional family and informal supports in current or future planning
5. Family Needs
  - a. Review Family Assessment of Strengths and Needs Tool
  - b. Discuss steps to address needs with family, informal, or formal support options
  - c. Ask family members and other supports present if other needs are present and/or if they have any questions or concerns regarding the needs identified in the Family Assessment of Strengths and Needs Tool

**6. Next Steps**

- a. Discuss Continuing Needs and Safety Requirements (DSS-5010a) to review ongoing family needs and activities to address identified safety concerns
- b. Review upcoming important dates (i.e. court hearings, other team meetings)
- c. Newly assigned social worker schedule next home visit

**Other Helpful Tips:**

1. When transferring from CPS Assessment or In-Home Services to Permanency Planning, contacts with the family must be made within seven days of the case decision (CPS Assessment) or out-of-home placement.
  - a. This initial contact with the CPS Assessment or In-Home Services social worker can be in addition to a formal case transfer meeting, giving the family another opportunity to meet and engage with the Permanency Planning social worker prior to terminating their professional relationship with the CPS Assessment/In-Home Services social worker.
2. Be sure to use clear, concise language that all team members can understand. Avoid jargon and acronyms and define the terms that you use that may not be commonly understood outside of a child welfare space.
3. It is important that both social workers, the parents, and children all participate in the case transfer meeting to ensure that the relationship established between the transferring social worker and family is transitioned to the newly assigned social worker.



Federal Laws Overview

Federal Law Overview

<b>Federal Child Welfare Legislation</b>
<p><b>CAPTA</b> (<i>Child Abuse Prevention and Treatment Act - 42 U.S.C.A. § 5106a(b)(2)(B)(viii)-(x)</i>)</p> <p>Enacted in 1974. CAPTA provides federal funding to states in support of prevention, assessment, investigation, prosecution, and treatment activities, as well as grants to public agencies and nonprofit organizations for demonstration programs and projects. CAPTA provided for mandatory reporting of child abuse. Additionally, CAPTA identifies the federal role in supporting research, evaluation, technical assistance, and data collection activities. CAPTA also sets forth a minimum definition of child abuse and neglect. CAPTA, as amended by the CAPTA Reauthorization Act of 2010, defines child abuse and neglect as, at minimum:</p> <ul style="list-style-type: none"> <li>• "Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation"; or</li> <li>• "An act or failure to act which presents an imminent risk of serious harm."</li> </ul> <p>While Federal legislation sets minimum standards for states that accept CAPTA funding, each state provides its own definitions of maltreatment within civil and criminal statutes.</p> <p>As it relates to GALs, CAPTA provides that if judicial proceedings are necessary to protect a child, then a GAL must be appointed to represent the child’s interest. CAPTA, however, does not currently require that the GAL be an attorney. A portion of CAPTA funds may also be used to train professionals, including attorneys, and to improve legal preparation and representation.</p>
<p><b>AACWA</b> (<i>Adoption Assistance and Child Welfare Act of 1980 - Public Law 96-272</i>)</p> <p>AACWA was a response to concerns over the number of children entering the foster care system and the length of time children remained in the system following removal. The goal of the Act was to reduce the number of children entering the system and decrease the amount of time spent in the system for those who did enter. In that regard, the Act mandates that state agencies must make “reasonable efforts” to prevent the removal of children and to facilitate permanency for children after removal. The underlying mandate of AACWA was to preserve families. To comply with that mandate, many state agencies increased their use of “family preservation” services.</p> <p>AACWA also created Titles IV-B and IV-E of the Social Security Act and established the first federal rules to govern child welfare case management, permanency planning, and foster care</p>

placement reviews. States were also required to develop reunification and preventative programs for foster care and ensure that children in non-permanent settings had either court or state agency reviews at least every six months.

#### Title IV-B of the Social Security Act

Established by ACCWA as a funding scheme to allow state agencies to prevent and respond to cases of child maltreatment. The purpose was to promote a state agency's ability to develop and expand child and family services programs that utilized community-based services and to ensure that children are raised in safe and permanent families.

**NOTE:** How a state intends to use their IV-B funds should be detailed in their "state plan" which is accessible to the public. As an attorney for the Children's Department you may want to become familiar with Missouri's state plan so that, among other reasons, you can effectively communicate with the agency about available services and you can be prepared to defend the Department if opposing counsel raises an issue re: the state plan.

#### TITLE IV-E of the Social Security Act

Established by AACWA as a funding scheme to help states offset the costs of placing abused and neglected children into the foster care system when they cannot be safely maintained at home. It requires that the first court order authorizing removal contain a finding that it is "contrary to the child's welfare" to remain in the home (or in the child's best interests to be removed) and a statement of the reasons for that finding. This is especially important for attorneys who represent the Department to be cognizant of so that they can ensure the Department does not lose funding based on the failure to include that language in the court's order.

Additionally, it requires that every child who enters foster care have a plan that articulates the permanency goal and a schedule of services that the parents and children must receive to facilitate reunification (or if reunification is not the goal, the alternative permanency plan).

#### ASFA (*Adoption and Safe Families Act of 1997*, Pub. L. No. 105-89)

Enacted in 1997, ASFA was one of the most sweeping child welfare laws passed in over two decades. It was, in part, a response to concerns about the safety and timely permanence of children. ASFA adds to the reasonable efforts requirement, providing that "in determining reasonable efforts, the child's health and safety shall be the paramount concern." In addition, ASFA does the following:

- Requires states to file for TPR if a child has been in the state's custody for **15 of the most recent 22 months**, with 3 exceptions. The exceptions are established if (1) the

child is **placed with a relative**, (2) the state agency documents a **compelling reason** why termination is NOT in the child's best interest, OR (3) the state agency has **not provided adequate reunification services**, even though obligated to do so.

- Requires that permanency hearings be held every 12 months.
- Clarifies when a state agency can forego efforts to reunify families and proceed straight to termination/adoption or an alternative permanency goal. These are "aggravated circumstances" that each state can define.
- Requires states to document efforts to move children toward adoption.
- Extends adoption subsidies.
- Provides incentives to state agencies to finalize adoptions.
- Permits states to use **concurrent planning** in order to expedite permanency.
- Expanded permanency options available to include permanent guardianship and APPLA (Another Permanency Planned Living Arrangement).

**NOTE:** Before using an APPLA permanency plan, the state agency must document and present to the court **compelling reasons** why a more permanent placement option is not available to the child. Sometimes caseworkers would like to change the permanency plan to APPLA when a child has behavioral or mental health issues that make permanent placement challenging. Attorneys representing the Department should ensure that the reasons the Department asserts to the court are compelling (although this is not defined) and not simply because it's too hard.

**FOSTERING CONNECTIONS TO SUCCESS AND INCREASING ADOPTIONS ACT OF 2008** (Pub. L. No. 110-351)

The Fostering Connections Act aimed to maintain a child's ties with family, expedite permanency, and achieve better outcomes for youth once they leave the foster care system. States must "opt-in" to many of the provisions contained in this Act. Some specific provisions include:

- Allows states to establish a subsidized kinship guardianship program.
- Provides for matching grants to assist state agencies with "family finding" efforts.
- Requires state agencies to notify adult relatives within 30 days of a child's removal.
- Allows states to waive non-safety licensing rules for relative placements.



- Allows states to extend foster care to youth up to age 21.
- Requires that state agencies develop a transition plan for youth within 90 days of their exit from the foster care system.
- Promotes educational stability by requiring state agencies to take the child's education into account when making placement changes and work with the school system to ensure that a child can remain in their home school.
- Requires state agencies to make reasonable efforts to place siblings together, or if not placed together, to facilitate frequent visitation or other on-going interaction.
- Allows tribes to develop their own plans in order to be eligible for federal funds.
- Increases adoption incentive payments to states.

**THE FOSTER CARE INDEPENDENCE ACT of 1999** (*Chafee Act*) Pub. L. No. 106-169

Increased funding to enable states to design, conduct, and evaluate independent living programs with the purpose of assisting youth as they transition out of foster care. Encouraged states to create programs that support youth by addressing finances, housing, health, education, and employment. The act also increases support to youth aging out of foster care in other ways, such as allowing states to provide Medicaid coverage for foster care youth until age 21 (\*\* Now extended up to age 26 via the Affordable Care Act).

**ICWA** (*Indian Child Welfare Act*) 25 U.S.C. §§ 1901-63

Enacted in 1978 to address the disproportionate removal of American Indian children from their homes for purposes of placement into white foster homes or institutions for adoption. ICWA's purpose is to "protect the best interests of Indian children and to promote the stability and security of Indian tribes and families." As such, it imposes substantive mandates on the states.

Major provisions of ICWA include:

- **Application:** ICWA applies to cases in state courts only in specific situations:
  - (1) Child custody proceedings - foster care placement, termination of parental rights, pre-adoptive and adoptive placements
  - (2) Involving an "Indian child" - any person under the age of 18 who (a) is a member of an Indian tribe, or (b) is the biological child of a member of an Indian tribe and is eligible for membership in an Indian tribe.

- **Jurisdiction:** Where a Native child resides or is domiciled on a reservation or is the ward of the tribal court, only the tribal court may properly exercise jurisdiction. For all other children, however, state courts have concurrent jurisdiction. The state court is required to transfer the case to tribal court, however, if the tribe or parents request transfer except when: (1) either parent objects to transfer, (2) the tribal court declines transfer, or (3) there is good cause to the contrary.
- **Placement:** No placement (away from the biological parents, adoptive parents, or Indian custodian) can be made without (1) **active efforts** to preserve the family through remedial and rehabilitative services designed to prevent the breakup of the Indian family; and (2) **clear and convincing evidence** that continued custody by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child. A qualified expert witness is required to establish the clear and convincing standard.
- **Placement Preferences:**
  - **Foster Care Placement:**
    - With a member of the child's extended family;
    - In a foster home licensed, approved or specified by the child's Tribe;
    - In an Indian foster home licensed or approved by an authorized non-Indian licensing authority (such as the state or a private licensing agency);
    - In an institution for children approved by an Indian tribe or operated by an Indian organization that has a program suitable to meet the child's needs.
  - **Adoptive Placement:**
    - With a member of the child's extended family;
    - With other members of the child's Tribe; or
    - With another Indian family.
- **Termination of Parental Rights:** In proceedings to terminate parental rights to an Indian child, there must be: (1) evidence **beyond a reasonable doubt** that continued custody of the child by the parent or Indian custodian is likely to result in serious emotional or physical harm to the child and (2) testimony by a qualified expert witness.

**NOTE:** Failing to follow the requirement of ICWA may be grounds for a tribe, parent, Indian custodian or a child to ask the court to vacate court orders and require new proceedings.

- **NEW ICWA REGULATIONS:** The Bureau of Indian Affairs (BIA) released new ICWA regulations on June 8, 2016, which are now binding. The intent of these regulations is to clarify and strengthen ICWA’s requirement to “ensure that Indian families and tribal communities do not face the unwarranted removal of their youngest and most vulnerable members.” Some provisions that specifically relate to practice are as follows:
  - A party must certify on the record whether he or she knows or has reason to know that the child is an Indian child.
  - The “active efforts” requirement is defined, and specific examples are provided.
  - Requirements of a “qualified expert witness” are established.
  - Emergency removal is permitted only as necessary to prevent imminent physical damage or harm to the child. The court must immediately terminate the emergency removal as soon as it receives sufficient evidence that the removal is no longer necessary.

#### **ADA** (*Americans with Disabilities Act*)

Enacted to address discrimination against persons with physical and mental disabilities. Relates to child welfare law specifically by guaranteeing that all litigants have reasonable access to legal proceedings and that foster children are not denied services based on a disability.

Recently there has been some case law (Michigan) in which a TPR was reversed and remanded because the Department did not comply with the ADA in providing services to the mother. Attorneys who represent the Department should be aware of this and should insist that when a parent has a disability, the Department is complying with the ADA in its provision of services pursuant to the case plan.

#### **IDEA** (*Individuals with Disabilities Education Act*)

Enacted in 1975 to ensure that children with disabilities have access to a free appropriate public education that is tailored to their individual needs. Here are the main principles:

- Every child is entitled to a free and appropriate public education (FAPE).

- When a school professional believes that a student between the ages of 3 and 21 may have a disability that has a substantial impact on the student's learning or behavior, the student is entitled to an evaluation in all areas related to the suspected disability.
- Creation of an Individualized Education Plan (IEP). The purpose of the IEP is to lay out a series of specific actions and steps through which educational providers, parents, and the student may reach the stated goals.
- The education and services for children with disabilities must be provided in the least restrictive environment, and if possible, those children be placed in a "typical" education setting with non-disabled students.
- The input of the child and his or her parents must be considered in the education process.
- When a parent feels that an IEP is inappropriate for his or her child, or that the child is not receiving needed services, the parent has the right under IDEA to challenge the child's treatment (through due process).

Additionally, the IDEA requires schools to provide transition planning for children and actively engage them in the planning process.

#### **MEPA (Multi-Ethnic Placement Act) & Inter-Ethnic Adoption Provisions**

Enacted in 1994, MEPA establishes the following:

- Prohibits discrimination on the basis of race, color, or national origin in foster care licensing and foster/adoptive placements.
- Requires diligent recruitment of foster/adoptive parents that "reflect the ethnic and racial diversity of children in the state for whom homes are needed."
- Prohibits delay in placement on the basis of race, color, or national origin.
- Prohibits states from making placement decisions solely on the basis of race, color, or national origin.

The Inter-Ethnic Adoption Provisions amended MEPA by:

- Establishing that a MEPA violation may result in a loss of IV-E funding.
- Creating a private right of action for MEPA violations.
- Specifying that the provisions of MEPA do not apply to ICWA children.

#### **HIPAA (Health Insurance Portability and Accountability Act)**



This Act and the accompanying regulations provide national standards for protecting health information. It regulates how others may use and disclose health information, gives patients more protection and control over their records, and sets boundaries for the release and use of health records. Doctors, clinics, and psychologists are among the entities covered by the Act. Generally, under the Act, health information may be disclosed only with the consent of the patient.

The Child Abuse Exception:

- Although HIPAA generally overrides state laws, *HIPAA rules do not apply where “state law . . . provides for the reporting of disease or injury, child abuse, birth, or death . . .”* (Section 160.203[c]). Therefore, pursuant to state statute (C.R.S. § 19-1-307), HIPAA allows disclosure to child protection caseworkers where child abuse or neglect is suspected.
- Where disclosure is not otherwise required or permitted, a court may issue a subpoena or order release after the victim/child is given notice and an opportunity to object. Even in this situation, since the victim is a child and notice would otherwise be given to the parent responsible for the abuse or neglect, the notice generally need not be given in advance.
- Disclosure is permitted when consistent with legal and ethical practices, such as when disclosure is necessary “to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.”
- Medical records need not be released to a dangerous parent when there is a “reasonable belief” that the child “has been or may be subjected to . . . abuse or neglect . . . or when release would endanger the child.”

#### ICPC (*Interstate Compact on the Placement of Children*)

The ICPC is a uniform law enacted by all 50 states, the District of Columbia, and the U.S. Virgin Islands, to ensure that children placed *out of their home state* receive the same protections and services that would be provided if they remained in their home state. ICPC applies to the following types of placements:

- Placement preliminary to an adoption (independent, private or public adoptions);
- Placement in licensed or approved foster homes (with related or unrelated caregivers);
- Placements with parents and relatives when a parent or relative is not making the placement as defined in Article VIII(a); OR

- Group homes/residential placement of all children, including adjudicated delinquents in institutions in other states.

The ICPC requires:

- The sending state must notify the receiving state and receive back from that state notice that the proposed placement does not appear to be contrary to the interests of the child.
- Approval by BOTH states.
- The sending state retains jurisdiction over and financial responsibility for the child.

**NOTE:** The ICPC process is very bureaucratic and can take weeks or months depending on the particular states involved. An expedited ICPC evaluation, however, can and should be requested if the child meets any of the following requirements:

- The child is under two years of age;
- The child is in an emergency shelter; OR
- The child has spent a substantial amount of time in the home of the proposed placement recipient.

**USA (Uninterrupted Scholars Act of 2013 - Public Law No: 112-278)**

Amends the provisions of the Family Educational Rights and Privacy Act (FERPA) of 1974 that prohibit the Department of Education from funding educational agencies or institutions that release student educational records (or personally identifiable information other than certain directory information) to any individual, agency, or organization without written parental consent.

Expands the list of organizations exempt from such prohibitions (thereby permitting the educational agencies or institutions participating in a Department of Education program to release records or identifiable information to such organizations without parental consent) to include an agency caseworker or other representative of a state/local child welfare agency or tribal organization authorized to access a student's case plan when such agencies or organizations are legally responsible for the care and protection of the student.

\* Permits the release of such records and information without additional notice to parents and students when a parent is a party to a court proceeding involving child abuse and neglect or dependency matters, and a court order has already been issued in the context of that proceeding.

**PREVENTING SEX TRAFFICKING & STRENGTHENING FAMILIES ACT – Public Law No. 113-183**

Signed into law in September 2014, the Act seeks to protect foster children and improve the child welfare system as it specifically relates to establishing normalcy and permanency for children.

Specific provisions include:

**TITLE I:**

- Requires that child welfare agencies create policies and procedures by September 29, 2015, for **identifying, documenting** and **determining** appropriate services for children over whom they have legal responsibility to either provide care OR supervision and who the state has **reasonable cause** to believe are victims or are at risk of becoming victims of sex trafficking.
- Requires that child welfare agencies immediately (within 24 hours) report children identified as sex trafficking victims to law enforcement.
- Requires child welfare agencies to **develop** and **implement** plans to expeditiously locate children missing from foster care.
- Allows foster parents and other trained designated officials to make parental decisions, applying the **reasonable and prudent parent standard**, that maintain the health, safety, and best interest of the child, including decisions about participation in extracurricular, enrichment, cultural and social activities.
- In FY 2020, provides additional \$3 million under Title IV-E ILP to support participation in age-appropriate activities for youth likely to age out of foster care.
- Eliminates APPLA for children under 16 years of age (effective 9/29/15 for child welfare agencies and 9/29/17 for children under the responsibility of their tribe).
- Requires additional case plan and review requirements for youth with an APPLA goal.
- Requires that the child welfare agency engage children who are 14 years and older in their case plan development and modification and allows the child to self-select two individuals to be a part of their case planning team (\*Department retains veto power if it determines that the individual chosen by the youth would not act in the child's best interest).
- Requires the child welfare agency include in the child's case plan a "list of rights" that outlines their rights with respect to education, health, visitation, and court participation.



- Requires the child welfare agency to ensure that youth who are aging out and who have been in care for 6 months or longer receive a copy of their birth certificate, a social security card, health insurance information, medical records, and a driver's license or identification card.

**TITLE II:**

- Extends adoption incentive program through FY 2016.
- Creates four incentive categories.
- Clarifies that states must use adoption and guardianship incentive payments to supplement, as opposed to supplant, other funds already being used under either IV-E or IV-B.
- Allows a successor guardian to receive kinship guardianship assistance in the event of death or incapacity of the original relative guardian.
- Requires that all parents of siblings are identified and notified within 30 days after the removal of a child from the parents (\* This includes siblings whose parent's rights were previously terminated).

**ESSA** (*Every Student Succeeds Act* – Public Law No. 113-183)

Enacted in 2015, the Act reauthorizes the *Elementary and Secondary Education Act* and focuses its provisions on promoting school stability and success. It also requires collaboration between schools and child welfare agencies.

Specifically, as to foster care, the ESSA:

- Provides that state education agencies must ensure that students in foster care remain in their school of origin, unless it would not be in their best interests.
- Allows children in foster care to immediately enroll in a new school when a change is necessary, even without school records. The new school is required to immediately contact the child's previous school to obtain records.
- Requires local education and child welfare agencies to develop plans for providing cost-effective transportation options that would allow children to remain in the same school (by December 10, 2016).
- Requires state education agency to designate a point of contact for child welfare agencies. This point person would facilitate communication and collaboration with the child welfare agency.



- Requires state educational agencies to collect data and report annually on student achievement/graduation rates for students in foster care.

**FFPSA** (*Family First Prevention and Services Act- enacted in February 2018*)

This act reforms the federal child welfare financing streams, Title IV-E and Title IV-B of the Social Security Act, to provide services to families who are at risk of entering the child welfare system. The bill aims to prevent children from entering foster care by allowing federal reimbursement for mental health services, substance use treatment, and in-home parenting skill training. It also seeks to improve the well-being of children already in foster by incentivizing states to reduce placement of children in congregate care.

**Part I. – Prevention Activities under Title IV-E (Sec. 50711, 50712, 50713)**

- Sec. 50711. Foster Care Prevention Services and Programs State Option – At the option of the state, the Secretary may make a payment to a State for providing the following services or programs for children who are candidates for foster care or who are pregnant or parenting foster youth and the parents or kin caregivers of the children.

Available Services:

- Mental Health Services
- Substance Abuse Prevention and Treatment services
- In-home Parent Skill-based programs

Who is eligible:

- Children who are identified as candidates for foster care identified in a prevention plan as safe to remain safely at home or in a kinship placement with receipt of services or programs
- Children in foster care who are pregnant or parenting,
- The parents or kin caregivers where services are needed to prevent the child's entry into care.

Duration:

- 12 months beginning at identification of prevention strategy
- New prevention plan may begin another 12 months for children/families identified again as candidates.

State Requirements:

- Must identify and maintain a written prevention plan for the child to remain safely at home, live temporarily with a kin caregiver, or live permanently with a kin caregiver and list the services or programs to be provided to or on behalf of the child (including information about how they will monitor, assess, train workforce etc.)
- For pregnant or parenting foster youth the prevention plan must list the services or programs to be provided to or on behalf of the youth to ensure that the youth is

prepared or able to be a parent and describe the prevention strategy for any child born to the youth.

- Services must be trauma informed and should be promising, supported, well-supported practices as modeled by the California Evidence-Based Clearinghouse for child welfare.
- Must report outcomes for those receiving services and costs associated.
- HHS to issue guidance on practices criteria and pre-approved services and programs no later than October 1, 2018

**Federal Payments:**

- 50 percent of amount spent for prevention services and programs will be available to states beginning October 1, 2019- October 1, 2026,
- Beginning October 1, 2026 the FFP will be the state's FMAP for the prevention services and programs
- States may use IV-E funds for associated training and administrative costs at 50 percent reimbursement
- Maintenance of effort requirement for foster care expenditures so that states do not substitute their state and local prevention dollars for IV-E prevention dollars

**Part IV – Ensuring the Necessity of a Placement that is not in a Foster Family Home (Sections 50741, 50742, 50743, 50744, 50745, 50746)**

**Sec. 50741 Limitation of Federal funds for non- foster family settings:**

After two weeks, federal reimbursement will only be made for group homes if the child is in:

- A qualified residential treatment program (QRTP)
- A setting specializing in providing prenatal, post-partum, or parenting supports for youth,
- Supervised independent living for youth over 18

**QRTP requirements:**

- Should have a trauma-informed treatment model designed to address the needs of children with emotional or behavioral disorders and be able to implement the treatment identified by the assessment
- Has registered or licensed nursing staff and clinical staff onsite to the extent the program's treatment model requires
- Facilitates outreach to family members of the child
- Documents how family members are integrated into the treatment process for the child
- Provides discharge planning and family-based care support for 6 months after discharge

**Family foster home definition:**

- Licensed or approved by state where child in foster care resides

- Adheres to the reasonable and prudent parent standard • Provides 24-hour care for the child
- Provides the care for not more than 6 children in foster care (there is flexibility here: parenting youth, siblings, meaningful relationship with a family, special family training)

**Sec. 50742 Assessment and Documentation of the Need for Placement in a Qualified Residential Treatment Program (QRTP)**

- Assessment must be conducted within 30 days after placement in QRTP to receive federal payment by a qualified individual (a trained professional or licensed clinician, cannot an employee of the state)
- Assessment will look at the strengths and needs of the child using an age appropriate evidence-based validated functional assessment tool approved by HHS
- Determine which setting is best for the child, ideally the least-restrictive environment
- Develop list of short- and long-term child specific mental and behavioral health goals  
Family and permanency team must be assembled to work in conjunction with qualified individual
- State must document in child's case plan what the team decides, who was there, etc.
- A shortage of foster family homes is not an acceptable reason for determining that the needs of the child cannot be met in a foster family home
- Within 60 days of placement in a QRTP, a family or juvenile court will consider the assessment, determine the most appropriate placement of the child and approve or disapprove the placement- state has to demonstrate why child is in QRTP if for an extended period of time
- If the assessment determined that the placement of a child in a QRTP is not appropriate, a court disapproves of the placement or the child is returning to a family home setting, federal funds can be used while the child remains in QRTP during the transition period
- **No federal funds can be used after 30 days of such a determination**

**Sec. 50743 Protocols to Prevent Inappropriate Diagnoses**

- Establishes protocols to make sure inappropriate diagnoses are not being made to keep child in a QRTP or other non-foster family home

## Liability

Liability means “legal responsibility for one’s acts or omissions.”

- By assuming custody of a child, child welfare workers accept a certain degree of legal responsibility for the child’s health, safety, and well-being.
- Liability applies to all child welfare practices - not just when a child is in agency custody.

The failure of a person or entity to meet responsibility leaves them open to a lawsuit for any resulting damages or a court order to perform. Additionally, professional consequences can occur when responsibilities are not met.

Awareness is important, but don’t let concerns about potential liability paralyze you. To win a lawsuit, the suing party (also known as the plaintiff) must prove the legal liability of the defendant, if the plaintiff’s allegations are shown to be true. This requires evidence of the duty to act, the failure to fulfill that duty, and the connection of that failure to some injury or harm to the plaintiff.

Anyone can file a lawsuit. It doesn’t mean there’s necessarily anything to it or that it has merit. Of course, the fact that a case is frivolous does not minimize inconvenience, frustration, and the possibility of expense, but the good news is most of the time you are not personally liable.

Possible actions that can be brought against social workers and DSS fall into several categories. The category is outlined and examples of violations within each category are given below:

<b>Civil</b>
<ul style="list-style-type: none"> <li>• Breach of confidentiality / improper release of information (most common)</li> <li>• Sexual misconduct (also common)</li> <li>• Lack of informed consent to treatment</li> <li>• Ineffective treatment/results</li> <li>• Negligence; malpractice (rare)</li> </ul>
<b>Civil Rights or Constitutional Rights</b>
<ul style="list-style-type: none"> <li>• Due process concerns (governmental procedures must be fair)                         <ul style="list-style-type: none"> <li>○ Ex: failure to follow proper procedure for removal of a child from home</li> </ul> </li> <li>• Privacy                         <ul style="list-style-type: none"> <li>○ Ex: unauthorized disclosure of information</li> </ul> </li> <li>• MEPA/IEP, ICWA, ADA violations</li> </ul>
<b>Criminal</b>
<ul style="list-style-type: none"> <li>• Intentional injuries, such as assault, battery</li> <li>• Other criminal acts, such as sexual exploitation</li> </ul>

In addition to lawsuits, there are potential professional consequences when there has been a failure to meet professional responsibility.

Administrative disciplinary actions
<ul style="list-style-type: none"> <li>• Reprimand</li> <li>• Transfer</li> <li>• Demotion</li> <li>• Dismissal</li> </ul>
Professional Sanctions
<ul style="list-style-type: none"> <li>• NASW censure for unethical conduct or unprofessional behavior</li> <li>• Adjudication through professional review</li> <li>• Suspension or revocation of membership</li> <li>• No recourse here for <i>incompetent</i> practice</li> </ul>

Your biggest liability is not following the law and policy.

Adherence to law and policy is what allows your agency to protect you from whatever personal liability you may face.

The best defense is best practice. This means:

- Knowledge of and compliance with laws, policies, & procedures that apply to social work practice.
- Careful, professional, legal practice.
- Adherence to the NASW Code of Ethics.
- Conscientious use of supervision and bi-level review.
- Preservation of confidences & protection of records within legal limits.
- Thorough, accurate, and timely recording of client information.
- Avoidance of illegal behavior and inappropriate behavior toward clients.



## The Court Process

Proceeding	Timeframe	Overview
Petition	Initiates court process	<p>Your agency must file a petition requesting adjudication of abuse, neglect, and/or dependency:</p> <ul style="list-style-type: none"> <li>• When safety-related circumstances necessitate the need for immediate removal.</li> <li>• Due to the family's unwillingness to accept critically needed services and those services are necessary to keep the family intact.</li> <li>• When despite agency efforts to provide services, the family has made no progress towards providing adequate care for the child and those services are necessary to keep the family intact.</li> </ul>
Adjudicatory hearing	No later than <b>60 days</b> from the filing of the petition unless continued for cause	<p>At the adjudication hearing, the court decides whether CPS can prove the allegations in its petition. The child welfare agency's attorney will present evidence through the testimony of the social worker, law enforcement officers, or other witnesses, including any experts. Documents such as medical records or photographs also may be entered into evidence. The attorneys for the parents and the child will have the right to question or cross-examine the witnesses and to present evidence. The parents may testify, as may other family members or neighbors who have knowledge of the facts alleged in the petition or of the care the parents provided their children.</p>
Dispositional Hearing	<b>Immediately following adjudication.</b> If not, it shall be concluded within 30 days of the adjudication hearing	<p>At the dispositional hearing, the judge decides what the best plan is for the child and what services will be ordered. For example, the court may enter an order that mandates counseling and rehabilitative services. The judge will also decide where the child will live, whether there are any relatives that can help take care of the child, and what type of visits the parent will have with their child. The judge may also order each parent to receive certain services, such as substance abuse treatment, parenting classes, or domestic violence counseling. Essentially, the dispositional hearing determines what will be required to resolve the problems that led to CPS intervention.</p>

Initial Reviews	Within <b>90 days</b> of the dispositional hearing	<p>The review hearing is an opportunity to evaluate the progress that has been made toward completing the case plan and any court orders and to revise the plan as needed. At each review hearing, the judge is given information about what each parent has been doing, how the child is doing, and whether there are any needs that haven't been addressed. The court must decide if the plan that was made during disposition is working and if any changes are needed. Review hearings should guide the case to permanency for the child.</p> <p>Review Hearings occur for cases where children remain in their homes and are not in DSS custody.</p>
Ongoing reviews	At least every <b>6 months</b> after the initial review	Same as the initial hearing outlined above.
Permanency Planning Review Hearings	Initial within 90 days of dispositional hearing and ongoing every 6 months thereafter	<ul style="list-style-type: none"> <li>• Proceedings held for children in out-of-home placement.</li> <li>• Much like the Review Hearings outlined above. Additionally, permanent plans are set and reviewed through this process.</li> <li>• Permanency Planning Review Hearings cease after TPR if the court determines there is no longer a need for concurrent planning.</li> </ul>

While the court process follows a prescribed path, there is nuance as to the timeframes depending upon when a child enters custody.

It is possible that DSS initiates court proceedings during In-Home Services by filing a juvenile petition without filing for non-secure custody. When this occurs, the process is followed as outlined. It is possible that during the disposition or at a subsequent review hearing, the court may order that the child enter foster care. When this occurs, the case continues in the established court process and the review hearings become “Permanency Planning Review Hearings.”

If the child enters foster care by way of a non-secure custody order, a separate court process is enacted. This process can occur at either the CPS Assessment or In-Home Services stage of the child welfare process.

Proceeding	Timeframe	Overview
Non-Secure Custody Order	Initiates entry into foster care	Accompanies a petition alleging abuse/neglect/dependency and immediate safety needs of the children
Initial Hearing/Non-Secure Custody Hearing	Within <b>7 days</b> of non-secure. May continue up to 10 business days with the consent of the parent and GAL if appointed	The main purpose of the initial hearing is to determine whether the child should be placed in substitute care or remain with or be returned to the parents pending further proceedings. The critical issue is whether measures can be put in place to ensure the child’s safety.
Second Hearing on Continued Non-Secure Custody	Within 7 business days of the initial non-secure hearing	Determine the need for continued non-secure custody.  Inquiry as to location of parents, engagement of relatives to provide placement, the safety of children who remain in removal parents’ home, MEPA, and ICWA
Subsequent Non-Secure Custody Hearings	Occur at least every 30 calendar days after the second hearing until the dispositional hearing  Subsequent hearings can be waived only with the consent of the parents and GAL	Same as the second hearing outlined above



Termination of Parental Rights

The Involuntary Termination of Parental Rights process follows a similar court process outlined above.

Proceeding	Timeframe	Overview
TPR Petition	Initiates TPR proceedings <ul style="list-style-type: none"> <li>• Within 60 days of the hearing setting adoption as the permanent plan</li> <li>• If a child has been in out-of-home placement for 12 of the most recent 22 months if no exception exists</li> </ul>	Outlines reasonable efforts to reunify with parents, continuation of safety threats, and the ways in which TPR is in the best interest of the child.
TPR Hearing	No later than <b>90 days</b> from filing the petition or motion	A termination of parental rights (TPR) hearing is divided into two stages, adjudication and disposition. At adjudication, the party requesting TPR must prove to the judge by clear and convincing evidence that grounds exist for termination. If the judge decides that grounds do not exist, the judge will dismiss the case. If the judge decides that the grounds do exist, the judge moves to the disposition stage and must decide whether TPR is in the child's best interest.
Post TPR Hearing	Within <b>6 months</b> after the TPR order has been entered and ongoing every 6 months thereafter	Ensure that every reasonable effort is being made to finalize a permanent plan for the child

Foster Care 18-21 Program

When a young adult enters the Foster Care 18-21 program by signing a Voluntary Placement Agreement (DSS-597), court reviews continue. The initial court review hearing occurs within 90 days of signing the VPA and additional hearings occur at the discretion of the court although the young adult or DSS may request additional hearings at any time. No GAL is appointed for Foster care 18-21 cases.

## Practice Standards Worker Self-Assessment



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## North Carolina Practice Standards Worker Assessment

### North Carolina Worker Assessment

The North Carolina Practice Standards builds skills and behaviors in the workforce that provide the groundwork for learning, and they are the foundation of North Carolina's Practice Model. The Practice Standards are anchored by our core values: safety-focused, trauma-informed, family-centered, and cultural humility. They are described in observable, behaviorally specific terms to illustrate how social workers will conduct the essential functions of child welfare and how supervisors and leaders will support them. The Practice Standards are divided into five essential functions: communicating, engaging, assessing, planning, and implementing.

The North Carolina Worker Assessment tool is a companion document to the Practice Standards. This assessment is a useful tool to evaluate ways in which you incorporate the Practice Standards into your own practice and areas to improve upon. Assessments are used as a quality improvement measure and will support your learning to enhance your skills and behaviors. This assessment tool can be used in a variety of ways, such as a self-assessment, peer review, or a 360-degree evaluation. Following the assessment tool is an Action Plan you will complete where you will identify the specific actions you plan to take to implement the behaviors of the Practice Standards into your work paying particular attention to the areas noted as occurring 'sometimes' or 'never.'

#### Self-Assessment

A self-assessment is your evaluation of your own practice, behaviors, and attitudes, in particular your implementation of the Practice Standards within your work. When completing the assessment tool as a self-assessment, you will complete the tool on your own following the below instructions. Reflective, thoughtful, and honest responses to each item will provide you with the information necessary to improve your practice to the benefit of the children and families you work with.

#### Peer Review

A peer review is an evaluation of your practice and professional work by others in similar positions who you work with. A peer review provides a structured framework for other workers to assess and provide feedback to you on your work and implementation of the Practice Standards. When completing the assessment tool as a peer review, you will ask other workers to complete the tool as an evaluation of your work following the below instructions. You can use the information gathered through the peer review as you complete your action plan.

#### 360-Degree Evaluation

A 360-degree evaluation is a process where you receive confidential and anonymous feedback on your practice and work from others who work around you, including leaders in your organization, your supervisor, and other workers. It's important that a 360-degree evaluation be completed by a variety of your colleagues in different positions. A 360-degree evaluation is a helpful assessment that will provide you with greater insight and understanding of your practice and behaviors, particularly those that relate to the Practice Standards. When completing the assessment tool as a 360-degree evaluation, you will ask leaders, supervisors, workers, and other staff within your organization to complete the tool as an evaluation of your work following the below instructions. You can use the information gathered through the 360-degree evaluation as you complete your action plan.

#### Instructions

The North Carolina Worker Assessment tool is divided into several sections; there is one section for each corresponding Practice Standard. Each section may be completed in one sitting or completed over time. The assessment should be completed individually, and keep in mind the assessment will be looking at your practice as a whole. Each core activity within the Practice Standards is broken down into three stages: optimal, developmental, and insufficient. These stages should be used to anchor the ratings in the assessment. Each stage is a steppingstone to the

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next allowing you to gradually improve your skill set as a child welfare professional. This assessment will help you, as a learner, identify goals and objectives to begin integrating the Practice Standards into your work.

The assessment is completed by determining which number on the rating scale corresponds best to your own practice behaviors. There is also space to take notes where a rationale for the rating can be added. Each behavior will be rated on a three-point scale: (1) always, (2) sometimes, (3) never.

1. Always: I implement this standard consistently in my own child welfare practice
2. Sometimes: I inconsistently implement this standard in my own child welfare practice
3. Never: I never implement this standard in my own child welfare practice

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# North Carolina Worker Assessment: Communicating

## Introduction

Communicating is defined as 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.

There are four Communicating core activities: (1) use clear language and checking to assure two-way understanding, (2) using respectful, non-judgmental, and empowering language, (3) operating with transparency, and (4) respecting confidentiality and privacy.

Table 1. Core Activity: Using clear language and checking to assure two-way understanding

Practice Standard 1: Ensure clarity when communicating				
	A	S	N	Notes
I use clear, specific, understandable oral and written communication	(1)	(2)	(3)	
I share important information with families verbally and in writing	(1)	(2)	(3)	
Practice Standard 2: Adapt communication to family needs and preferences, and provide consistent information to all family members who need it				
	A	S	N	Notes
I consider language barriers, preferences, literacy, and tailor communication	(1)	(2)	(3)	
I use preferred gender pronouns	(1)	(2)	(3)	
I attend to the child and family's language and use their words	(1)	(2)	(3)	
I ask families for their communication preferences	(1)	(2)	(3)	
I share appropriate information, provide consistent information	(1)	(2)	(3)	
Practice Standard 3: Allow time to enhance two-way communication with families through questions and checks for understanding				
	A	S	N	Notes

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I seek to allow enough time for two-way communication	(1)	(2)	(3)
I inform families of time limits, fully present, schedule follow-up meeting	(1)	(2)	(3)
I actively listen to families, reflect back	(1)	(2)	(3)
I ask questions for deeper understanding	(1)	(2)	(3)
I encourage and respond to questions from families, confirm understanding	(1)	(2)	(3)

**Table 2. Using respectful, non-judgmental, and empowering language**

<b>Practice Standard 4: Speak with youth and families in a non-judgement, respectful manner</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I convey interest and respect through body language	(1)	(2)	(3)	
I use consistently objective, strengths-based language	(1)	(2)	(3)	
I regularly seek out families' feelings, validate them	(1)	(2)	(3)	

**Table 3. Operating with transparency and honesty**

<b>Practice Standard 5: Clearly and openly express to youth and families what is expected from them and what they can expect from child welfare</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I explain the role of child welfare, what to expect, decision points, timeframes	(1)	(2)	(3)	
I fully inform families of options and opportunities, seek options from families	(1)	(2)	(3)	



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I follow through with commitments, explain changing circumstances	(1)	(2)	(3)	
I set timeframes for responses to questions, follow through	(1)	(2)	(3)	
I answer questions honestly	(1)	(2)	(3)	
<b>Practice Standard 6: Always tell the truth, including during difficult conversations, in a manner that promotes dialogue</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I acknowledge mistakes and misunderstandings	(1)	(2)	(3)	
I acknowledge when information is not known, cannot be shared	(1)	(2)	(3)	
I consistently model transparency and honesty	(1)	(2)	(3)	
I share important information without threatening or attacking, promotes dialogue	(1)	(2)	(3)	

Table 4. Core Activity: Respecting confidentiality and privacy

<b>Practice Standard 7: Diligently respect confidentiality while sharing information when necessary and appropriate</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I clarify and follow legal expectations for confidentiality, explain what can be shared	(1)	(2)	(3)	
I follow-up with my supervisor on what can be shared	(1)	(2)	(3)	
I take the release of information process seriously	(1)	(2)	(3)	
I ensure families know their right to revoke release of information	(1)	(2)	(3)	
I anticipate and minimize breaches of confidentiality	(1)	(2)	(3)	

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I understand that families perceive confidentiality as isolating, discuss confidentiality, obtain releases

(1) (2) (3)



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# North Carolina Worker Self-Assessment: Engaging

## Introduction

Engaging is defined as empowering and motivating families to actively participate with child welfare by communicating openly and honestly with the family, demonstrating respect, and valuing the family’s input and preferences. Engagement begins upon first meeting a family and continues throughout child welfare services.

There are three Engaging core activities: (1) Focused attention to understand families, (2) demonstrating interest and empathy for families in verbal and non-verbal behavior, and (3) acknowledging family strengths.

Table 1. Core Activity: Focused attention to understand families

Practice Standard 1: Fully present when meeting with families				
	A	S	N	Notes
I attend to families, ignore other distractions	(1)	(2)	(3)	
I explain notetaking, present and paying attention	(1)	(2)	(3)	
I acknowledge the statements of families	(1)	(2)	(3)	
I am aware of cultural norms and family preferences	(1)	(2)	(3)	
I allow families to finish speaking	(1)	(2)	(3)	
I establish rapport	(1)	(2)	(3)	
Practice Standard 2: Prepares in advance to be able to connect with families				
	A	S	N	Notes
I develop clarifying and follow-up questions	(1)	(2)	(3)	
I prepare questions, is flexible based on meeting dynamics	(1)	(2)	(3)	
I prepare for interactions based on individual needs	(1)	(2)	(3)	

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I remember action items for future discussions	(1)	(2)	(3)	
I collaborate with families, brings understanding to all interactions	(1)	(2)	(3)	
I understand, adjust to cultural considerations and preferences	(1)	(2)	(3)	
<b>Practice Standard 3: Considers the family's perspective in all exchanges and actions</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I operate with belief that families are experts of their own situation	(1)	(2)	(3)	
I listen and acknowledge families' perspective	(1)	(2)	(3)	
I ask questions to understand	(1)	(2)	(3)	
I treat families as essential partners	(1)	(2)	(3)	
I show respect by including families in planning	(1)	(2)	(3)	
I include families in decision making	(1)	(2)	(3)	
I appropriately build relationships with families from other cultural groups	(1)	(2)	(3)	

Table 2. Core Activity: Demonstrating interest and empathy for families in verbal and non-verbal behavior

<b>Practice Standard 4: Recognizes the family's perspectives and desires</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I empower families to feel confident and comfortable	(1)	(2)	(3)	
I provide opportunity for families to co-lead conversation	(1)	(2)	(3)	

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I engage with families to check-in after tough situations	(1)	(2)	(3)	
I recognize the power dynamics in uncomfortable situations	(1)	(2)	(3)	
I am open minded	(1)	(2)	(3)	
I engage families in problem solving, encourage ownership	(1)	(2)	(3)	
<b>Practice Standard 5: Use body language to convey interest to families</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I maintain eye contact	(1)	(2)	(3)	
I lean in when speaking	(1)	(2)	(3)	
I am mindful of facial expressions and nod my head affirmatively	(1)	(2)	(3)	
I understand culture may play a role in body language	(1)	(2)	(3)	

**Table 3. Core Activity: Acknowledging family strengths**

<b>Practice Standard 6: Acknowledge and celebrate strengths and successes</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I build on small successes and verbally recognize progress	(1)	(2)	(3)	
I am consistently strengths-based and objective	(1)	(2)	(3)	
I identify positives	(1)	(2)	(3)	
I take a holistic approach, focusing on strengths	(1)	(2)	(3)	

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I encourage families to identify their strengths

(1) (2) (3)

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# North Carolina Worker Assessment: Assessing

## Introduction

Assessing is defined as 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.

There are four Assessing core activities: (1) gathering information from children, caretakers, and other family members, (2) gathering and reviewing history, including agency records and other service assessments, (3) gathering information from collateral sources including service providers and persons with relevant knowledge, and (4) using critical thinking to synthesize information, assess what additional information is needed, and inform decision making.

Table 1. Core Activity: Gathering information from children, caretakers, and other family members

Practice Standard 1: Differentiates between information and positions				
	A	S	N	Notes
I moderate information gathering sessions	(1)	(2)	(3)	
I gather information that supports all positions	(1)	(2)	(3)	
I understand my own biases that may cloud positions	(1)	(2)	(3)	
Practice Standard 2: Takes time to get to know families and explain the assessment process				
	A	S	N	Notes
I take time to conversationally gather the family's story	(1)	(2)	(3)	
I use engagement to build family participation in assessment process	(1)	(2)	(3)	
I get a picture of the family's hopes, aspirations, challenges, and worries	(1)	(2)	(3)	
I explain the assessment process, reiterating purpose	(1)	(2)	(3)	
I authentically share with the family about the process	(1)	(2)	(3)	

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I keep in mind the culture of the family when gathering information	(1)	(2)	(3)	
<b>Practice Standard 3: Asks questions based on information needed and at ease asking uncomfortable questions</b>				
	A	S	N	Notes
I ask open-ended, strengths-based questions	(1)	(2)	(3)	
I understand what type of questions elicit the best type of answers	(1)	(2)	(3)	
I have the ability to hear difficult information without reaction	(1)	(2)	(3)	
I engage in crucial conversations	(1)	(2)	(3)	
I utilize a narrative approach to gather perspectives on historical information	(1)	(2)	(3)	

Table 2. Core Activity: Gathering and reviewing history, including agency records and other service assessments

<b>Practice Standard 4: Stays open to different explanations of events in the record, keeping biases in check</b>				
	A	S	N	Notes
I continuously gather information	(1)	(2)	(3)	
I am diligent in pursuing information	(1)	(2)	(3)	
I understand how to factor historical information into current situation	(1)	(2)	(3)	
I keep an open mind	(1)	(2)	(3)	
<b>Practice Standard 5: Balances what is read in the record and what families share</b>				
	A	S	N	Notes
I review information ahead of meeting the family, but ask them to share their perspective	(1)	(2)	(3)	

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I identify in the record what has historically worked well for the family	(1)	(2)	(3)
I have an understanding of what biases I hold when reviewing history	(1)	(2)	(3)

Table 3. Core Activity: Gathering information from collateral sources including service providers and persons with relevant knowledge

Practice Standard 6: Obtains all sides if there are differing positions among collaterals, engaging families in the process				
	A	S	N	Notes
I seek out wide number of collaterals and balance collateral sources	(1)	(2)	(3)	
I obtain information from as many collaterals as time permits	(1)	(2)	(3)	
I consider all relevant collateral sources	(1)	(2)	(3)	
I am honest with families when I must reach out to collaterals the family is unhappy with and explain why	(1)	(2)	(3)	
I let the family help identify collaterals and ask their permission before contacting	(1)	(2)	(3)	

Table 4. Core Activity: Using critical thinking to synthesize information, assess what additional information is needed, and inform decision making

Practice Standard 7: Synthesizes information and considers sources, prioritization, and timelines				
	A	S	N	Notes
I continually gather information	(1)	(2)	(3)	
I understand assessment is ongoing process in determining needs	(1)	(2)	(3)	
I rank information received based on relevance and priority	(1)	(2)	(3)	



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I prioritize information that negatively impacts children to address first	(1)	(2)	(3)	
<b>Practice Standard 8: Remains non-judgmental when processing information</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I am inquisitive from the beginning of assessment process	(1)	(2)	(3)	
I understand the family's community as they define it	(1)	(2)	(3)	
I operate with cultural humility	(1)	(2)	(3)	
I persevere in gathering information, follow the information	(1)	(2)	(3)	
I understand not all information is relevant	(1)	(2)	(3)	
I normalize reactions family has to information and assessment results	(1)	(2)	(3)	
I understand fight, flight, or freeze response	(1)	(2)	(3)	

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# North Carolina Worker Assessment: Planning

## Introduction

Planning is defined as 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.

There are Four Planning core activities: (1) synthesizing and integrating current and previous assessment information and family history to inform plans, (2) preparing families for the teaming/planning process, (3) conducting child and family team meetings with children, youth, and families, and (4) completing and revising behaviorally based case plans.

Table 1. Core Activity: Synthesizing and integrating current and previous assessment information and family history to inform plans

Practice Standard 1: Engages family in understanding assessment and history, focusing on strengths to customize plans				
	A	S	N	Notes
I transparently share assessments with families	(1)	(2)	(3)	
I see family input into what has and hasn't worked in the past, apply information	(1)	(2)	(3)	
I partner with families owning their plan, creating buy-in	(1)	(2)	(3)	
Practice Standard 2: Discovers root causes and underlying reasons for family involvement				
	A	S	N	Notes
I seek input from others with knowledge of family history, keep an open mind	(1)	(2)	(3)	
I focus plan on identified needs, tied to assessment	(1)	(2)	(3)	
I ask questions and seek information to help families understand root cause	(1)	(2)	(3)	
I discuss DSS concerns with family, get feedback	(1)	(2)	(3)	

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Table 2. Core Activity: Preparing families for the teaming/planning process

Practice Standard 3: Believes and practices the importance of preparation, both for self and for the family, for teaming and planning				
	A	S	N	Notes
I come to meeting prepared based on review of information	(1)	(2)	(3)	
I prepare families for meetings ahead of time, providing copies of documents	(1)	(2)	(3)	
I consider adjustments to better accommodate families	(1)	(2)	(3)	
I ensure families understand CFTs are their meetings, explains rights	(1)	(2)	(3)	
I ask families who they would like to invite to meetings	(1)	(2)	(3)	
I ask families what they want to accomplish during meetings	(1)	(2)	(3)	
Practice Standard 4: Actively engages family in identifying their team				
	A	S	N	Notes
I explain to families the purpose of teams, role they play	(1)	(2)	(3)	
I explore ways to involve children in CFT	(1)	(2)	(3)	
I work with families to identify supports, encourage families to invite to meetings	(1)	(2)	(3)	
I explain why having support is important	(1)	(2)	(3)	
I creatively explore and troubleshoot with families past supports	(1)	(2)	(3)	

Table 3. Core Activity: Conducting child and family team meetings with children, youth, and families

Practice Standard 5: Promotes family voice as the cornerstone of the meeting

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	A	S	N	Notes
I encourage families to start meetings sharing strengths or concerns	(1)	(2)	(3)	
I encourage children and youth to participate	(1)	(2)	(3)	
I reinforce strengths of families through meeting, share protective capacity examples	(1)	(2)	(3)	
I provide families options about aspects of meetings to engage families	(1)	(2)	(3)	
<b>Practice Standard 6: Facilitates and engages participants throughout, acknowledging and managing conflict</b>				
	A	S	N	Notes
I set and reinforce boundaries and expectations throughout meetings	(1)	(2)	(3)	
I make sure all voices are heard and expressed during meetings	(1)	(2)	(3)	
I show empathy and acknowledge how distressing situation may be, provide support	(1)	(2)	(3)	
I am clear on concerns, ask families to identify solutions	(1)	(2)	(3)	
I diffuse situations when conversations escalate	(1)	(2)	(3)	
I manage emotions in the room well	(1)	(2)	(3)	

Table 4. Core Activity: Completing and revising behaviorally based case plans.

<b>Practice Standard 7: Actively involves families in developing behavioral based case plans</b>				
	A	S	N	Notes
I co-create plans that are flexible and individualized	(1)	(2)	(3)	

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I invite families to identify issues they want to change, include in plan	(1)	(2)	(3)	
I utilize harm and danger statements to identify safety issues	(1)	(2)	(3)	
I plan with families not for or about families	(1)	(2)	(3)	
I structure plan around behaviors desired to change, not completion of programs	(1)	(2)	(3)	
I prioritize tasks in plans and break down tasks into manageable steps	(1)	(2)	(3)	
<b>Practice Standard 8: Revisits the case plan regularly, willing to modify or update as needed, but at a minimum per policy</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I bring subject of case plan into every conversation	(1)	(2)	(3)	
I ensure families have a copy of their case plan	(1)	(2)	(3)	
I update plans with every success to show progress, keep families motivated	(1)	(2)	(3)	

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# North Carolina Worker Assessment: Implementing

## Introduction

Implementing is defined as 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.

There are three Implementing core activities: (1) supporting families to take actions agreed upon in the plan and connecting families to services and community support, (2) collaborating with providers and informal supports in the community to help families achieve desired outcomes, and (3) coaching with families and partnering with providers to assure plans are being implemented, progress is made, and outcomes achieved.

Table 1. Core Activity: Supporting families to take actions agreed upon in the plan and connecting families to services and community support

Practice Standard 1: Supports families to take actions				
	A	S	N	Notes
I prioritize the family's availability and convenience when providing support	(1)	(2)	(3)	
I offer to call or link families to providers as a first step	(1)	(2)	(3)	
I show families through actions and words that I am interested in their success	(1)	(2)	(3)	
Practice Standard 2: Works with families to find solutions to challenges				
	A	S	N	Notes
I ask questions tailored to individual family needs to identify challenges to engaging in services	(1)	(2)	(3)	
I ask families what their concerns about services and service delivery	(1)	(2)	(3)	
I advocate for families and help them navigate the system	(1)	(2)	(3)	
I ensure families are participating in the amount of services they can handle	(1)	(2)	(3)	
I support families in their service prioritization	(1)	(2)	(3)	



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Practice Standard 3: Explains to families what services are and what they could do for the family to provide information and informed decisions				
	A	S	N	Notes
I engage families in conversation about purpose of recommended service	(1)	(2)	(3)	
I check-in for families' understanding of services purpose on ongoing basis	(1)	(2)	(3)	
I provide families with contact information for service providers	(1)	(2)	(3)	
I make suggestions on the frequency families should follow-up with providers	(1)	(2)	(3)	
I ensure recommended services are behaviorally specific, not duplicative	(1)	(2)	(3)	
I seek to understand and empathize families' concerns related to services	(1)	(2)	(3)	
Practice Standard 4: Offers an array of service providers to choose from if there are choices to be had				
	A	S	N	Notes
I identify resources available and provide information to families	(1)	(2)	(3)	
I offer to think with the families as they decide on service providers	(1)	(2)	(3)	
I point out service providers based on knowledge of families' history	(1)	(2)	(3)	

Table 2. Core Activity: Collaborating with providers and informal supports in the community to help families achieve desired outcomes

Practice Standard 5: Advocates with and for families with providers on what behavioral change is expected to ensure quality service delivery				
	A	S	N	Notes
I communicate with providers and families about agreed upon behavioral changes being sought	(1)	(2)	(3)	



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I share with providers relevant assessment and case plan information	(1)	(2)	(3)	
I provide feedback to providers, ask questions about services	(1)	(2)	(3)	
I regularly check-in, monitor service delivery	(1)	(2)	(3)	
I escalate problems to my supervisor	(1)	(2)	(3)	
I understand what treatment being provided, what is expected, and evidence of results	(1)	(2)	(3)	
I ensure services delivered are tailored to meet families' needs	(1)	(2)	(3)	
<b>Practice Standard 6: Accesses natural supports in the community to assist families to achieve their goals</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I engage families to identify community supports	(1)	(2)	(3)	
I educate families regarding how to access community resources	(1)	(2)	(3)	
I encourage families to reach out to other systems	(1)	(2)	(3)	
I facilitate meetings between families and support systems	(1)	(2)	(3)	

**Table 3. Core Activity: Coaching with families and partnering with providers to assure plans are being implemented, progress is made, and outcomes achieved**

<b>Practice Standard 7: Checks-in on an ongoing basis with families on progress with the Family Service Agreement</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I routinely ask families if services are good match	(1)	(2)	(3)	
I provide families feedback if they are or are not making efforts	(1)	(2)	(3)	

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I follow-up with families when appointments missed to identify challenges	(1)	(2)	(3)	
I problem solve with families to find solutions to challenges	(1)	(2)	(3)	
I reassess barriers once services begun	(1)	(2)	(3)	
<b>Practice Standard 8: Assesses progress in implementing actions of plan, making adjustments as needed</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I work with families to identify when changes needed in service delivery	(1)	(2)	(3)	
I troubleshoot when goals not achieved to determine root cause	(1)	(2)	(3)	
I engage collaterals about progress made and additional service needs	(1)	(2)	(3)	
I make changes in actions in plan when necessary, not when convenient	(1)	(2)	(3)	
I celebrate wins when goals achieved	(1)	(2)	(3)	
<b>Practice Standard 9: Tracks service delivery for achievement of safety, permanency, and well-being outcomes for the family</b>				
	<b>A</b>	<b>S</b>	<b>N</b>	<b>Notes</b>
I routinely check-in with service providers on progress	(1)	(2)	(3)	
I assess successful completion of service in connection with desired behavior change	(1)	(2)	(3)	
I consider the long-term outcomes when determining achievement of outcomes	(1)	(2)	(3)	

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**North Carolina Worker Action Plan**

**Action Planning**

This Action Plan will help you identify the specific actions you plan to take to implement the behaviors of the Practice Standards into your work. While you complete the Action Plan, pay particular attention to the behaviors noted as happening 'sometimes' or 'never' and identify specific actions to address these areas.

	<b>Practice Standard Behavior</b>	<b>As a result of what I learned through this assessment, I am going to...</b>	<b>I will know I am succeeding with this objective when...</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			

## Family Engagement: Partnering with Families to Improve Child Welfare Outcomes



# Family Engagement: Partnering With Families to Improve Child Welfare Outcomes

Engaging families in the casework process promotes the safety, permanency, and well-being of children and families in the child welfare system and is central to successful practice. Effective family engagement occurs when child welfare practitioners actively collaborate and partner with the family network, including maternal and paternal relatives and fictive kin, throughout their involvement with the child welfare system and recognizing them as the experts on their respective situations and empowering them in the process.

## WHAT'S INSIDE

The benefits of family engagement

Challenges to family engagement

Strategies for engaging families at the practice level

Family engagement at the system, program, and community levels

Family engagement across disciplines

Conclusion

Additional resources



Family engagement is a family-centered and strengths-based approach to making decisions, setting goals, and achieving desired outcomes for children and families. At its best, family engagement encourages and empowers families to be their own champions and to work toward goals that they developed, with the support of their caseworker, based on their strengths, protective factors, and needs. This partnership between caseworkers and families is founded on the principle of communicating openly and honestly in a way that supports disclosure of culture, family dynamics, and personal experiences to meet the individual needs of every family and child. Additionally, family engagement is recognized as essential to success across the human services and education fields and is considered a core competency in the Council on Social Work Education's [accreditation standards](#).

This bulletin for professionals provides an overview of the foundational elements of the family engagement approach, followed by strategies and promising practices for implementing it. While this publication is intended to provide information for frontline caseworkers who directly engage families, it also provides information about family engagement at the system, program, and community levels, as best practices are grounded in these higher levels of the child welfare system.

## THE BENEFITS OF FAMILY ENGAGEMENT

In child welfare practice, families are recognized as experts in determining what is best for themselves and their children. A family engagement approach to casework involves supporting families in developing solutions to their unique challenges. Using this strengths-based approach, caseworkers work to create a safe space and build trust with a family network, then empower and encourage them to partner with caseworkers in developing plans and goals to ensure child safety and, in turn, improve outcomes for children and families. Prioritizing family voice in decision-making and planning processes enhances the fit between family needs and services and increases the likelihood that families will access services that will result in case plan completion.

Rather than being a single tool, family engagement represents a mindset and approach that can reap extensive benefits, including the following:

- **Family preservation.** Involving family members early in the casework process may eliminate the need for a child to be placed outside of the home (Children's Bureau, 2019).
- **Improved interpersonal relationships.** A family's belief that all its members are respected—and that its strengths, challenges, concerns, and cultural differences are recognized and accepted—strengthens the relationship with the caseworker. This creates confidence in the process that increases the chances for a successful intervention (Horwitz & Marshall, 2015).
- **Increased family buy-in.** Families are more likely to commit to achieving goals when they help make decisions about a plan that will affect them and their children (Horwitz & Marshall, 2015).



- **Creating a sense of belonging and family connectedness.** The inclusion of kin and extended family members in case planning expands placement and permanency options for children when in-home care is not feasible and can nurture children's sense of belonging during what is oftentimes a tumultuous, unsettling time. Some people who play an important role may be "fictive kin"—those who may not be related, but who have an emotionally significant relationship with the family or child.
- **Improved quality of caseworker visits.** The engagement of families through empathy, genuineness, and respect leads to quality, purposeful interactions between families and caseworkers. In turn, quality contacts provide opportunities for caseworkers to make an improved assessment of the child's safety, risk, and needs so they can better support the family (Capacity Building Center for States, 2017b).
- **Youth empowerment.** There are also tangible benefits to engaging youth. These include supporting adolescent brain development, encouraging development of leadership skills, improving self-esteem, and helping form critical social connections (Children's Bureau, 2019).

### Family Engagement During a Public Health Crisis

A public health crisis, such as a pandemic, can have major implications on the ways in which caseworkers can engage with families. Agencies may need to adapt their processes and services, e.g., shift to virtual caseworker and family visits. It is important that caseworkers are flexible and supportive as they engage with families during such crises. This could involve helping a family access technology or the internet so they can continue to participate in the case planning process (Children's Bureau, 2021). Caseworkers should also be aware and sensitive of financial difficulties and other family stressors that may be caused or exacerbated by public health crises. For more information on engaging families during times of hardship, see the following resources:

- [Supporting Child, Caregiver, and Family Well-Being in Times of Crisis: Strategies to Promote Effective Virtual and Phone Engagement](#) (Child Welfare Information Gateway)
- [Responding to Disasters](#) (Child Welfare Information Gateway)
- ACYF-CB-IM-21-03: [Lessons From the COVID-19 Pandemic: Supporting Families Through More Just, Equitable, Proactive, and Integrated Approaches](#) (Children's Bureau)
- [Virtual Case Management Considerations and Resources for Human Services Programs](#) (U.S. Department of Health and Human Services [HHS], Office of the Assistant Secretary for Planning and Evaluation)

## CHALLENGES TO FAMILY ENGAGEMENT

Caseworkers regularly face challenges to engaging parents and extended family members. Common barriers to engagement include the following:

- **Vulnerable and worried families.** Involvement with the child welfare system often results in vulnerability and stress that is difficult to cope with. It is important that caseworkers establish a foundation of trust to address these challenges (G. Pilarski, personal communication, May 19, 2021).
- **Unreceptive or mistrusting families.** Parents who become involved in the child welfare system often distrust child welfare services (Mirick, 2014). Their mistrust may be conveyed through a range of emotions, such as anger, frustration, confusion, skepticism, and questioning.
- **An inherent power imbalance.** There is an inherent power imbalance in the roles of parents, other family members, and social workers in child protection processes (Toros et al., 2018). The nature of the relationship is often involuntary on the parents' part and investigative and punitive on the workers' part, which can make forming a partnership challenging.
- **The duality of the caseworkers' role.** On top of the power imbalance, practitioners are required to play multiple—and oftentimes contradicting—roles in the casework process. On one hand, they provide support and assistance, while on the other, they have the authority and ability to make recommendations that remove children from their homes (Horwitz & Marshall, 2015).
- **Caseworker turnover and/or high caseload.** Caseworker turnover adds an element of instability that can hinder the engagement process and take away from time needed to build trust (Cheng & Lo, 2020). In addition, a caseworker with a high caseload may not have sufficient time to build strong relationships with families (Toros et al., 2018).
- **Logistical challenges.** Transportation costs, scheduling conflicts, and other logistical challenges that both families and caseworkers face can impede engagement. Utilizing active and joint problem-solving around these barriers can support family buy-in (Stephens et al., 2018).
- **Family stressors.** Problems including substance use, mental illness, and intimate partner violence can hinder a caseworker's efforts to build a productive, engaging relationship (Cheng & Lo, 2020). Some families facing these stressors benefit from intentional collaboration across service sectors, such as behavioral health and the education system.
- **Implicit bias.** Child welfare agencies should be aware of the implicit biases held by caseworkers, supervisors, and others about the families they work with, as these can impede effective engagement. Common biases include "Individuals can't or won't change" or "If parents loved their children, they would make different choices" (Children's Bureau, 2019). Caseworkers may be particularly biased towards fathers and unwilling or unprepared to engage them (Arroyo et al., 2019). This can result in caseworkers engaging only mothers, despite evidence that father involvement can have beneficial impacts on case outcomes.
- **Interpretation of confidentiality statutes.** Caseworkers can be hamstrung by conservative interpretations of confidentiality laws, precluding them from sharing critical information with the family network.



### Engaging Fathers and Paternal Relatives

Engaging fathers and paternal relatives is a crucial component of family engagement, but these family members have been historically overlooked. The findings from round 3 of the [Federal Child and Family Services Reviews](#) show fathers were engaged in less than half (49 percent) of the reviewed cases, while mothers were engaged in 64 percent of cases (JBS International, Inc., 2020). Child welfare agencies should provide training for their staff on how to effectively engage fathers and work to create greater opportunities to partner with fathers and paternal relatives whose children are involved in the child welfare system.

The benefits of involved fathers include the following (National Fatherhood Initiative, n.d.):

- Improved emotional and social well-being of children
- Fewer maltreatment incidents
- Better school performance
- Fewer behavioral problems for boys and fewer psychological problems for girls

For more information, refer to the following resources:

- [Engaging Fathers and Paternal Family Members](#) (Child Welfare Information Gateway)
- [“Tips & Tools to Help Your Organization Learn to Better Engage Fathers”](#) (National Fatherhood Initiative)
- ACF-ACF-IM-18-01: [Integrating Approaches That Prioritize and Enhance Father Engagement](#) (HHS, Office of Family Assistance)
- [“Engaging Participants and Facilitating Groups”](#) (National Responsible Fatherhood Clearinghouse)

### STRATEGIES FOR ENGAGING FAMILIES AT THE PRACTICE LEVEL

Quality family engagement occurs at the practice level between the caseworker and the family. Effective, collaborative case planning relies on the caseworker's transparent efforts to continuously engage family members and others as appropriate, including utilizing the following activities:

- Visualizing the family system through developing genograms and network maps
- Engaging the family as key decision-making partners
- Identifying behaviors and conditions that need to change
- Matching strengths and needs with solutions and services
- Reviewing, tracking, and acknowledging progress regularly

- Determining readiness for key case transition points, such as reunification
- Marshaling supports for relapse prevention as needed
- Preparing for case closure

The following sections describe approaches caseworkers can use to promote family engagement in daily practice.

### USING SUPPORTIVE BEHAVIORS

Being supportive can go a long way with a family that is involuntarily involved in the child welfare system. Caseworkers should use the following supporting behaviors:

- Considering the socioeconomic stressors and institutional and societal biases associated with class, race, gender, and culture
- Balancing discussions of problems with the identification of strengths and resources
- Listening to the family's concerns with empathy
- Helping families meet concrete needs (e.g., housing, food, utilities, child care) by connecting them with appropriate supports and services
- Setting goals that are mutually agreed upon and may be generated primarily by the family and stated in their language
- Focusing on improving family members' skills rather than providing insights
- Providing family members with choices whenever possible
- Obtaining commitment from the family that they will engage in mutually identified tasks
- Sharing openly and transparently with family members about agency and court expectations and timelines
- Conducting frequent and substantive caseworker visits with the parents, caregivers, children, and other members of the family network
- Providing [virtual alternatives to parent-child visits](#) when face-to-face meetings cannot occur
- Recognizing and praising progress
- Embracing family meetings with the widest family network possible by inviting fictive kin and other members of the family's support system to participate
- Incorporating the child or youth in case planning and family meetings, including helping them be physically present, encouraging them to participate by sending letters and videos, or suggesting participation through other methods
- Holding meetings at times and in locations that are most convenient for family members
- Providing a welcoming physical environment for the meetings

### SUPPORTING PARTNERSHIPS BETWEEN BIRTH AND FOSTER PARENTS

A strong relationship between a child or youth's birth parents and foster parents can help improve family engagement and child welfare outcomes (Birth and Foster Parent Partnership, 2020). These relationships work best when caseworkers support and facilitate early and ongoing communication between the parties.

The [Quality Parenting Initiative](#) (QPI) is a strategy developed by the Youth Law Center that emphasizes the importance of developing a robust relationship between birth and foster families. As of January 2021, 75 jurisdictions in eight States had implemented the QPI approach (Quality Parenting Initiative, 2021). Rather than being a standalone program, QPI is a philosophical approach that communities use to design policies and practices that suit their individual needs (Casey Family Programs, 2020a). The QPI approach in Louisiana, the first State to adopt QPI statewide, involves two core strategies to facilitate shared parenting between foster and birth families: initial calls and icebreakers.

An initial call between the families takes place as soon as possible following the removal of a child from their family. These calls serve to confirm that the child has arrived at the foster home, to introduce the birth family to the foster family, and to exchange information about the child. Caseworkers facilitate this early conversation by preparing both parties for the call, providing topics for discussion, and offering support and guidance if the call does not go well.

An icebreaker meeting is a short meeting between birth and foster families that is facilitated by the caseworker in the foster family's home within 3 to 5 days of placement. This meeting focuses on initiating a relationship between caregivers and serves several purposes:

- The resource parent can learn about the child's needs.
- The birth parent can meet the person caring for their child.
- The child can see their caregivers collaborate.

### INSTITUTING FAMILY MEETING MODELS

The hallmark of family engagement practice is convening the family network to support and plan for its children and family members. When it comes to putting together the family network, child welfare agencies have implemented different types of family meetings, including models such as family group decision-making, family team conferencing, permanency teaming, and team decision-making meetings. For a detailed description of these four approaches, visit the [Annie E. Casey Foundation website](#).



The various family meeting models involve different structures and procedures, but common threads across these approaches include teamwork and family engagement (Kim et al., 2019). Family meeting approaches bring together a group of family members, caseworkers, and other significant stakeholders to develop, implement, and evaluate individualized case plans. Service selection is often a part of these family meetings, which can help build trust between the family members and caseworker. When family members feel safe and can meaningfully participate in assessing their situation, they are able to guide the caseworker on what services and supports will help them.

Such approaches can strengthen family relationships, help identify and nurture a system of family supports, intentionally involve fathers and paternal relatives, and prevent unnecessary placement and placement disruption. For example, a study in Texas found that after controlling for demographic variables, family team meetings reduced the odds of removal by 51 percent (Lambert et al., 2017).

#### **INCORPORATING FAMILY FINDING**

In agencies that implement [family finding](#), child welfare professionals cast a wide net to identify and search for family members and other important people in the lives of children in foster care. Once identified, the professionals make them aware that children have entered care and ask them to become part of the family circle that is engaged in the case decision-making process. This process intentionally creates a lifetime network for children, which fosters a sense of belonging and create meaningful connections with maternal and paternal family members as well as fictive kin. Family finding was initially viewed as a tool to enhance permanency for youth aging out of foster care. However, the practice became more widely used following passage of the Fostering Connections to Success and Increasing Adoptions Act of 2008, which requires State agencies to identify and notify family members within 30 days of removing a child from their home.

Family finding can be time intensive. Since caseworkers have limited time, it is most common for family findings to be carried out by relative search units. Recognizing this, the Fostering Connections Act authorized \$75 million over 5 years for grants that enable agencies to implement programs to increase permanency for children and youth, including intensive family finding programs.

### The Illinois Recruitment and Kin Connection Project

One family finding program funded by the Fostering Connections Act grants was the Illinois Recruitment and Kin Connection Project (RKCP), which was funded by the Children's Bureau from 2010 to 2015. This project sparked policy and practice changes that continued after the project's conclusion (Illinois Department of Children and Family Services & Illinois Center for Adoption and Permanency, 2015).

The RKCP program model included a kin connection specialist who began family finding outreach the same day temporary custody was granted, actively engaging the birth family and case management team in the process. After conducting the search for 40 days, the specialist documented their findings in Illinois' statewide automated child welfare information system.

At the project's conclusion, project leaders determined that RKCP services improved concurrent planning, increased the likelihood that future placements would be with relatives or fictive kin, and succeeded in locating more family members and kin who could serve as alternative placement options and positive attachment figures (Illinois Department of Children and Family Services & Illinois Center for Adoption and Permanency, 2015). Ultimately, the project was successful in catalyzing systems change at the legislative level, the State policy level, and the professional development level. The project's impact exceeded expectations, and front-end family finding is now considered a best practice in the Illinois child welfare system.

More information is available in the [RKCP final report](#).

### EMPLOYING SAFETY ORGANIZED PRACTICE

Safety Organized Practice (SOP) is a collaborative practice approach designed to enhance family participation and encourage equitable decision-making (Northern California Training Academy, 2018). The practice emphasizes the importance of teamwork and aims to strengthen partnerships within a family by involving a network of family, friends, service providers, and the child welfare agency. A core belief of SOP is that all families have strengths.

SOP is both a framework for practice and a set of tools and strategies that caseworkers can utilize. These tools and strategies are informed by several solution-focused techniques used in child welfare practice. These three questions offer a guiding framework for SOP:

- What are we worried about?
- What is working well?
- What needs to happen?

For more information about SOP, check out the California Social Work Education Center's [Safety Organized Practice toolkit](#).

## USING MOTIVATIONAL INTERVIEWING

Motivational interviewing is a nonconfrontational engagement practice that can help families work toward potential changes. It may be particularly useful in encouraging parents to recognize the benefits of participating in a home-based family support program. The approach was originally designed to help adults with substance-use issues but has since been adapted as an effective model for working with involuntary or reluctant families to help resolve their ambivalence toward change (Casey Family Programs, 2021).

When skillfully employed, this technique helps an individual see the possibilities for—and merit in—positive change and then encourages and supports them in this effort. The practice requires a caseworker to listen empathetically and build trust with the family before encouraging them to consider possible changes. A traditional approach to family engagement may involve a caseworker telling a parent they are at risk of losing custody of their child and directing them to participate in services. Using motivational interviewing, the caseworker listens to the parent's concerns about the allegations, encourages them to look at the positives and negatives of engaging in services, and helps them decide what changes are consistent with their goals and values (Hall et al., 2020).

For additional information, see Information Gateway's [Motivational Interviewing: A Primer for Child Welfare Professionals](#).

### Engaging Families Affected by Parental Incarceration

The intersection of child welfare and parental incarceration is a growing concern for child welfare caseworkers. Engaging incarcerated parents may be difficult for caseworkers due to a lack of clear agency policies and insufficient training on working with this population. However, incarcerated parents typically have the same rights as other parents regarding visitation, engagement in case planning, and reunification efforts.

Caseworkers should engage incarcerated parents early and often, from the time of arrest until release. When working with families affected by parental incarceration, caseworkers should consider the following engagement practices:

- Become familiar with the rules and procedures for visitation and other forms of contact at the facility in which a parent is incarcerated in order to facilitate parent/child contact.
- Seek out ways for incarcerated parents to participate in case-planning meetings, dependency hearings, family decision-making meetings, and other appointments.
- Revisit discussions about case and visit plans as incarcerated parents near their release dates.

For more information about working with incarcerated parents, read Information Gateway's [Child Welfare Practice With Families Affected by Parental Incarceration](#).



## PRACTICING CULTURAL HUMILITY

Caseworkers who partake in cultural and diversity training have reported higher success rates in engaging families (Cheng & Lo, 2018). This suggests that when a caseworker demonstrates sensitivity about a family's ethnicity and culture, they can build trust and rapport with that family.

Many of these cultural trainings are labeled and designed to achieve "cultural competency." However, many social work professionals have suggested shifting from the term "cultural competency" to "cultural humility." While competency suggests mastery, humility involves admitting that one does not know everything there is to know about another culture but that they are willing to learn from their clients and address their inherent biases and embedded perceptions (Lekas et al., 2020). Cultural humility is described as a lifelong learning process involving self-reflection and self-critique.

Child welfare caseworkers should seek to apply cultural humility in any instance when one is working with people different from oneself in terms of race, ethnicity, gender, religion, sexual orientation, gender identity expression, socioeconomic status, or geographic location (Mallon, 2020). A lack of sensitivity to the cultural needs, values, and strengths of an at-risk population may undermine the quality of a family's case plan and provided services. It could also lead to assumptions and misconceptions that can result in limited family engagement, frustrated efforts, and misguided resources.

The [National Child Welfare Workforce Institute](#) (NCWWI) suggests that caseworkers integrate the following cultural humility strategies into their practice (NCWWI, 2019):

- Embrace the complexity of diversity.
- Be open to individual differences and different social experiences.
- Reserve judgement.
- Communicate with others in ways that are most understandable to them.
- View cultural humility as an ongoing effort to become more familiar with the worldviews of others.
- Promote collaboration.
- Demonstrate familiarity with children's and families' living environments.
- Self-reflect on the ways in which biases interfere with the ability to objectively listen to others.

Use the following resources for more information on culturally sensitive child welfare practice:

- ["Seeking Equity Calls Us to Cultural Humility"](#) (Children's Bureau Express)
- [Racial Equity Resources for Child Welfare Professionals](#) (Child Welfare Information Gateway)
- [National Center for Cultural Competence](#) (Georgetown University Center for Child and Human Development)



## **FAMILY ENGAGEMENT AT THE SYSTEM, PROGRAM, AND COMMUNITY LEVELS**

While this bulletin is intended for caseworkers who work directly with families, child welfare agencies play an important role in family engagement by implementing programs and supporting their workers in executing best practices for engagement. Community groups and organizations also play a critical role in partnering with agencies to provide tailored services and supports for families involved with the child welfare system.

### **INVOLVING FAMILIES IN SYSTEM-LEVEL CHANGE**

The experiences that families have with all levels of the child welfare system begin at the system level. One of the strongest ways to promote more positive interactions with the system is to have family and youth voices involved in how it is designed and operated (Children's Bureau, 2019). System-level family engagement occurs when family members who were formerly involved with child welfare services actively collaborate with child welfare agencies in effecting practice and systems change. Providing the opportunity for families with lived experience to have a voice in policy and program development, serve on decision-making bodies, and help train agency staff on family engagement can have many benefits in the child welfare system (Capacity Building Center for States, 2019).

Even when States and jurisdictions understand the value of stakeholder engagement, many still struggle to engage families and youth authentically and sustainably in the development and implementation of programs, policies, and training. Pitfalls for family engagement include not giving family members an explicit role or involving them as an afterthought (Capacity Building Center for States, 2019). This often results in the families feeling as though they are involved in a process only to "check a box" or fulfill a requirement. Authentic engagement occurs when child welfare agencies actively work with families and youth early and throughout a process or project and recognize them as equal partners.

Agencies can increase the prominence and impact of family and youth voice in the child welfare system by implementing the following principles (Children's Bureau, 2019):

- Prioritize family and youth voice.
- Work with families and youth to create a vision for how to implement family and youth voice
- Challenge the inherent power imbalance between agencies and families.
- Use mindful and empowering language to describe parents, youth, and caregivers. (For example, use "child" instead of "foster child," "parent" instead of "birth parent," and "resource family" instead of "foster family.")
- Ensure parents and youth have high-quality legal representation.
- Implement peer-led and supported services.
- Establish feedback loops for continuous quality improvement.

Recognizing the benefits of agencies, families, and community partners working together, the Children's Bureau Capacity Building Center for States developed the [Family Empowerment Leadership Academy](#), a collection of resources designed to help agencies improve collaboration with families.

### ENGAGING PARENTS AS PEER MENTORS AT THE PROGRAM LEVEL

One of the most commonly used practices for engaging families at the program level is the [parent partner program](#), which enlists individuals who were once involved with child welfare services to help parents currently involved with the system meet case plan goals and navigate the system. Parent and caregiver mentors assist current parents through mutual sharing, support, and advocacy. Parent partner programs are founded on the premise that these experienced parents and caregivers are uniquely qualified to help by serving as empathetic peers, mentors, guides, and advocates.

Studies show that parent partner programs in child welfare have resulted in higher rates of reunification, lower rates of reentry, and increased family participation in services and court hearings (Casey Family Programs, 2019). They can also be beneficial to the parents who serve as mentors (Casey Family Programs, 2020b). As former clients of the child welfare system take on leadership roles and responsibility, they build workplace skills and self-esteem and are compensated for their efforts. In addition, many who take on roles as parent partners go on to pursue careers in child welfare or degrees in higher education.

To be successful, parent partner programs need strong leaders who can work collaboratively with multiple agency and community partners. Because some agency staff are not accustomed to treating their former child welfare clients as paraprofessionals, leadership should communicate clearly that parent partner programs can be a powerful strategy to improve family engagement in child welfare cases (Casey Family Programs, 2020b). These programs can also influence the culture of child welfare agencies by shifting the perception of caregivers from clients to partners. It is also important that the leadership implementing parent partner programs include diverse representatives so that the diversity of the parent partners reflects the diversity of the population served by the agency (Casey Family Programs, 2020b).

### COMMUNITY ENGAGEMENT IN CHILD WELFARE

Community engagement in child welfare involves partnering with community members who have firsthand knowledge of the strengths their neighborhoods possesses and the challenges they face. Communities are also home to independent organizations that offer specialized programs and services that can support families served by the child welfare system. Integrating community voice into child welfare systems can improve family engagement and increase the efficacy of services.

Agencies can use the following strategies to engage communities:

- Recognizing promising practices and partnering with programs and services that are highly valued within a community
- Hiring staff that represent the race, ethnicity, and cultural makeup of the community
- Encouraging agency staff to attend community events to build relationships and learn about community strengths and concerns
- Involving community members and organizations in assessment and evaluation activities

The Children's Bureau funded a series of Community Collaborations grantees in Federal fiscal years 2018 and 2019 that encouraged collaboration between child welfare agencies and communities. The grantees were awarded funds to develop, implement, and evaluate community-based primary prevention strategies and activities for strengthening families, preventing maltreatment, and reducing entry into the child welfare system. Read about lessons learned from these grantees in the Children's Bureau's [Primary Prevention: Themes From Fiscal Year 2018 Grantee Site Visits](#).

Use the following resources for more information about community engagement:

- [Building Agency/Community Partnerships](#) (Child Welfare Information Gateway)
- [Building and Sustaining Collaborative Community Relationships](#) (Capacity Building Center for States)
- ["Embracing Community and the Wisdom of Lived Experience"](#) (HHS, Administration for Children and Families, Children's Bureau; Information Gateway; & FRIENDS National Center for Community-Based Child Abuse Prevention)

## FAMILY ENGAGEMENT ACROSS DISCIPLINES

Families involved in the child welfare system often have multiple and complex needs across different human services sectors, such as mental health issues and juvenile justice involvement (Capacity Building Center for States, 2017a). Effective collaboration across human services systems can help agencies achieve better outcomes related to safety, permanency, family preservation, and reunification.

For example, interdisciplinary family engagement has proven successful when there is overlap between the child welfare and juvenile court systems (Olson, 2020). When families, caseworkers, legal personnel, extended families, and other stakeholders work collaboratively—sometimes with the help of a facilitator—the benefits can include parental empowerment, strengths-based decision-making, and the focused exchange of information. Visit the Information Gateway website for resources about how child welfare agencies can collaborate with the [courts](#), [behavioral health and wellness professionals](#), and [domestic violence service providers](#).

## CONCLUSION

There are many ways in which child welfare caseworkers and agencies can engage families, ranging from large-scale policy changes to simple changes in daily practice. Fundamentally, though, it requires a paradigm shift in attitude where the family is treated as the expert on its unique situation and encouraged to draw on its specific strengths and resources to ensure more positive long-term outcomes. By reviewing the concepts presented in this issue brief, child welfare professionals can assess how well their own agencies engage families and initiate changes to improve their work in this area.



## ADDITIONAL RESOURCES

[Family-Centered Practice \(Information Gateway\)](#) provides resources on family-centered practice approaches, including information on engaging families in case planning.

[Quality Worker-Parent Visits: A Tip Sheet for Supervisors and Managers \(Capacity Building Center for States\)](#) provides guidance to support caseworkers through three phases of quality worker-parent visits: before the visit, during the visit, and after the visit.

[Applying the Science of Child Development in Child Welfare Systems \(Center on the Developing Child at Harvard University\)](#) provides information on how science-based principles can inform child welfare policy and practice development, including strategies caseworkers can apply to their work engaging families.

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Record of Reflections and Values

Reflection and End of Day Values Sheet		
		
Self-Values Reflection	Reasonable Efforts	Two Level Decision-Making



