



Designing, Implementing, and Maintaining a Child Welfare Practice Model

Introduction

How can an organization ensure that its mission and goals are carried out through its actions? How do agencies determine if the work they do with families results in the intended outcomes? One way to create consistency in practice agency-wide and to provide a framework for accountability is to **develop or adopt a practice model**. In an effective practice model, the practices are grounded in the values, principles, relationships, approaches, and techniques used at the system and casework practitioner level to enable children and families to achieve the goals of safety, stability, permanency, and well-being. Organizing these practices into a model or framework provides a standard for imitation or comparison and a structure based on an underlying set of common ideas, agreements, or policies.

Center for the Support of Families (CSF) program experts have both worked in and managed child and family service agencies throughout the country, and they use that experience to help agencies design and implement coherent practice models that reflect the agency's values and principles and direct service delivery throughout all levels of the system.

While practice models may differ somewhat in specific areas of emphasis, most include common elements. Examples include the following:

- ◆ The Children's Bureau of the Administration for Children and Families, United States Department of Health and Human Services, suggests that all child welfare practice should be child-focused, collaborative, family-centered, community based, culturally responsive, individualized to meet the specific needs of children and families, enhanced to strengthen parental capacity, and outcome-oriented.¹
- ◆ Practice models emphasize service interventions that address safety concerns and ongoing risks of child maltreatment while focusing on families' protective capacities, strengths, and maintenance of cultural and community connections. These best practice interventions are commonly structured in phases around engagement, assessment, planning, coordination, implementation, support, reassessment, and transfer/closure.²

¹ JBS Child Welfare Review Projects. (March 2007). *Children's Bureau Child and Family Services Reviews Practice Principles*. Accessed at: https://www.acf.hhs.gov/sites/default/files/cb/cfsr_update_vol3_apr07.pdf

² The National Quality Improvement Center on Differential Response in Child Welfare Systems. (July, 2011). *Evolving Models of Practice and Differential Response Systems*. Retrieved from

- ◆ The inclusion of organizational principles in practice models ensures that expectations address agency management, leadership, and relationships with the community.³
- ◆ The practice model contains definitions, explanations, and desired behaviors for how an agency will operate and partner with families and other stakeholders in child welfare services,⁴ along with measures of fidelity to the model.
- ◆ Increasingly, practice models are also including a focus on trauma-informed practices. States are using a trauma-focused approach to mitigate and reduce the trauma that children experience. This has the potential to reduce the number of moves children experience while in out-of-home care, and to support maintaining and developing positive relationships.

Practice models are important in providing social workers with guidance and expectations for improving outcomes for children, youth, and families, standardizing practice across the continuum of services, and implementing evidence-informed practice. A practice model becomes the agency's blueprint for how to help families based on social work theory; working with families, and implementing through supervision, system-wide acceptance and approval, and an organizational culture that supports and promotes the tenets of the specified model.⁵

Understanding the Problem and Underlying Root Causes

A key consideration in deciding to develop or implement a child welfare practice model is understanding the problem(s) that a practice model needs to address. It is not unusual for an agency to adopt a practice model because another agency has experienced success with it or because decision-makers identify with the components of the model, rather than first determining what outcomes the agency wants the model to achieve. To understand the factors that drive unsatisfactory performance or outcomes, you should understand the difference in the obvious or presenting problems and the underlying issues that must be strengthened or corrected to make lasting improvements.

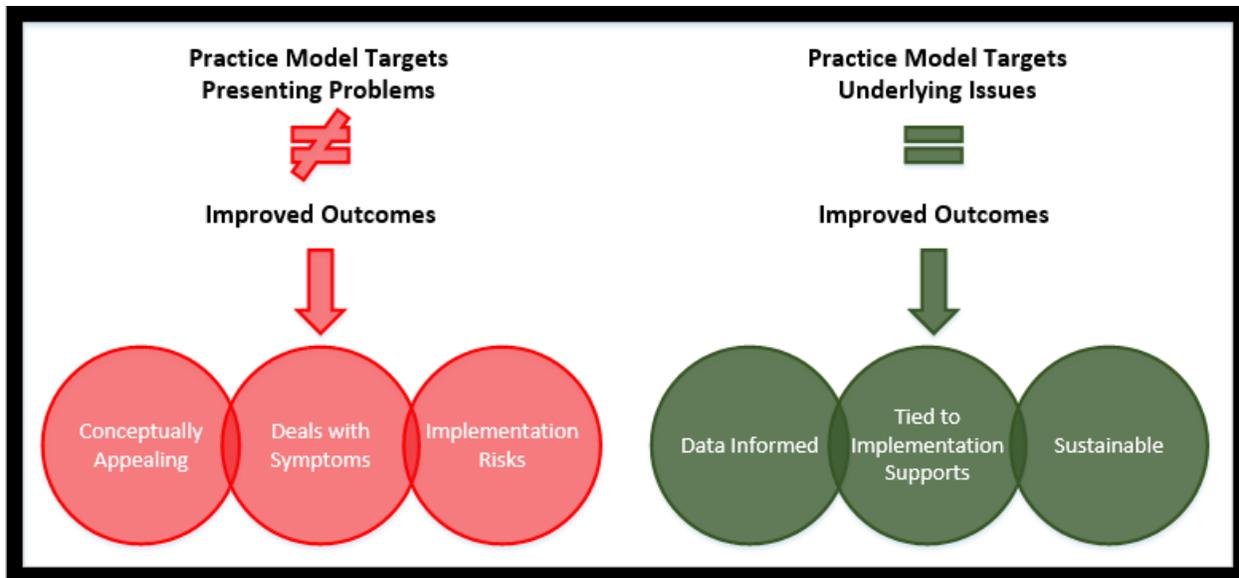
For example, an agency may be experiencing low rates of placement stability and achievement of permanency in foster care, reflected by numerous changes in placement settings and long stays in foster care without permanency outcomes. The agency may adopt a practice model that focuses on improved partnerships with foster care providers and community agencies, increased placement options, and more timely and proactive decision-making regarding permanency planning for children in care, because the agency believes these are credible approaches that could reasonably be expected to lead to the desired improvements.

<http://www.ucdenver.edu/academics/colleges/medicalschoo/department/pediatrics/subs/can/DR/qicdr/General%20Resources/resources/iss ue-brief-2.pdf>

³ The Child Welfare Practice and Policy Group (2008). *Adopting a Child Welfare Practice Framework*. Retrieved from <http://www.childwelfaregroup.org/documents/CWGPracticeFramework.pdf>

⁴ Child Welfare Information Gateway, Connelly M. and Tsujii, E., (2010). *Child Welfare Practice Models: Literature review and implementation considerations 2010*. Retrieved from http://dcfs.co.la.ca.us/katieA/docs/Practice_Model_LR.pdf

⁵Sauer Family Foundation. (2011). *Child Welfare Practice Models, Effective Practice Strategies and Resources to Support Implementation*. Retrieved from www.sauerff.org/download_file/view/74/187



However, a problem-solving approach that uses data and qualitative information to explore the presenting problems' underlying causes may reveal different drivers. The data may show that the children experiencing the highest rates of placement instability and failure to achieve permanency are those children and youth who have experienced high degrees of trauma before and after entry into foster care, and whose trauma-related behaviors are leading to disrupted foster care placements and few permanency options, ultimately leading to a very different type of practice approach. Understanding the problems to be solved and their underlying causes is critical to ensuring that the presenting "symptoms" of the problem do not persist or recur.

It is also important to explore underlying systemic or organizational issues that may be having similar effects. While a practice model, by definition, is concerned with the practice of child welfare, organizational issues such as training, supervision, staffing levels, data support, or other factors may affect its effective implementation. An analysis of the supports that an agency can realistically provide in implementing a practice model, and the effects of the lack of supports, is critical to ensuring that the model leads to the desired outcomes and improvements in practice.

An agency seeking to develop or adopt a practice model must identify the need for and the impact of changes to the existing practice, also considering both intended and unintended consequences. Evaluation of existing data and practices, focus groups and/or individual interviews, presenting challenges, and/or legal mandates can help an organization identify a need and potential framework for a practice model. Leadership must be purposeful and strategic as it embarks on determining direction when developing, adapting, or adopting a practice model.

Additionally, an important factor in this process is implementation. While many see implementation as the final stage to the practice model development process, you should consider both implementation and implementation strategies throughout. Knowing the agency's culture, and identifying necessary and available resources and skills impacts the development of an effective and successful implementation plan.

Practice Model Design

Essential components that an agency should consider in the design of its practice model include the following.

Agency Mission, Vision and Values

Ensuring that the agency's mission, vision and values are clear and understood by internal and external stakeholders is foundational in designing a practice model and an important first step in the design process. They provide a vision of how the agency wishes to serve children and families through their interactions with the agency. The practices in the model should clearly reflect the mission, vision and values in daily work with children and families because without a high degree of consensus within and outside the agency, the practice model will clash with opposing values. The agency must also ensure that its policies and continuous quality improvement processes are aligned with its mission, vision and values and its practices.

Engagement and Collaboration

Internal and external stakeholders should be fully and actively engaged in designing and developing the practice model, since families and children are affected by their interactions with many stakeholders outside of the child welfare agency. Staff involvement at all levels and areas of the agency, private providers, foster and adoptive families, the courts, and children and families served by the system builds consensus, makes the practice model stronger and more likely to be successfully implemented.

Teaming Structure

Using a Practice Model Design Team comprised of agency staff and key external stakeholders, including families and children served by the agency, to develop the model provides a way of ensuring active involvement by key representatives throughout the process. The roles and responsibilities of team members will vary based on the needs of the agency and may include, for example, gathering information about casework practices, ensuring that key practices are addressed within the model, ensuring that practices reflect important values, developing communication plans, creating practice profiles outlining what staff will be saying and doing in their new ways of working with children and families, or developing fidelity measures to the practice model.

Communication Strategies and Plan

A structured communication plan provides a means for an agency's leadership to express its commitment to the practice model within the agency and community, and aids in broad understanding of why the practice model is needed, what it is intended to accomplish, and how it reflects the community's values in serving children and families. It may also provide a means for players in the system to give feedback, identify implementation barriers, and build support for the model.

Performance and Fidelity Measures

The goal of successfully implementing a practice model is to see increased positive outcomes for children and families. Fidelity measures allow the agency to determine if there is consistency in the delivery of services at the worker, unit, county/region and agency-wide levels. Measures can also provide valuable information regarding the causes of inconsistent or unacceptable performance. Outcome and performance data that will be used to evaluate implementation should be clearly defined and periodically collected, reviewed, and disseminated by the agency. In addition to measuring overall agency performance, the practice model's design should include a plan for collecting, reviewing, and giving feedback around fidelity measures to ensure that the practice model's components are being implemented as intended. The development of fidelity measures also helps determine the practice model's effectiveness in producing positive outcomes for children and families by helping establish the link between the practice model and changes in outcomes.

Practice Profiles and Guides

A practice model is more than a statement of the agency's values, beliefs, and policies. It is a set of actual behaviors that staff should exhibit in their work with children and families that reflect the practice model's underlying principles. The behaviors must be doable, observable, well-defined, and measurable. Practice profiles define the essential functions of the model with operational definitions of those functions and expected behaviors in carrying out the functions.

As an example, a practice model may include an emphasis on individualizing services to children and families, but there must be a clear definition of what individualizing looks like in actual practice and how social workers carry out that work with children and families. In this example, one behavior associated with individualizing might be that the social worker actively consults with the family about the types and levels of services they need. From defining the expected behaviors, practice profiles can indicate practices in this area that are optimal, acceptable, or not acceptable.

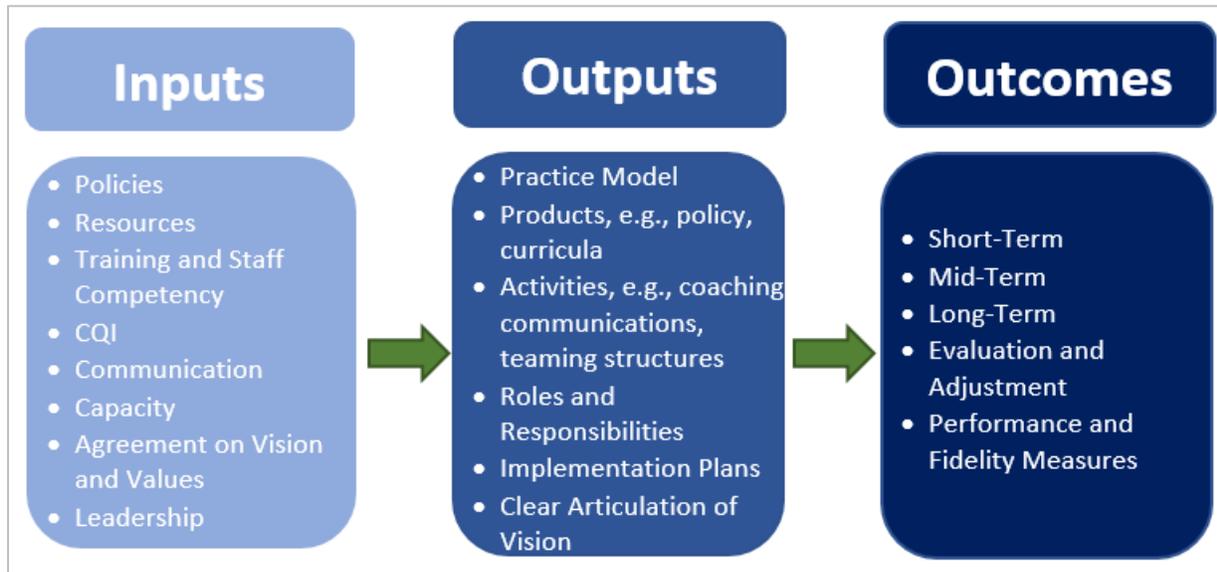
Practice profiles or guides define both the "what" and the "how" of a practice model for child welfare staff. Practice profiles also support consistency in practice and are the basis for developing measures of fidelity to the practice model. To be effective, practice profiles must be closely aligned with the fidelity measures designed for the model, which can influence supervision, training, and coaching activities with staff.⁶

Gap Analysis and Implementation Planning

After doing the design work for a practice model, an agency should prepare for implementation and ensure that it has the capacity to implement successfully. The preparation phase includes an analysis of current policies, statutes, practices, and training, and the extent to which they are consistent with the new practice model design. The analysis should also identify resources, such as staffing, supervision, leadership, and communication approaches that are in place or needed

⁶ Metz, A., Bartley, L., Blasé, K., & Fixsen, D. National Implementation Research Network. (October 2011). *Developing Practice Profiles*.

to support the practice model. Using a logic model approach may provide an effective framework for the analysis and for the foundation of a practice model implementation plan, as illustrated below. This approach will identify needed inputs for successful implementation, including those that currently exist, must be modified, or must be added.



In addition to inputs, the expected outputs in the preparation phase may include clear delineation of staff, supervisor, and leadership roles and responsibilities, new training curricula or revised policies, and a clear statement of the agency's vision and values for the practice model. In *Implementing Practice Models*, child welfare leaders with experience in implementing statewide practice models noted that it can take several years to fully integrate a new practice model into everyday practice.⁷ Therefore, it is important that both the gap analysis and implementation plans reflect the time needed to build or strengthen the critical implementation drivers noted in the logic model, such as staff competency, leadership skills, and general capacity for implementation, and to integrate the model's practices, vision, and values into the thinking and activities of staff in the field.

Readiness for Change

A necessary precondition for undertaking program improvement activities through the adoption or adaptation of a practice model is that an organization be "ready" for the change. Readiness for the change required by the implementation of a practice model is key to whether the change needed to achieve desired results will take hold successfully and be sustainable or fail. Readiness can be illustrated as follows:

$$R=MC^2: \text{Readiness} = \text{Motivation} \times \text{General Capacity and Intervention-specific Capacity}^8$$

⁷ National Child Welfare Resource Center for Organizational Improvement, *Implementing Practice Models*, Child Welfare Matters, Summer-Fall 2011, University of Southern Maine. Retrieved from <http://muskie.usm.maine.edu/helpkids/rcpdfs/cwmatters11.pdf>

⁸ Dymnicki, A., Wandersman, A., Osher, D., Grigorescu, V., & Huang, L. (2014). *Willing, able → ready: Basics and policy implications of readiness as a key component for implementation of evidence based practices*. ASPE Issue Brief, Office of the Assistant Secretary for Planning and

According to Dymnicki et al, “readiness refers to the extent to which an organization is both willing and able to implement a particular practice,”⁹ meaning that staff and the organization can make the adjustments required. Central to readiness is agency decision makers’ commitment to plan and implement a practice model, which requires major system change.¹⁰

Some strategies for building readiness include the following:¹¹

- ◆ Assemble an implementation team with broad representation;
- ◆ Cultivate a sense of commitment to the change throughout the organization;
- ◆ Develop champions internally and externally including those with authority and those most impacted by the practice model;
- ◆ Learn from others who have implemented a practice model;
- ◆ Determine the staff capacity required and develop a plan to adjust staff numbers and job functions accordingly; and
- ◆ Develop messaging and a plan for communicating the message.

Implementation and Sustainability

Initial implementation on a limited scale, while monitoring, assessing progress, and adjusting for corrections in the practice model itself, or the implementation process, will guide efforts later to bring the model to scale during full implementation. During initial implementation, the fear of change and the agency’s and staff’s investment in current practices may present tremendous challenges to the success of the implementation. Some attempts to implement major changes may end during initial implementation.¹² It is, therefore, important to be guided by the agency’s capacity and readiness for change.

A commonly observed error in implementation occurs when an agency equates “implementation” with “training.” For example, some agencies will say that an initiative has been implemented based on staff’s having received training and directives to engage in the new practice. When subsequent practice in the field does not align with practice model expectations and outcomes do not reflect a change in practice, it is no surprise that “implementation” has not really occurred.

For effective implementation and sustainability of a new practice model, there should be a strong focus on application of the skills and practices in the model to daily work with children and

Evaluation, Office of Human Services Policy, United States Department of Health and Human Services. Retrieved from https://aspe.hhs.gov/system/files/pdf/77076/ib_Readiness.pdf

⁹ *ibid*

¹⁰ McCarthy, Jan, *Guide for Developing and Implementing Child Welfare Practice Models (2012)*: National Child Welfare Resource Center for Organizational Improvement.

¹¹ McCarthy 2012.

¹² Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M. & Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National Implementation Research Network (FMHI Publication #231). Retrieved from <http://nirn.fpg.unc.edu/sites/nirn.fpg.unc.edu/files/resources/NIRN-MonographFull-01-2005.pdf>

families and integration of the model into related agency activities. This process can be strengthened in the following ways:

- ◆ Through the development and use of practice profiles or guides, detailing the “how-to” of implementing the practice model.¹³
- ◆ Through the use of coaching in the application of the new practice skills and providing feedback to practitioners,¹⁴ including integration of training and coaching of new hires in the agency.
- ◆ Through the development and use of fidelity measures reflecting the practices in the model, and providing staff with feedback on whether their observed practice aligns with practice model expectations.¹⁵
- ◆ Testing and modification of fidelity tools and other implementation tools.
- ◆ Monitoring and feedback on key performance indicators and outcomes.
- ◆ Reinforcement of core values and practices through continuous quality improvement activities (CQI). CSF believes that sustainability of a practice model is best ensured by being continually reinforced by its CQI structure. CQI is most effective when it serves as a vehicle by which all components of a child welfare system have a clear understanding of the agency’s vision and expectations to its adherence of the practice model.

Implementation of a practice model may not always be a linear process. When teams are in place to monitor and evaluate implementation data, it may become clear from time to time that there is a need, for example, to re-visit design strategies or re-evaluate fidelity measures or levels of coaching support needed.

CSF partners with child welfare agencies to structure implementation and sustainability strategies so that the agency is consistently able to improve its practice as needed to achieve better outcomes for children and families.

¹³ Metz, A., Bartley, L., Blasé, K., & Fixsen, D. National Implementation Research Network. (October 2011). *Developing Practice Profiles*.

¹⁴ Permanency Innovations Initiative Training and Technical Assistance Project. (2016). *Providing technical assistance to build implementation capacity in child welfare: A manual based on the development, implementation, and assessment approach*. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/pii_providing_ta_build_imp_capacity.pdf

¹⁵ Permanency Innovations Initiative Training and Technical Assistance Project. (2016). *Guide to developing, implementing, and assessing an innovation*. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau.