

THE INTEGRATION OF SERVICES TRAINING SERIES

MODULE 5: SERVICE INTEGRATION AND COLLABORATION

SESSION 2: WHAT IT TAKES: THE WORKER'S ROLE IN COLLABORATION AND FAMILY CENTERED PRACTICE

SLIDE 2-1: SESSION TITLE SLIDE

Session 2: Objectives

- Identify practices and competencies to implement collaborative, family centered practice.
- Review of the Practice Wheel.
- Develop Strategies for Partnership and Collaboration across the Practice Wheel.
- Identify the role of the worker in helping families become independent and functional after our intervention.

Summarize:


- The second session of the day helps us move into a new era of family centered practice.
- New practices are geared towards blending what has worked in the past with new practices that increase family ownership and voice in planning while continuing to emphasize safety, permanency, and well-being.
- Integrating natural and community supports strengthens the probability of long term family success with recovery.
- This session reinforces the workers' role to assist families through the recovery process and help them make and sustain the necessary changes to keep their children safe.

Participant Guide Module 5, p. 16

SLIDE 2-2: PROGRESSION OF TEAMING

Progression of Teaming

- Where are you in your practice?
- Where is the local system?



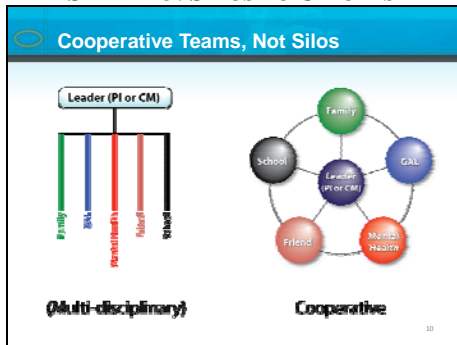
Summarize:

- I'd like you to take a look at the handout on page 16- Progression of Teaming- in your participant guide.
- Take a glance through this chart that outlines some ways to conceptualize the progress we have made and are trying to continue to make in moving from traditional, agency driven and directive work with families to family centered and family driven planning in partnership with the agency and community.
- Take a minute to circle the box where you think your own system of care currently operates.
- During system change, a "dance" occurs between system requirements and the workers attempt to change their personal practices. The system must allow workers to do something new, and staff must be willing to try to do something new. In effective system change, the workers and system push one another to make the changes needed.

Say:

We will return to this chart and these concepts later on in this module as we think about how the people in this room can serve as systems change agents. For now, let's think together about the role you play in helping families move towards being able to use their voice while effectively and safely addressing the issues and needs that brought them to the attention of the child welfare system.

SLIDE 2-3: SILOS TO CIRCLES



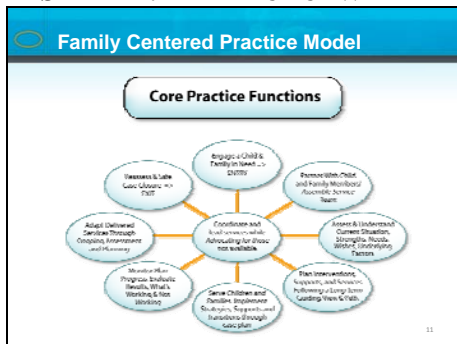
Ask:

As you look at this slide, what do you see?

If this was a scale, and the 'Silos' were rated a '1' and the circle were a '10', where would you rate your current practice on that scale?

What accounts for the move up from one (if there was one), and what do you think it will take to keep moving up (if we are not at a ten)?

SLIDE 2-4: THE PRACTICE WHEEL



Say:

- *In the recent past, we have struggled as a field to identify how we should work with families. At times, in our history, we have viewed our role as agents to remove children and replace parents as guardian. At other times, we have tried to make a family preservation model work. The pendulum is ever swinging in our field.*
- *What we do know is that there is not a magic cure for every child or every family involved in our system.*
- *There are times when children must be removed to save their lives. However, it is now apparent that removal of children from their families can have a negative emotional impact and may compromise their long term health and personal/social functioning.*
- *Because of this growing appreciation of the dilemma- the idea that either action we take has elements of safety and of harm, we have come to think more deeply about how we can preserve the positive aspects of family connection and life while helping families make change and be safe.*
- *The chart on page 5 in your participant guide outlines some of the themes that have shifted over time in our work.*

**Participant Guide
Module 5, p. 5**

TRADITIONAL TO FAMILY CENTERED PRACTICE

Briefly review the handout: Comparison of Traditional to Family Centered Welfare.

- As you can see, the philosophical shift to protect children through a family centered approach reflects a growing awareness that working with individuals in programmatic silos who direct families has limited impact. In response, we have found that sustainable safety and well-being is better achieved through teams.
- This handout is a resource to challenge ourselves to build on what is in place and to envision some new practices as we move forward.
- Using our practice wheel, we are going to explore how the role of the worker needs to look in order to effectively realize this vision.

PRACTICE WHEEL AND DESCRIPTION OF CORE PRACTICE FUNCTIONS

**Participant Guide
Module 5, p. 6**

**Participant Guide
Module 5, p. 7**

Summarize:

The practice wheel (page 6 in the participant guide) and the description of core practice functions (page 7 in the participant guide) has been introduced in the family centered practice series.

TRAINER NOTE

Depending on whether or not the family centered practice wheel and core practice functions have been covered in previous trainings, the trainer will need to determine whether a brief review of this material is necessary or whether it needs to be introduced.

Materials:
Participant Guide Worksheets
Flipchart paper

**Participant Guide
Module 5, p. 11**

**ACTIVITY 2-1: Working the Practice Wheel:
A Case Example**

PURPOSE: To apply the practice wheel core functions to a real case, and to identify opportunities for advancing the principles of family centered practice in all phases of intervention with a family.

TIME: 20 minutes

DIRECTIONS:

Say:

- *In your participant guide, you will find a case study, “The Hill Family” on page 11. This case represents a de-identified family involved in the child welfare system in Florida. (Identifying information has been removed to protect confidentiality.)*



- *I am going to assign each of your groups of three to a phase of the work with this family. The phases are divided up in short narratives in your case study.*
- *Your assignment is to read the study, paying particular attention to your assigned phase, and to answer the questions on page 14- Working the Practice Wheel Part 1- of the participant guide related to advancing the principles of family centered practice through the functions of practice in the practice wheel.*
- *You will answer the questions in your group, record your answers on a poster, then you will report out to the groups as a whole:*

Step 1:

- Assign each group a topic and give them a piece of flipchart paper for notation.
 - Intake
 - Verification and Entry into Diversion Program
 - Repeated allegation of maltreatment and entry into adjudication: in home supervision
 - Six month case review
 - Permanency Hearing
 - Case Closure

Step 2:

Tell the small groups that they will be generating ideas as to what the worker can do to integrate services and promote family centered practice during their ‘phase’ of work in practice.

Step 3:

Note that often we are using multiple practice functions while working in any given phase of the case and family movement through the system: for example, engagement is ongoing, etc.

Step 4:

Have groups identify a reporter to report their final list of ideas.

Step 5:

Remind the groups to include the family and family informal supports in their ideas about collaboration.

Process:

Allow groups to report out and emphasize or add the following:

- Family voice and inclusion is critical to effective integration.
- Shared understanding increases information available, especially in assessment, and monitoring services increases family chances for success.
- Ownership of the team by the family increases the chance of success.

SUMMARY: PROGRESSION OF TEAMING

Summarize:

- It is clear from our activity that this group has many ideas about how to build up family involvement in crafting effective plans and about how to utilize services and supports to help the family, in this case the Hills, move towards safety, permanency, and well-being for the children.
- We know that thinking about the opportunities that we have to build family centered practices into our everyday work is sometimes easier than actually doing it. We also know it will take time and effort at different levels of the organization to really get to that point where we are fully able to implement family centered practice.

SLIDE 2-4: TEACH A MAN TO FISH...



Say:

- *As our activity shows, the worker's role in every phase of the case and casework affords us an opportunity to expand integration and collaboration with formal and informal supports to the family.*
- *This is clearly one major step involving changes we are trying to make in child welfare, but that's not all.*
- *I would like you to think about the quote, "Give a man a fish, he eats for a day, Teach a man to fish, he eats for a lifetime".*

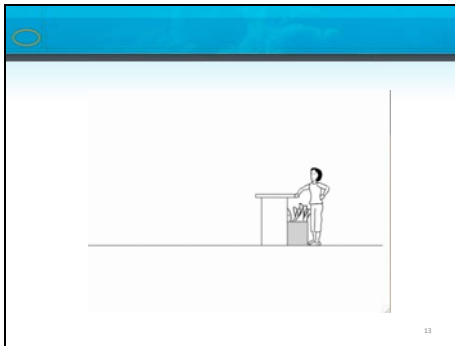
Ask:

What do you think this phrase means?

- Families become more resourceful.
- They know how to manage their condition.
- They know what their children need.
- They know how to provide for the needs of their children.

How has this phrase been applied in child welfare practice?

SLIDE 2-5: TEACH A MAN TO FISH, CONT.



Summarize:

- Validate that as helping professionals we sometimes hand out fish that we know families need, and sometimes we hand out fish and certificates for fish as we aren't sure what else we can do to be helpful.
- Handing out a fish can be a useful way to meet a families' urgent and basic need in the beginning of our work with them, such as resources to prevent becoming homeless.
- When we consider what we might do to help families become more resourceful and knowledgeable about managing the conditions in their lives such as trauma, mental illness, substance abuse, and domestic violence, we use our own knowledge and skills to engage in conversations that will help families begin to identify their own solutions.

Ask:

What happens to our own attitude over time, as we continuously help, or 'hand out fish', and see before us a long or never ending line of people, waiting for fish?

Summarize and include key points:

- It is easy to get burned out, or frustrated with the seemingly never ending needs of families we work with.
- When people ask for more and more, although I came into this field to help, I sometimes find that I resent being asked for so much.
- These feelings are made worse when I see that I may not have the tools or resources to really meet that underlying need for families and children.

SLIDE 2-6: TEACH A MAN TO FISH, CONT.



Say:

- *A common challenge in child welfare is that we want to help children and families, but the issues that families face can be as overwhelming to us as they are to our families.*
- *Sometimes our system's response, the expectation that families "comply" with many "services" that families may or may not really feel are going to be helpful, can be discouraging to families and their frustration may be directed at the case worker.*

- *The case worker feels increasingly discouraged that families don't appreciate or want help; the relationship between the caseworker and the family may become strained and counterproductive.*
- *With some of our families, these dynamics are not present and these successes keep us motivated to keep up the effort with other families.*
- *When the frustrations begin to exist with more families than not, we lose a lot of workers in child welfare.*

Ask:

Have you ever felt this way in your work?

Say:

- *Sometimes this resentment keeps us from being effective in our 'teaching' or capacity building role.*
- *We may struggle with individualizing the plans or work with do with families when we are feeling this way which shows by labeling (oh, she's just another one of those druggie moms, he's a perp, etc.) and by cookie cutter planning (cut and paste).*
- *We may come to overuse our power and become super-directive and confrontational with families, although we know in our hearts that this is not conducive to engagement.*

Ask:

What changed to rejuvenate you or make you feel more like you can and want to keep doing the work?

Summarize:

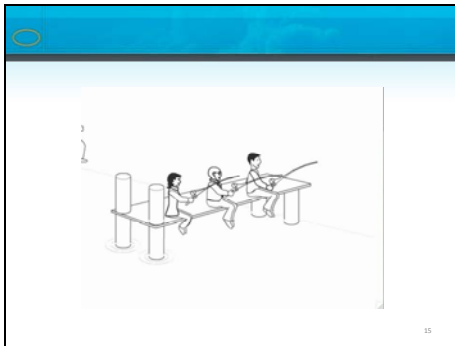
- *Families, in and of themselves, are often what rejuvenates us. Seeing a family succeed can keep us going a long time.*
- *Peers, supervisors, and colleagues rejuvenate us by reminding us of our mission and our efficacy.*
- *I bet it was not from being labeled or confronted and directed out of that phase.*

Say:

This is the same for families. The aspects of their conditions that make them want to give up, that create conflict and dysfunction, can be helped by the same two things:

- ***Remembering their efficacy or strengths and competence.***

SLIDE 2-8: TEACH A MAN TO FISH,
CONT.



- Having a **support system** that carries them through moments of anger or despair.

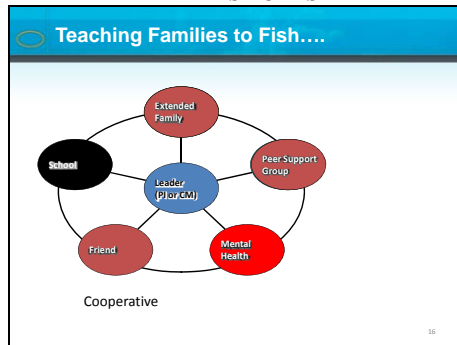
Say:

- In terms of using an integrated and collaborative process, teaching families to ‘fish’, or to safely live together and to provide permanency and well-being for each other is both an old expectation and one filled with new nuances.
- The families we serve are complex with more than one issue.
- They have been living with, struggling with, and at times succeeding with their particular complexities for a long time.
- We are unlikely to ‘cure’ the underlying conditions in 10 months, but we can help the family become its own ‘case manager’ through our interventions.

Say:

- First, we have to **move from the silo mentality** where the work with the family is solely agency driven (We know what you need and we’re gonna make you a list....if you comply you get to exit the system with your children”.
- Second, we have to figure out how to **craft a plan that honors the family view and preferences**. This is where engagement comes in. We have learned that no matter how much of an expert I am, the family holds and knows information about themselves and their patterns that can make or break my beautiful plan.
- This involves **enrolling allies that can support us and the family in assessment, planning, monitoring, and adjusting**. The family cannot solve the problems alone, and neither can we.
- Third, we have to **leverage an integrated approach so that the plan addresses the issues that kept the children unsafe**, with the understanding that we are constantly assessing, monitoring, and adjusting our interventions to fit the family strengths and needs and to address emerging factors. This will get us through the case process, but it is still not enough.

**SLIDE 2-9: TEAMING TO TEACH
FAMILIES TO FISH**



Say:

- *The ultimate success in our field is supporting the family to become their own case manager.*
- *Whether you have a formal teaming model, putting the family in a situation where they have the right interventions and supports is critical. As an Investigator or DCM, you have that role, particularly in the beginning of the casework when the family is entering the system and quite possibly resistant or reluctant to fully and openly participate in the change process.*
- *Our goal over time is to help the family step into a leadership role and integrate their own services and supports in a way that maintains the changes made during our intervention.*

Ask the group:

Who here has an example of a family that really took over their own plan and has exited our system with the ability to manage future challenges, relapse, episodes of mental illness, etc.?

Ask for examples and build on the key points of this section of the session.

Summarize:

- The worker role here is crucial. Even from the first knock on the door, we are the experts in what we know.
- Our expertise lies in screening and identifying the core issues that are preventing full functioning in a family and thereby leaving children unsafe.
- As we bring our expertise into play, we continuously enlist new assets and resources that will eventually assist the family in learning to manage their conditions and situations without child welfare system intervention.
- As we exit the life of the child and family, our assessment role is crucial: we identify whether the family has developed the capacity to use their services and supports to safely care for their children.
- If so, we leave them in charge of their 'team'.
- If not, we craft a team around children that will give them the supports and services to thrive with an alternate permanency plan.

TRANSITION

In our next section, we are going to drill down and get very specific about the unique factors within the four conditions addressed in this series and how these factors and conditions can drive service planning and integration for children and families.