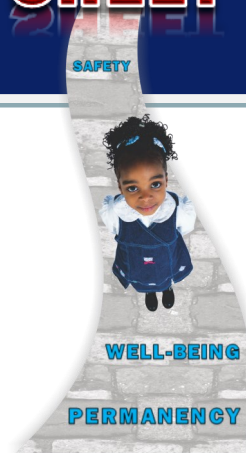


## Involve Stakeholders in the Permanency Process



When it comes to safety, permanency, and well-being, the easily recognized quote, “It Takes a Village to Raise a Child,” provides an accurate description of the type of effort that is needed to support children as they enter and eventually exit the child welfare system. In the child welfare systems, support should come from an array of internal and external stakeholders. Internal stakeholders include child welfare staff from across all areas of the agency’s scope of work (CPS, foster care, adoption, post permanency). External stakeholders include community partners, service providers, mental health professionals, and educational partners. Involving all of these stakeholders in the planning and implementation of service delivery strengthens the support systems for children and families and helps to promote permanency outcomes. Summarized below are strategies child welfare agencies can consider to strengthen their approach on how stakeholders are interwoven into practice:

### Internal Stakeholder Involvement

Three strategies to involve internal stakeholders in a manner that promotes the achievement of permanency include: (1) creation of a continuum of care, (2) warm handoff, and (3) continuous collection of information regarding children and families.

### Creation of a Continuum of Care

While there are benefits to having staff develop competencies in the specific areas of their work (child protection, in-home, foster care, adoption), there needs to be a balance between specialization and integration of knowledge outside workers’ specific area of focus. Child welfare agencies by design often create silos. To create a continuum of care that follows a case from entry to exit, child welfare agencies must be intentional in developing practices that are more integrated in their approach. Listed below are a few examples of approaches that can help systems move to a more integrated approach:

- **Paired Teams:** This approach is used by Larimer County Department of Human Services Children Youth and Families Division, Colorado. Each team includes an Intake, Family Assessment Response and Ongoing caseworkers. The paired team structure is a one-family, one-team approach, with a six-to-one caseworker-to-supervisor ratio, which ensures returning cases are assigned to the same team. Use of teaming approaches in child welfare practice allows expertise from many areas of the agency to inform decision making that leads to a more comprehensive approach and case planning. *American Public Human Services Association’s Information* about Paired Teams can be found at: <http://www.ppcwg.org/images/files/Innovative%20Practices%20in%20Child%20Welfare%202012.pdf>
- **R.E.D. Team:** This Team is a differential response approach that uses an internal decision making process, referred to as the “Consultation and Information Sharing Framework,” to respond to allegations of child maltreatment. The team consists of caseworkers and supervisors from various departments within the agency, who work together to gather, organize, and analyze information and make critical decisions about the appropriate level of intervention needed for each family. Decisions are based on the collective expertise of the team as opposed to being limited to the knowledge and experience of one worker. The District of Columbia utilizes R.E.D. teams not only when cases initially enter care but also throughout the life of the case to ensure key internal staff review the case and strategize on moving the case toward permanency. A facilitator assists team members in accessing information such as known family members, the detail of current and past incident(s) of



child welfare involvement, and strengths and needs of the family. This information is then evaluated and informs case planning and shared decision making. Information on *R.E.D. Teams* can be found at: <http://www.americanhumane.org/assets/pdfs/children/differential-response/the-red-team.pdf>

- **Continuum of Care Training Model:** Since March 2014, child welfare professionals in Michigan have been trained in all areas of agency practice, not just in their specific area of expertise. The *Continuum of Care Training Model* was developed based upon the state's recognition that having more knowledge in all areas of service delivery (CPS, foster care, adoption), better equipped their staff to address both the immediate concerns and the long-term needs of the system. This restructuring of initial training did not add significant hours to staff training. Workers receive in-depth training in the areas they are assigned and are provided with enough information in other areas of practice to comprehend how their roles impact families as they move through the system. As a result of this new approach, workers are developing relationships and interacting with other agency across silos. Staff are better able to see the gaps in services, which has led to increased utilization of existing programs across delivery areas. Workers are asking themselves and families different questions than they have in the past, leading to better overall decision making. Outcome data is expected to show many positive impacts, including reduction in adoption dissolution rates and decreased staff turnover. For more information, contact Ivana Maplanka at: [MaplankaI@michigan.gov](mailto:MaplankaI@michigan.gov)

### Warm Handoff

Preventing the loss of valuable information during the case transfer process is a critical component to creating a strong foundation for permanency. Typically, when a case transfer occurs, the “launching” worker completes some type of transfer summary, which the “receiving” worker reviews prior to engaging with the families. Although this process attempts to ensure that critical information is passed along to avoid delays in case planning, what often does not transfer are the more subtle but significant perspectives from the “launching” worker. This could include effective ways to engage the children or families, relationship stressors that exist among family members, and trust issues that have arisen between the agencies and families.

A “warm handoff” is a term used to describe the transfer of responsibility from one professional to another in a way that avoids disruption in service, promotes timely decision making, and enhances continuity of care. This type of

handoff entails direct conversation between the workers along with the collaborative review of material. Although there are times that this type of direct contact may not be possible, child welfare agencies need to set up processes that promote and enforce the need for warm handoffs to occur. Similar to exit interviews that agencies complete when staff are leaving, warm handoffs provide opportunities for critical information to be shared that would likely be lost in a paper process. This type of handoff is critical during any transition but is even more important when cases are transferring to different units (protective services to follow up, in-home to follow up, or follow up to adoption).

One example of a warm handoff is the *Integrated Behavioral Health Project* (IBHP). The IBHP initiative supports integration of behavioral health services and primary care in California. The primary care provider directly introduces the client to the behavioral health provider at the time of the client's medical visit. The introduction establishes an initial face-to-face contact and helps ensure that the next appointment will be kept. More information about this initiative can be found at: <http://www.ibhp.org/?section=pages&cid=122>

Another example of a warm handoff model is *Bridging the Gap*. This practice, which originated in northern Virginia, connects birth parents with foster parents when children enter foster care. The practice promotes sharing of information and encourages the development of relationships between foster parents and birth families. More information about *Bridging the Gap* can be found at: <https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewarticles&issueid=112&sectionid=1&articleid=2757>

### Continuous Collection of Information Regarding Children and Families

There are key times in the life of a case that critical information is available. When children and families first come to the attention of child welfare systems, there are unique opportunities to collect information from birth families that may be difficult to obtain in the future. In order to obtain this information, processes need to be implemented that require “first responders” to collect more than the basic information related to safety. First responders need to understand their vital role in collecting information (medical history of family members, anxieties/fears of children, educational issues, key relationships within the community, extended family members) that can help to build a foundation for permanency, regardless of the goal. Another key time to collect critical information is placement moves. Every placement offers critical information about the strengths, needs, and issues of children that if obtained can be utilized to inform the next placement and ensure the proper services and supports are in place.

Furthermore, there are nuggets of information in every placement that collectively build a comprehensive profile of children. In order to ensure that this information is systematically collected across the life of a case, agency culture must reinforce the need for continuous collection of information.

Pennsylvania provides one example of a system continuously collecting information. All children in custody with a goal of adoption must have a Child Profile. A Child Profile is a document that describes all known information about children from birth to the present day. The document is developed by caseworkers who conduct a comprehensive review of records, interview the children and available family members, and gather additional information that may not be part of the existing record. Among its many uses, the Child Profile assures that children entering permanent family relationships have a written history of their life. The Child Profile highlights strengths and possible risk areas to assist families in preparation of placements. While Pennsylvania's regulations do not require the completion of a Child Profile for children who don't have goals of adoption, many counties secure Child Profiles for all children in custody.

*Lifebooks* are also tools that are commonly used to assist children in recording factual information about their placement experiences as well as to memorialize and honor important people and relationships. Information gathering by all stakeholders, especially those involved early in the life of the case, is critical to supporting the Lifebook process by providing pictures, documents, and other information. Because Lifebooks can be lost in transitions, copies of pictures and important documents should be made. Pennsylvania has encouraged programs to create digital copies of Lifebooks that are kept in the children's records. Protections should be in place to ensure that Lifebooks are kept private. Additional information on *Lifebooks* can be found at: <https://www.childwelfare.gov/adoption/postplacement/lifebooks.cfm>

### External Stakeholder Involvement

All children and families involved with the child welfare system are involved with multiple systems (schools, day care, health care, TANF, WIC, etc.). These external systems have critical information about children, which can be used to support their trajectory toward permanency. Identifying and engaging critical external stakeholders helps to ensure a more comprehensive view of children is obtained and that a comprehensive service array is in place to meet all of their needs. If properly engaged early in a case, these stakeholders can be

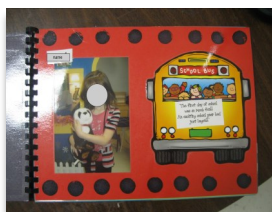
groomed to provide ongoing supports that can continue after permanency is obtained. Two strategies to involve external stakeholders include: (1) collaboration with interdisciplinary groups to support the permanency trajectory for the children, and (2) understanding the critical information needed to support permanency.

Child welfare agencies are sometimes reluctant to include external stakeholders in teaming approaches. Although there are legitimate concerns regarding confidentiality and the fact that child welfare agencies ultimately are responsible for the safety of children in custody, it is critical that child welfare agencies find innovative ways to engage external stakeholders. There have been many interdisciplinary team concepts developed over the years, but never has the time been more right than now to revisit and integrate these interdisciplinary approaches to serving children and families.

**Family Assessment Planning Team (FAPT):** This is a multi-disciplinary team consisting of mid-level managers from partnering organizations (schools, probation, mental health, human services, family advocate, and a FAPT coordinator), who meet weekly to assist families in keeping children safely at home or returning children home after an institutional placement. Additional information about FAPT can be obtained at: [http://collaboration.omni.org/sites/1451/CMP%20Documents/1451%20Case%20scenarios%20and%20Success%20stories/1451\\_Success\\_write\\_up\\_Larimer.pdf](http://collaboration.omni.org/sites/1451/CMP%20Documents/1451%20Case%20scenarios%20and%20Success%20stories/1451_Success_write_up_Larimer.pdf)

**Permanency Roundtable (PRT):** Casey Family Programs has supported the development of an “intervention designed to facilitate the permanency planning process by identifying realistic solutions to permanency obstacles for youth.” The Roundtable process includes both internal and external team members, who meet to explore barriers and develop child-specific plans to address the identified barriers. Although historically seen as a process for older youth struggling to achieve permanency, agencies should consider the use of PRTs with younger children to help expedite permanency and ensure services needs are met.

**Iowa Child and Family Services Stakeholder Panel:** The Department of Human Services Division of Child and Family Services and the Iowa Judicial Branch created a stakeholder panel to “provide meaningful and ongoing discussion and feedback about child welfare initiatives and programs. . . .” The panel supported activities and provided a venue for reviewing practice and methods in which stakeholders could assist children and families to achieve permanency. More information about the panel can be found at: <http://muskie.usm.maine.edu/helpkids/rcpdfs/CharterIowaChildandFamilyServicesStakeholderPanel.pdf>



**Administrative Office of Pennsylvania Courts:**

Pennsylvania's Court Improvement Program is guided through a three-tiered structure known as the *Children's Roundtable Initiative*. The three tiers include local Children's Roundtables in each of the 60 judicial districts, seven statewide Leadership Roundtables, and one State Roundtable. Pennsylvania uses the Roundtable Model to guide the flow of dependency practice and the collaboration between the Dependency Courts, Office of Children and Families in the Courts, the Department of Public Welfare's Office of Children, Youth and Families, and other relevant stakeholders. More information about this Initiative can be found at:

<http://www.ocfcpacourts.us/childrens-roundtable-initiative/permanency-practice-initiatives>

**Conclusion**

In the mental health field, the systems of care model has outlined a "framework that involves collaboration across agencies, families, and children for the purpose of improving access and expanding the array of coordinated community-based, culturally- and linguistically-competent services and supports for children with a serious emotional disturbance and their families." In the child welfare field, creating an environment of collaboration with internal and external stakeholders is critical to achieving and supporting legal and relational permanency for children.

*National Resource Center for Adoption, Permanency Support and Preservation Model, 2014.  
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