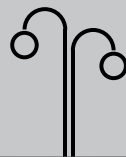
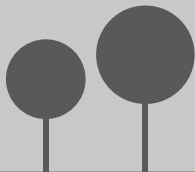




**SOCIAL SERVICES ADMINISTRATION
MARYLAND DEPARTMENT OF HUMAN SERVICES**

Integrated Practice Model For Child Welfare and Adult Services

A Framework for Maryland's Human Services Workforce



JANUARY 2019

A practice model is a framework for the overall approach to child welfare and adult services. It includes the vision, values, principles, and core intervention components and skills necessary to achieve intended outcomes for and with children, youth, families, and vulnerable adults.

Adapted from McCarthy, J. (2012). Guide for developing and implementing child welfare practice models. Available from the University of Southern Maine Muskie School of Public Service: <http://muskie.usm.maine.edu>

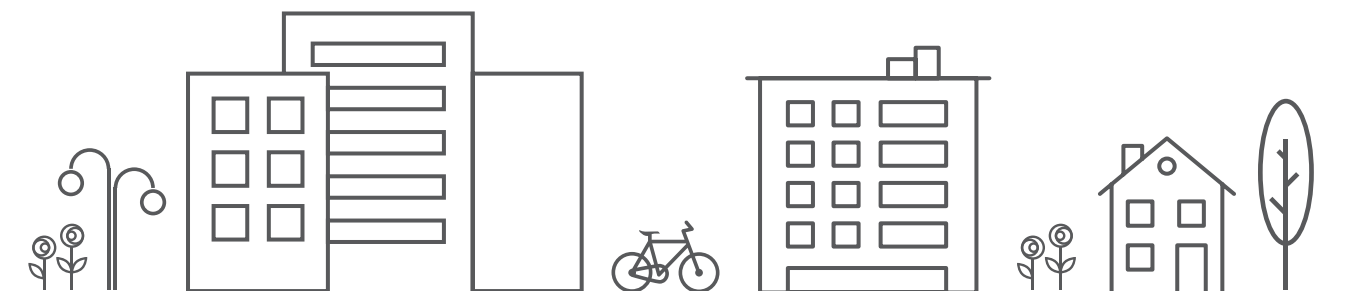


Table of Contents

Letter from the Executive Director.....	2
Overview of our SSA Integrated Practice Model.....	3
Our Strategic Vision.....	4
Our Practice Model Framework.....	5
Figure 1: The Integrated Practice Model Key.....	5
Our Guiding Values, Principles & Practices.....	6
Our Values.....	6
Our Practice Principles.....	6
Table 1: SSA Practice Principles in Action.....	6
Our Core Practices.....	8
Figure 2: SSA Core Practices.....	8
Families Blossom☀Place Matters House.....	9
Voices of Experience Quotes.....	10
Our Principles Put Into Practice.....	11
We ENGAGE.....	11
Table 2: IPM Behavioral Examples for ENGAGE.....	11
We TEAM.....	13
Table 3: IPM Behavioral Examples for TEAM.....	13
We ASSESS.....	15
Table 4: IPM Behavioral Examples for ASSESS.....	15
We PLAN.....	17
Table 5: IPM Behavioral Examples for PLAN.....	17
We INTERVENE.....	19
Table 6: IPM Behavioral Examples for INTERVENE.....	19
We MONITOR & ADAPT.....	21
Table 7: IPM Behavioral Examples for MONITOR & ADAPT.....	21
We PLAN FOR TRANSITION.....	23
Table 8: IPM Behavioral Examples for TRANSITION.....	23
Supervisory & Administrative Leadership Behaviors.....	25
Table 9: IPM Behavioral Examples for Supervisors and Administrators.....	25
Conclusion.....	30

Letter from the Executive Director

Maryland's child- and family-serving systems have been evolving for more than two decades. We have grown and enhanced local services and supports to be evidence-based and evidence-informed, high quality, accessible, and culturally and linguistically responsive. We have increased our emphasis on serving children, youth, vulnerable adults, and families in their own homes and communities. We have prioritized collaborating with our partners and stakeholders to transform our system so that is trauma-responsive and better aligned with our shared values.

In 2007, the Department of Human Services embarked on a bold initiative, Place Matters, which, along with strategic efforts in Adult Services, has resulted in increasingly greater numbers of individuals and families being served in their homes and communities—while maintaining their safety—with better outcomes. These reforms provided the foundation in 2014 for Maryland to implement a Title IV-E Waiver Demonstration Project, known as Families Blossom*Place Matters. Leveraging the work of Place Matters and focused on preventing new and re-entries into out-of-home placement, Families Blossom*Place Matters has supported installation and implementation of locally-selected evidence-based and promising practices and increased use of meaningful assessments while improving how we do business with each other and with the individuals and families we support.

Today, we have an opportunity to go further, to build on our foundation, to support equity across our state.

This Integrated Practice Model (IPM) articulates our values, principles, and core practices and sets forth expectations for how we will work with children, youth, families, and vulnerable adults, as well as how we will work with each other and with our community and state partners. We want to ensure that every child, youth, family, and vulnerable adult we serve, regardless of jurisdiction, benefits from our shared values, principles, and core practices and has access to high-quality interventions and services in their homes and communities.

In the coming months and years, we will be providing training and coaching, supporting supervisors to support their workers, disseminating tools and materials to improve practice, and aligning all policies with this practice model. We will have a modernized management information system and the tools we need to use it effectively. We will infuse this model into everything we do so that it becomes the foundation for all our work across Maryland.

I hope that you will return to this document in the years to come so it can serve as a reference to ground your work. I thank you for your commitment to Maryland's children, youth, families, and vulnerable adults, and I challenge you to consider how you can grow and learn so that we can continue to improve the quality and effectiveness of what we do, in partnership with those we serve and support.

Best,



Rebecca Jones Gaston, MSW
Executive Director, Social Services Administration

Overview of our SSA Integrated Practice Model

The Maryland Department of Human Services (DHS) is the state's human service agency. Within DHS, the Social Services Administration (SSA) is responsible for helping families stay stable, safe and healthy and for protecting children, youth, and vulnerable adults from abuse and neglect. Twenty-four local departments of social services (LDSS) provide child welfare and adult services in collaboration with community members and organizations, children, youth, families, and vulnerable adults across Maryland.

In *Child Welfare Services*, we are committed to protecting children and youth from abuse, neglect, and maltreatment by: 1) maintaining them safely in their homes whenever possible and appropriate; 2) reducing repeat maltreatment and re-entry into foster care; 3) ensuring stability and timely, lasting, and positive permanency; and, 4) promoting their well-being.

In *Adult Services*, we are committed to protecting adults who are vulnerable due to advanced age or disability from abuse, neglect, self-neglect, and exploitation, and to promoting their safety, stability, and independence. We ensure that the personal dignity, quality of life, privacy, and right to make choices are preserved for all elderly individuals, adults with disabilities, and vulnerable adults. We work together to create environments where vulnerable adults can live safely within their community, in the least restrictive environment, with support, and without need for permanent involvement with Adult Services in their lives.

Together, the State and local jurisdictions strive to provide high quality services and supports facilitated by a consistent, integrated approach and practice model, known as the Integrated Practice Model (IPM). Our goal is to achieve better outcomes for those we serve.

Maryland's IPM is based on values of CARE: Collaboration, Advocacy, Respect and Empowerment. Through these values, we commit to:

COLLABORATING with children, youth, families, vulnerable adults and their community partners to ensure their safety and well-being while helping them better understand and address their adverse experiences and challenges;

ADVOCATING for services and supports that are evidence-based and informed and designed to help children, youth, families, and vulnerable adults achieve their goals;

RESPECTING each individual's unique experiences; and,

EMPOWERING professionals and the individuals and families we serve by building and strengthening their resiliency, self-sufficiency, stability, and lasting connections.

The IPM provides an integrated, individualized, and standardized approach for the work we do in both child welfare and adult services. This means that the children, youth, families, and vulnerable adults of Maryland can expect and count on high quality services regardless of where they live.

OUR STRATEGIC VISION

In 2014, DHS/SSA launched Families Blossom*Place Matters. Built on the successes of Place Matters, Families Blossom*Place Matters represents a coordinated, comprehensive set of agency-wide strategies aimed at improving the lives of Maryland families. The goals of Families Blossom*Place Matters are to:

1. Promote safe, reliable and effective practice through a strength-based, trauma-responsive practice model for child welfare and adult services.
2. Engage in a collaborative assessment process that is trauma-informed, culturally-responsive, and inclusive of formal and informal community partners.
3. Expand and align the array of services, resources, and evidence-based interventions available across child welfare and adult services based upon the assessed needs of children, families and vulnerable adults, to include additional resources aimed at preventing maltreatment and unnecessary out-of-home placements.
4. Invest in a safe, engaged and well-prepared professional workforce through training and other professional development including strong supervision and coaching.
5. Modernize SSA's information technology (IT) to ensure timely access to data and greater focus on agency, individual, and family outcomes.
6. Strengthen the state and local continuous quality improvement processes by creating useful data resources to monitor performance, using evidence to develop performance improvement strategies, and meaningfully engaging internal and external stakeholders.

Through these strategies, SSA intends to transform the social service system so that the children, youth, families, and vulnerable adults we serve and support are:

- Safe and free from maltreatment;
- Living in safe, supportive and stable families where they can grow and thrive;
- Healthy and resilient with lasting family connections;
- Able to access a full array of high quality services and supports that are designed to meet their needs; and
- Partnered with safe, engaged and well-prepared professionals that effectively collaborate with individuals and families to achieve positive and lasting results.

Our Practice Model Framework

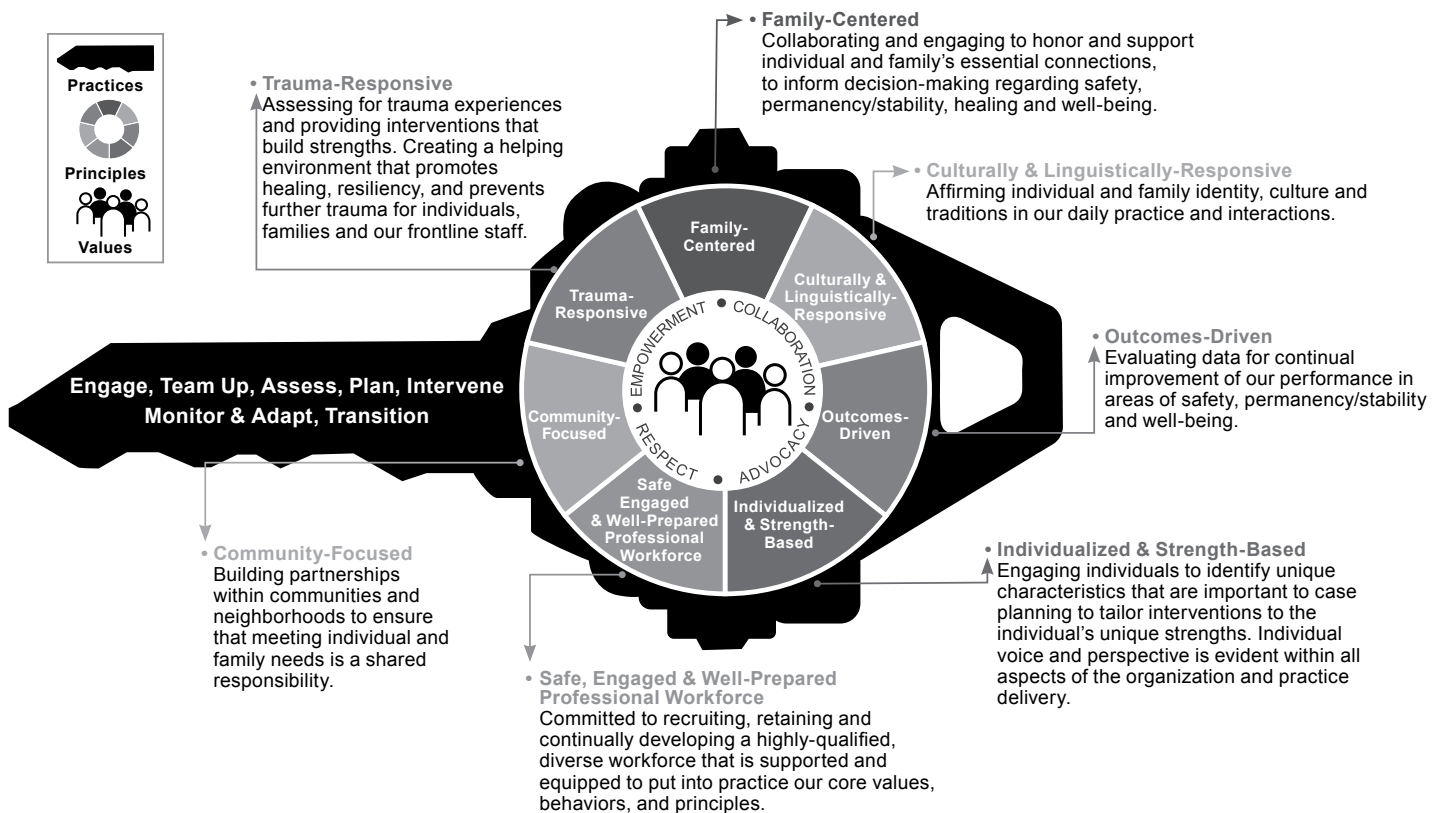
Rooted in family systems theory, systems of care values and principles, and trauma-responsive practice, the IPM aligns, unifies, and enhances Maryland's existing practice frameworks- Family-Centered Practice, Youth Matter, and Adult Services. Together, the values, guiding principles, and core practices nested within the IPM establish our philosophy and approach for partnering with children, youth, families, vulnerable adults, community partners and stakeholders.

The IPM (Figure 1) illustrates how our values, principles and core practices inform and guide our day-to-day communications, behaviors, interactions, and decisions

with children, youth, families, vulnerable adults, community partners, service providers, and colleagues - both within and outside the agency.

SSA and our local department partners are committed to embedding the IPM's values, principles, and core practices throughout our state and local organizations, beginning with our agency policies, training curricula, supervisory and coaching practices, continuous quality improvement processes, IT modernization, and personnel and resource recruitment strategies.

Figure 1: The Integrated Practice Model Key



Our Guiding Values, Principles & Practices

OUR VALUES

Our values are the fundamental beliefs that guide our work. They provide the basis for our behaviors and communications, daily interactions, and activities at individual and systems levels. We demonstrate these values through the words we use, the way we engage with others, the activities we prioritize, and how we respond to one another.

Collaboration - We recognize and honor the importance of building and strengthening relationships with families and communities as we work to promote safety, stability, permanency and well-being. Children, youth, families, and vulnerable adults are active partners in assessment, planning, and decision-making about themselves.

Advocacy - We support and elevate the opinions, voices, and strengths of children, youth, vulnerable adults and families in all levels of planning and decision-making. We value staff advocating for individuals and ensuring their rights are maintained or restored.

Respect - We affirm all individuals without imposing personal opinion or judgment. We value learning about each person's unique skills and talents, and support their expression of race, religion, ethnicity, culture, history, values, traditions, sexual orientation and gender expression and identity. We are responsive to language preferences.

Empowerment - We support self-expression and individual choices. We believe everyone has the ability to reach their full potential. We build on strengths and support children, youth, families, and vulnerable adults to achieve their own goals for themselves and their families.

OUR PRACTICE PRINCIPLES

Much like our values, our practice principles govern our work, relationships, actions, and decisions with children, youth, families, vulnerable adults and each other. These practice principles demonstrate our commitment to delivering best practices and improving safety, stability and well-being outcomes for children, youth, families, and vulnerable adults.

Table 1: SSA Practice Principles in Action

PRACTICE PRINCIPLES	PRINCIPLES IN ACTION
Family-Centered	<p>We believe families have shared power in planning and decision-making processes. Our planning and service delivery engages, strengthens, and supports the entire family unit, as defined by the family.</p> <p>We support children, youth, families and vulnerable adults to make informed decisions related to their own plan, services, and supports. They are full partners in all aspects of the planning and delivery of their own services and in the development and implementation of the policies and procedures that govern their services and support.</p>
Culturally & Linguistically-Responsive	<p>We affirm and seek to understand better the individual identities of children, youth, families, and vulnerable adults, as well as our colleagues and partners.</p> <p>We value people inclusive of their race; ethnic background; socio-economic status; sexual orientation, gender identity or gender expression; faith; national origin or immigration status; physical, developmental, or intellectual disability; behavioral health disorder; geography; or other characteristics; and, we seek to provide services that are responsive to these identities.</p> <p>We work to expand our awareness and understanding of institutional and personal bias, whether explicit or implicit. We use the chosen name and pronoun of the individuals with whom we are interacting.</p> <p>We commit to asking the individuals and groups that are most affected by our policies, services, and interventions to guide their development, implementation, and evaluation.</p>

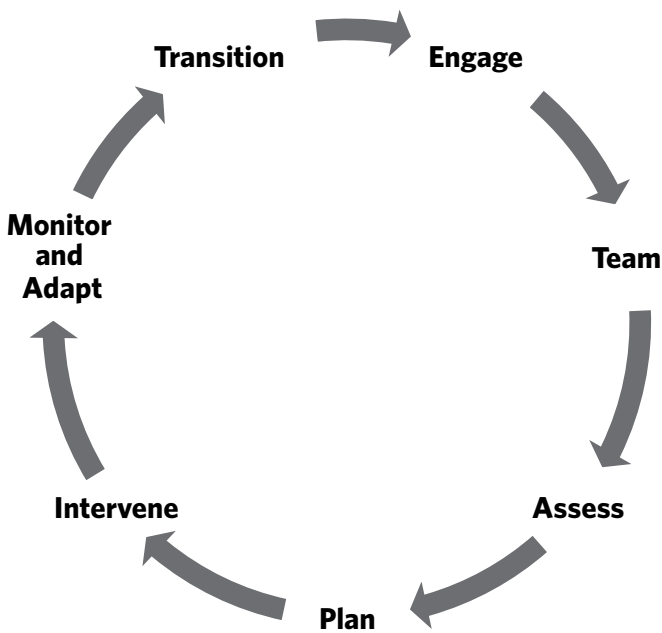
<p>Outcomes-Driven</p>	<p>We strive to continually improve our performance in ensuring safety, permanency, autonomy, and well-being of the children, youth, families, and vulnerable adults we serve and support.</p> <p>We identify immediate and long-term goals in partnership with the children, youth, families, and vulnerable adults and utilize a team process to refine those goals and ensure they are consistent with our shared values, specific, achievable, and able to leverage the desired result.</p> <p>We utilize services and interventions that are evidence-based or evidence-informed and continually track and analyze data to improve all of our practices and policies.</p> <p>We assess quality, effectiveness, and outcomes at the individual, organizational, and systems levels.</p> <p>We maintain a sense of urgency in our work because time is of the essence in the lives of children, youth, vulnerable adults and their families.</p>
<p>Individualized and Strength-Based</p>	<p>We provide developmentally appropriate services and supports for children, youth, families, and vulnerable adults, and work to ensure accessibility of a broad, flexible array of effective and quality home and community-based services and supports, both traditional and non-traditional.</p> <p>We build upon the strengths of the individual and family and address individualized needs across life domains. We create individualized plans that include services aligned with the unique strengths and needs of each member of the family and, developed in true partnership with the individual and family.</p> <p>We celebrate individual and family accomplishments and successes. We recognize that plans may fail -- but children, youth, families, and vulnerable adults do not fail.</p>
<p>Safe, Engaged and Well-Prepared Professional Workforce</p>	<p>We commit to a culture of safety and learning, thus we recruit, train, coach, and continually develop an engaged and highly-qualified workforce that embodies our values and principles.</p> <p>We believe professional development as an ongoing process built through learning, experience, and supervision that progressively strengthens individuals, teams and organizational capacity to provide quality services.</p>
<p>Community-Focused</p>	<p>We believe that communities hold a critical role in ensuring the safety and well-being of children, youth, families, and vulnerable adults.</p> <p>Community partnerships are essential to ensuring that services and interventions reflect and are responsive to the diverse needs of those we serve and are sustainable beyond the agency's formal involvement with the family.</p> <p>We are inclusive of both traditional and non-traditional home and community-based interventions within our service array and believe that services and supports should be delivered in the least restrictive, most normative environment that is clinically appropriate for safety, permanency, and well-being.</p> <p>Services and interventions should be delivered to prevent removal of children, youth, and vulnerable adults from their homes and communities whenever possible and appropriate and to support their successful transition back into their homes and communities.</p> <p>For older youth, services and supports should be delivered to support successful transition into adulthood, regardless of permanency plan.</p> <p>Services should be integrated across child- and family-serving systems as well as with neighborhood, faith-based, school-based, and other service delivery systems.</p>
<p>Trauma-Responsive</p>	<p>We recognize and respond to the impact of trauma experiences and traumatic stress on the individuals we serve and support and help our workforce understand its interaction with other experiences, such as culture, history, race, and gender, as well as the compounding impact of structural inequity.</p> <p>We continually assess for adverse and traumatic experiences. We respond to trauma reactions and behaviors by identifying interventions that build upon individual and family strengths and creating an environment that encourages healing, resiliency and prevents further trauma.</p> <p>We promote and maintain an environment and agency culture that addresses, minimizes, and treats secondary traumatic stress and increases staff wellness.</p>

These principles were informed by workgroups and stakeholder input as well from the Child Welfare Information Gateway's *Philosophy and Key Elements of Family-Centered Practice*, the National Child Traumatic Stress Network's *What's Sharing Power Got To Do With Trauma-Informed Practice and Creating Trauma-Informed Systems*, and Stroul, B., Blau, G., & Friedman, R. (2010). *Updating the System of Care Concept and Philosophy*.

OUR CORE PRACTICES

Our seven Core Practices (Figure 2) that make up our integrated approach to working with children, youth, vulnerable adults and families are essential to strong practice and achieving successful outcomes. Each is interrelated, occurring continually throughout a worker's involvement with the individual and their family. These practices, together with our values and principles, inform the day-to-day actions of staff, supervisors, and administrators. They assist the agency in the timely achievement of our collective goals and outcomes for safety, permanency, stability, and well-being.

Figure 2: SSA Core Practices



We Engage

We are best able to create a successful working relationship with the individuals and families we serve and support when we are honest, respectful, and empathic in our approach. Engagement begins at the first encounter and is assessed and maintained throughout the life of the working relationship.

We Team

We recognize that we cannot achieve safety, permanency, and well-being alone and that we are only able to achieve healing and restoration for children, youth, families, and vulnerable adults by working together with their identified supports, legal, and community partners.

We Assess

We assess and determine the individual's and family's strengths, needs, perspectives and goals through a continuous and collaborative process of gathering information from multiple sources.

We Plan

We partner with individuals and families to address their needs and goals and tailor plans that build upon their strengths and protective capacities. Plans are most effective when we come together often to assess and listen to each other, celebrate progress and successes, identify and eliminate barriers, and make adjustments based on changing needs, priorities, and information.

We Intervene

We intervene effectively when we encourage and actively assist individuals and families to obtain services and supports (formal and informal) that are individualized, evidence-based, and intended to achieve their goals for safety, permanency and well-being. Interventions promoting healing from trauma, reducing risks and nurturing strengths are identified in the assessment and team meetings.

We Monitor and Adapt

We meet with individuals and families individually and as a full team regularly to support progress towards achieving agreed upon goals, and to continually and collaboratively assess safety, well-being, and permanency, as well as the fit of services and interventions being provided, team composition, meeting frequency, and other needs that may arise. We ensure that all questions are addressed, information is shared in a clear and developmentally appropriate manner, successes are celebrated, and barriers to progress are resolved timely.

We Transition

While transition planning has traditionally referred to planning for discharge from services, we recognize that individuals and families within child welfare and adult services experience many types of transitions throughout their time spent with us. Transitions occur when individuals and families experience changes in workers and/or caregivers, achieve developmental milestones and when we transition out of providing direct services to them.

FAMILIES BLOSSOM | PLACE MATTERS

Maryland's Transformation of Child Welfare & Adult Services

Core values of collaboration, advocacy, respect and empowerment, and our family-centered, community-focused, strengths-based, trauma responsive practice



GOALS FOR MARYLAND'S CHILDREN, YOUTH, VULNERABLE ADULTS, FAMILIES AND OUR COMMUNITIES

Safe and free from maltreatment	Partnered with a safe, engaged, and well-prepared professional workforce that effectively collaborates with individuals and families to achieve positive and lasting results	Healthy and resilient with stable and lasting family connections
Living in safe, supportive and stable families where they can grow and thrive		Able to access a full array of high quality services and supports designed to meet family or individuals' needs



OUR BUILDING BLOCKS AND STRATEGIES

Integrated Practice Model	Comprehensive Assessment	Expanded & Aligned Array of High Quality Services	Safe, Engaged & Well-Prepared Professional Workforce	Modernized Technology	Continuous Quality Improvement
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OUR FOUNDATION: THE INTEGRATED PRACTICE MODEL PRINCIPLES

Based on SSA's Values and Vision, these practice principles govern our work, relationships, and decisions with children, youth, families, adults, and each other.

Family-Centered	Trauma-Responsive	Individualized & Strength-Based	Culturally & Linguistically-Responsive	Outcomes-Driven	Community-Focused	Safe, Engaged & Well-Prepared Professional Workforce
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OUR CORE PRACTICES

Engage	Team	Assess	Plan	Intervene	Monitor & Adapt	Transition
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Voices of Experience about Key Core Values and Principles

“ I wish more foster parents were empowered to know what the process is supposed to look like, what their rights are in the process, and what to do if it [the process] isn't happening.

Resource Parent

“ We are working together as a team when we are communicating about our foster child frequently and consistently, I don't mean they have to show up all the time just keep me in the loop.

Resource Parent

“ I want to have an open line of communication with my worker, I need to feel comfortable telling them how I feel about my placement.

Current Foster Youth

“ It is really important to me to have everyone working together, the DSS, my grandson's school, and doctors, and me.

Kin Caregivers

“ She [case manager] helped me and stuck with me to help me find someone who would be able to help me. Anytime I pick up the phone and call the case manager I get a response.

Adult Services Client

“ Support is the most important thing to have when you're in foster care because you need somebody who will be there for you.

Current Foster Youth

“ It took me a long time to trust my worker- I didn't trust anyone- but she never gave up on me- she kept being nice and caring even when I wasn't being nice.

Former Foster Youth

The above quotes were gathered from key informant interviews held in July 2018 with with parents, caregivers, former and current foster youth, vulnerable adults, and resource parents.

Our Principles Put Into Practice

The following section brings together the critical components of the IPM, beginning with our core practices. Key behavioral components or activities of each of the core practices are highlighted along with action-oriented behavioral examples to illustrate how to apply the IPM

principles when interacting with children, youth, families, vulnerable adults, community partners, and each other.

Workers, supervisors, and administrators are encouraged to expand upon these examples of behavioral best practices.

We ENGAGE

Engagement is an active process that serves as the foundation for individual and family healing, and to building and maintaining strong, positive relationships with children, youth, families, vulnerable adults, partners, and colleagues. Engagement requires both parties to be honest, respectful, nonjudgmental, and empathetic. Engagement is an ongoing process that is established through our daily communication and reinforced in our

behavior and every interaction. When we genuinely engage with children, youth, families, and vulnerable adults, they will feel respected, empowered, included in all activities and decisions, and able to talk openly about their culture, beliefs, and experiences. This, in turn, leads to shared decision-making and ownership of plans, which supports sustainable outcomes.

Table 2: IPM Behavioral Examples for ENGAGE

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
<p>Family-Centered</p>	<p>We treat children, youth, families, and vulnerable adults as people with their own expertise, and help them unlock their potential and achieve their goals.</p> <p>We facilitate conversations and encourage and answer questions to ensure shared understanding of what is occurring, the process including immediate and longer-term steps, the role of the worker and other parties, and their individual and family rights and responsibilities.</p> <p>We honor and elevate the voices of children, youth, families, and vulnerable adults in planning and decision-making. We listen to the experiences, priorities, and preferences of individuals and families and use this information to inform our planning, decisions and actions.</p> <p>We preserve individual and family connections, including sibling connections, at the onset of our involvement, especially when separation from their home or family occurs. We partner and invest time and effort to ensure those connections are built upon to achieve goals related to safety, permanency, and well-being.</p>
<p>Culturally & Linguistically-Responsive</p>	<p>We are respectful and affirm all races, religions, ethnicities, cultures, histories, traditions and gender identity/expression and sexual orientation when we engage with individuals and families.</p> <p>When interacting with individuals and families and completing documentation, we maintain sensitivity and use language and actions that are culturally-responsive and strength-based and in a format that is easily understood, particularly with persons who are non-verbal or in need of assistive communication devices.</p>
<p>Outcomes-Driven</p>	<p>We identify and discuss individual and family personal and agency goals/progress related to safety, permanency and well-being at the onset of their involvement and in ongoing meetings.</p>
<p>Individualized and Strength-Based</p>	<p>We initiate conversations with individual and families about their self-identified interests, goals, and challenges, especially when working with older youth and vulnerable adults.</p> <p>We recognize that individuals and families are more than a case file, and the sum of their experiences is more than what has been documented.</p>

We ENGAGE *continued*

Safe, Engaged and Well-Prepared Professionals	<p>When meeting and talking with children, youth, families, vulnerable adults, and our colleagues and community partners, we demonstrate dependability, timeliness, responsiveness, compassion, openness, and empathy.</p> <p>We are timely and transparent in our responses to questions and concerns in all communications and actions.</p>
Community-Focused	<p>We help children, youth, families, and vulnerable adults identify and connect to their individual, family and community supports, both formal and informal.</p>
Trauma-Responsive	<p>We ensure the physical and psychological (emotional) safety of children, youth, families, and vulnerable adults through the use of trauma-responsive actions, particularly when loss and separation from homes and family members is necessary, by attending to loss and trauma and showing openness, transparency, empathy and respect.</p> <p>We acknowledge that contact with social services has the potential to be traumatic and may trigger trauma reactions for all parties (e.g., anxiety, numbing, anger, sadness, etc.), even when behaviors or symptoms are not visibly evident.</p> <p>We recognize that power sharing is critical in trauma-responsive systems and we practice respect and humility, and promote youth, vulnerable adult and family voice and participation in planning and decision-making.</p> <p>We actively attend to individual and family trauma reactions and trauma experiences. We explore individual insights and concerns and help them determine future needs and actions.</p>

NOTES:

We TEAM

Teaming serves as a practice cornerstone within child welfare and adult services. Through teaming, staff create greater opportunities for shared planning and decision-making by partnering and collaborating with youth, families, vulnerable adults, caregivers, extended family, community partners, and colleagues. Effective teaming promotes inclusion and transparency, respects diversity

of views and culture, and fosters shared responsibility, accountability, and ownership in achieving outcomes successfully. Through teaming, we can heal the effects of trauma, establish mutual trust and respect, build strengths and resiliencies, and foster lasting relationships that extend beyond the individual and family's involvement with child welfare and adult services.

Table 3: IPM Behavioral Examples for TEAM

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We work collaboratively with children, youth, families, vulnerable adults, caregivers, colleagues, and community partners to create a team of relevant people committed to helping and supporting their safety, well-being, stability, and permanency goals.</p> <p>We turn to children, youth, families, and vulnerable adults for their thoughts, opinions, and insights, recognizing they are the best experts on themselves and their families.</p> <p>We ensure all parties involved with the individual and family team are knowledgeable about the process and purpose by sharing pertinent information and clarifying questions and misunderstandings.</p> <p>We model and maintain respect for individual and family privacy and confidentiality in conversations and team meetings. We only share private information after we have prior discussions and consent, or if it is necessary for health or safety, as established in law, regulation, or policy.</p> <p>We promote ownership in team meetings by identifying individual and family preferences for meeting times, locations, participants, and methods and frequency of communication.</p>
Culturally & Linguistically-Responsive	<p>We recognize that language differences, developmental and cognitive disabilities may impact a person's ability to hear and understand conversations and decisions; we check for comprehension.</p>
Outcomes-Driven	<p>We share goals, successes, barriers, and action items with the entire team in a timely fashion after the meeting, ensuring all team members have the same information regardless of whether they were able to attend the meeting.</p> <p>We meet regularly and frequently with the individual and family, their identified supports, community partners and service providers through team meetings.</p>
Individualized and Strength-Based	<p>We demonstrate solution-focused communication strategies, and partner with individuals and families to identify needs and challenges and leverage their strengths to achieve their goals.</p> <p>We actively demonstrate a willingness to compromise when discussing conflicting opinions and concerns. When tensions do arise, we help parties come to a mutually satisfying solution.</p>
Safe, Engaged and Well-Prepared Professional Workforce	<p>We speak respectfully to and about the children, youth, family, and vulnerable adult and the members of the team.</p> <p>We monitor ourselves, our colleagues, and our system for signs of stress, and plan forward in a routine and predictable way.</p> <p>We reflect back as a team when unexpected or unintended events occur, and we manage team conflict with candor and respect.</p> <p>We are sensitive, respectful, and nonjudgmental when engaging in teaming processes and activities.</p> <p>We listen openly and reflect the child, youth, family, and vulnerable adult's voice in our communication and documentation.</p>

We TEAM *continued*

Community-Focused	We establish our own positive relationships with community providers, local businesses and other state and local agencies. We recognize these entities represent critical members of our professional team and are also key resources for families and/or members of their support network.
Trauma-Responsive	We assess trauma reactions and its impact on the person's ability to hear and understand conversations and decisions. We foster healing and build resilience and protective factors by encouraging individuals and families to routinely utilize their support networks and peer-supports during and outside of team meetings, especially when they may be faced with triggering and/or emotionally-charged conversations and decisions.

NOTES:

We ASSESS

Assessment begins with the staff’s first contact with the child, youth, family, or vulnerable adult and continues until identified goals and outcomes have been successfully achieved and we have transitioned out of providing services and supports. Assessment is the continuous and collaborative process of gathering and analyzing information about the individual’s and family’s needs, strengths and underlying functioning in order to develop an objective plan for achieving safety, permanency/stability and well-being. Findings from assessments identify key areas of focus for planning and treatment, and serve as a baseline of functioning for all parties to visibly measure progress and address challenges.

When conducting assessments, staff consider protective factors (e.g., strengths, supports and resiliencies) as well as factors that affect the individual and family’s functioning related to safety, permanency and well-being. These factors include but are not limited to: prior social and developmental history, behavioral health (e.g., mental health or substance use disorder), prior history and impact of trauma exposure (including individual and community

violence), and functioning within key environments such as home, community, and school. We recognize the important role that culture and identity play in bolstering strengths as well as the role of structural inequity and bias in creating challenges and needs.

Meaningful assessments integrate the individual and family’s voice is heard throughout the process, and their strengths, needs, and wishes inform and drive decision making, planning and recommendations. A meaningful assessment is not completed in order to be in compliance with policy or expectations; it is completed as a tool to support the individual and family and it is integrated into the planning and teaming processes.

Assessment is done transparently and in collaboration with the child, youth, family, and vulnerable adult, and we utilize it as an opportunity for engagement and strengthened communication. We do not make families tell their stories over and over again, recognizing the traumatic impact this has on them.

Table 4: IPM Behavioral Examples for ASSESS

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We provide a clear explanation about the purpose of the assessment, the types of information that will be gathered and explain how the information/findings will be used (e.g., determine goals, guide planning, etc.).</p> <p>We address any questions or concerns from the individual and family about the assessment process.</p> <p>We collaboratively gather information that accurately describes the individual, their family, their current functioning and relevant past experiences to support decision making.</p>
Culturally & Linguistically-Responsive	<p>We use approved, culturally-informed, trauma-responsive screening and assessment tools to engage the individual and family in the assessment process and to identify solutions and potential recommendations.</p>
Outcomes-Driven	<p>We accurately document individual and family voice when conveying information and sharing findings.</p> <p>We engage the individual and family in thoughtful analysis and apply critical thinking when examining assessment information. We clarify recommendations and establish next steps in collaboration with individuals and families.</p> <p>We review assessment and outcomes data regularly to re-assess challenges and strengths and track progress on goals.</p>

We ASSESS *continued*

<p>Individualized and Strength-Based</p>	<p>We ask individuals and families to self-identify their strengths, challenges, likes, dislikes, routines, culture, trauma experiences, medications, school, siblings, friends and potential kin (actual or fictive) who may be able to serve as a resource.</p> <p>We gather information about the entire family from multiple sources.</p> <p>We ensure recommendations from assessments utilize strengths and build protective factors to address needs.</p>
<p>Safe, Engaged and Well-Prepared Professional Workforce</p>	<p>We respond empathically when gathering information and remember people may struggle to think and communicate clearly when they are experiencing a trauma reaction.</p> <p>We acknowledge the stress that is being experienced by individuals and family members during the assessment process, and utilize stress management techniques (e.g., breathing, safety checks, breaks from the process, de-escalation, etc.) when needed. We apply these same techniques for ourselves, as needed, for self-care.</p> <p>When sharing assessment data and reports with others (e.g., court, providers, etc.), we respect and protect individual and family privacy by clarifying in advance what information is to be shared and why.</p>
<p>Community-Focused</p>	<p>We gather information about existing family and community supports during the assessment that will assist the individual and family in building viable emotional and concrete supports.</p> <p>We familiarize ourselves with the network of community resources that exist to which we can refer individuals and family, and make sure our list of resources are updated/current.</p>
<p>Trauma-Responsive</p>	<p>We ensure the individual and family’s physical and emotional safety by creating a safe space when conducting the assessment (e.g., maximize privacy, reduce opportunities for interruptions, and ask individuals and families for their definition of safety and how to protect their sense of safety).</p> <p>We consider the impact of individual and family trauma history and reactions when assessing safety, well-being, and permanency.</p> <p>We avoid re-traumatizing the individual by minimizing the number of times s/he needs to recount their history and reason for involvement.</p> <p>We limit interviews by maintaining comprehensive documentation that includes the individual and family’s words and telling of their experiences.</p>

NOTES:

We PLAN

Planning evolves from the assessment activities and findings, and is best achieved through active teaming and partnership with the individual, family, and their identified supports. Collaborative planning provides the all members -- individual, family, staff and partners -- the means to actively assess and re-assess change and progress, celebrate successes, resolve barriers, and address readiness for permanency and discharge.

The goal of collaborative planning with individuals and families is to create a mutually agreed-upon plan and timeline for addressing individual and family needs and

accomplishing goals related to safety, permanency, and well-being. Well-crafted plans clearly outline interventions and expectations, and address needs based on individual and family functioning and input.

Planning, and the accomplishment of related goals, should always be considered through the child, youth, family and vulnerable adult's sense of time, current experience, and urgency.

Table 5: IPM Behavioral Examples for PLAN

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We bring children, youth, vulnerable adults, their families and their support systems to a common table to discuss goals, make decisions, identify concerns, assess progress, and create a plan that meets their identified needs and builds upon their strengths, resiliency and other protective factors.</p> <p>We ensure the individual and family lead the development of one agreed upon plan that all parties understand, support and work together to implement.</p> <p>We make sure individuals can verbalize their understanding and agreement before finalizing all plans and decisions.</p> <p>We clarify, at the onset, the purpose, expectations and objectives for the planning session and promote meaningful inclusion of individual and family voice in all planning and decisions that are made.</p> <p>We utilize individual and family support networks (i.e. kin, fictive kin, neighbors) and other natural and informal supports to inform, promote, strengthen, and coordinate plans.</p> <p>We encourage individuals and families through modeling and coaching to be advocates for themselves and their families, including being assertive in expressing their thoughts, offering solutions to their own challenges and asking for what they need when making decisions about their care and future.</p>
Culturally & Linguistically-Responsive	<p>We maintain sensitive, respectful, and nonjudgmental language when interacting with individuals and families, documenting information, and speaking with other professionals.</p> <p>We translate assessment findings, court reports, service plans and other documents into language that is easily understood by the child, youth, individual, family, and/or caregiver.</p> <p>We think creatively and collaboratively and identify and build resources that are aligned with the cultural and linguistic preferences of the individuals and families.</p>
Outcomes-Driven	<p>Our plans are based on the child, youth and vulnerable adult's sense of time and urgency.</p> <p>We develop action-driven plans and ensure all parties have a clear understanding of the interventions chosen, their responsibility and expectations.</p> <p>We write service, treatment and visitation plans that include clear, reasonable and measurable goals and outcomes; strategies; supports; and timelines.</p> <p>We understand that individuals and families do not fail, plans fail. When strategies or plans are unsuccessful, we identify what worked and what did not to identify new strategies or methods of implementation in order to achieve our shared goals.</p>

We PLAN *continued*

<p>Individualized and Strength-Based</p>	<p>We identify and build strengths and resilience in individuals and families during planning.</p> <p>We help individuals and families identify how they solved problems successfully in the past, and celebrate their current progress and successes.</p> <p>We prioritize strengths and challenges to develop individualized plans; we consider the individual and family's past history, prior treatment experiences, and current functioning.</p>
<p>Safe, Engaged and Well-Prepared Professional Workforce</p>	<p>We seek feedback from team members when weighing the interconnected risk and safety factors to determine the degree of risk and the likelihood of harm in the immediate and foreseeable future.</p> <p>We utilize supervision when we feel stress or discomfort associated with secondary traumatic stress and/or addressing the cultural issues/context within a family and we do not wait until we think our stress or discomfort is "bad enough" to warrant help.</p>
<p>Community-Focused</p>	<p>We invite the individual and family's identified, traditional and non-traditional natural and professional supports to team meetings and seek their assistance during planning and when making decisions for care.</p> <p>We use databases (e.g. Lexis-Nexus, CLEAR) and other resources and strategies, (e.g. genograms, eco maps, connectedness mapping, mobility mapping) to identify birth family members and other relatives that can be supports to the individual and family and/or placement resources.</p>
<p>Trauma-Responsive</p>	<p>We create a safe and supported environment where youth, families and vulnerable adults can voice their needs and opinions and take ownership in planning and decision-making regarding their care, goals and outcomes.</p> <p>We attend to verbal and non-verbal communication, checking in with participants and taking breaks as needed.</p> <p>We proactively work with individuals and families to identify topics that may cause a trauma reaction during a team meeting and plan for how to appropriately attend to these responses if they occur.</p> <p>We use trauma-responsive, evidence-based interventions in plans whenever possible.</p>

NOTES:

We INTERVENE

Intervening involves how we approach and engage children, youth, vulnerable adults, and families to achieve change. We are successful in our interventions when collaboratively identify, select, and connect children, youth, families, and vulnerable adults to individualized services and supports, both formal and informal.

Interventions are determined by needs related to safety, permanency, stability, independence and well-being, as identified through interviews with the individual and family and assessment findings. Interventions are intended to reduce risks by building skills, nurturing strengths, and fostering healing and growth.

Table 6: IPM Behavioral Examples for INTERVENE

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We collaborate with children, youth, families, and vulnerable adults to identify and select individualized services and supports, both formal and informal.</p> <p>We support and facilitate individuals and families participation in services, including problem-solving barriers such as child care, transportation, or scheduling challenges.</p>
Culturally & Linguistically-Responsive	<p>We identify and, as necessary, contract with a network of providers that can successfully attend to the cultural and linguistic needs of individuals and families.</p>
Outcomes-Driven	<p>We clarify with the individual and family how their progress and success will be defined and measured.</p> <p>We coordinate with selected providers to make sure they have background information and a clear understanding of the reason for referral, shared expectations, and desired outcomes.</p>
Individualized and Strength-Based	<p>We explore with children, youth, families, and vulnerable adults what services and interventions have worked well for them in the past. We clarify their desired outcomes, and assess their motivation/readiness to change.</p> <p>We explore with children, youth, families, and vulnerable adults their feelings when they express or demonstrate concerns or reluctance to engage in particular service and identify strategies or alternatives.</p>
Safe, Engaged and Well-Prepared Professional Workforce	<p>We make sure that individuals and families have access to and are aware of how they can express a grievance or concern about their experiences in the child welfare and/or adult services system.</p> <p>We ensure that all resource providers and caregivers are well trained and qualified to meet the specific needs for each child, youth or vulnerable adult placed in their care.</p> <p>We make sure providers and caregivers have a clear understanding of the child, youth or vulnerable adult’s development, history and experiences.</p>
Community-Focused	<p>We connect individuals and families to providers and community partners that are able to provide the individualized services and interventions needed.</p>
Trauma-Responsive	<p>We connect individuals and families with providers who utilize trauma-responsive, evidence-based services/interventions that are best able to meet the specific needs and strengths of the individual and family.</p> <p>We teach practical behavioral skills to address past trauma and build/sustain confidence in pursuing their interests and mastering their talents.</p>

NOTES:

We MONITOR & ADAPT

We monitor and adapt when evaluating individual and family engagement, safety, permanency, and well-being, and progress toward achieving shared outcomes, including those set forth by the team.

Workers partner with the child, youth, family, and vulnerable adult routinely to assess and evaluate their understanding of needed services, satisfaction with care, and progress towards the achievement of their

goals. Individual and family services are assessed for effectiveness and alignment with individual and family needs. Workers also ensure individual and family strengths are being utilized to enhance protective capacities, trauma symptoms are successfully addressed, barriers to progress are resolved timely, and plans and recommendations are adapted to meet the individual and family's progress and ever changing needs.

Table 7: IPM Behavioral Examples for MONITOR & ADAPT

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We engage the individual and family to determine whether care is satisfactory and services are effective.</p> <p>We adjust the frequency of our team meetings to address needs and challenges as they occur, listening to the youth, family, and vulnerable adult about when they would like to meet.</p> <p>We partner with individuals and families in any decisions or changes to the service, treatment or visitation plan.</p> <p>We review documentation to ensure that child, youth, vulnerable adult and family voice and agreements are visibly present in written assessments, notes, and plans, including where there are areas of disagreement and the associated reasons.</p>
Culturally & Linguistically-Responsive	<p>We ensure changes to plans and action steps are written clearly in language that is easily understood and explained to individuals and family using concrete steps and timelines for completion.</p> <p>We provide updated plans to all key parties, including the child, youth, family, vulnerable adult, and those who they say should receive copies in their preferred language.</p>
Outcomes-Driven	<p>We clarify with the individuals and families what actions and changes need to occur to achieve timely permanency/discharge and closure.</p> <p>We review findings and behavioral changes with the individual and family to gather their input when assessing efficacy and progress; we focus on strengths and behavioral changes rather than compliance.</p> <p>We explicitly document behavioral changes that demonstrate progress towards the completion of agreed upon goals.</p> <p>We adjust plans and action steps, when needed, to ensure that the child, youth, family, and vulnerable adult are able to achieve identified goals.</p> <p>When individuals and families are experiencing barriers to service participation, we explore reasons and provide concrete (direct) assistance and resources to resolve challenges timely.</p> <p>When evaluating progress, we use standardized assessments and tools to re-assess the child, youth, family, and vulnerable adult's progress towards goals.</p> <p>Before finalizing any changes in decisions, action steps and plan documentation, we make sure all parties agree and schedule a follow-up meeting date with the individual, family and their key partners.</p>
Individualized and Strength-Based	<p>We ensure individual and family accomplishments and successes are celebrated, especially as they relate to progress towards completion of goals in their service and treatment plans.</p> <p>We administer additional assessments as necessary and appropriate to assist with individualized care planning.</p>

We MONITOR & ADAPT *continued*

Safe, Engaged and Well-Prepared Professional Workforce	We monitor ourselves, our team and our system for signs of stress. We routinely assess our own trauma triggers, stress responses negative reactions and biases when meeting with individual and families. We seek support and supervision, and commit to a well-being plan to combat secondary traumatic stress symptoms.
Community-Focused	We partner with individuals and families to continually identify services and supports that will assist them in addressing their challenges and achieving success.
Trauma-Responsive	We monitor that individual and family trauma reactions are being addressed through services, by tracking the decrease in symptoms and improvement in functioning.

NOTES:

We PLAN FOR TRANSITION

While transition planning has traditionally referred to planning for discharge from services, we recognize that individuals and families within child welfare and adult services experience many types of transitions throughout their time spent with us. Transitions occur when individuals and families experience changes in workers and/or caregivers, achieve developmental milestones and when we transition out of providing direct services to them.

Successful transition planning begins at the start of the assessment and engagement process and continues until the agency is no longer providing services. Children, youth, families, and vulnerable adults have increased likelihood of successful and sustainable transitions when changes are discussed and planned early and often with the entire team. Youth, families, and vulnerable adults should be given the necessary support, skills, and experiences to be able to convene their own teams when challenges arise after formal child welfare or adult services interventions have concluded.

Prior to determining readiness for the end of the agency’s formal services and supports, we work together to ensure

individual and family success is sustained by enhancing protective capacities, building networks of support, and establishing linkages to community resources. We develop an actionable contingency plan with community and family supports that will assist the individuals and families when obstacles or crises arise, and provide ongoing monitoring and re-assessment to best prepare children, youth, families, and vulnerable adults for success.

As the time the involvement of child welfare or adult services nears closure, we pay thoughtful attention to the individual and family’s emotions and behaviors. We are cognizant that anxiety or stress about transitions can present in a variety of different ways for the child, youth, family, and vulnerable adult, as well as for resource parents and providers, agency staff, and other team members. We exit from the lives of the children, youth, families, and vulnerable adults we served; they do not exit from services but instead continue to implement their individualized plans for continued success.

Table 8: IPM Behavioral Examples for TRANSITION

PRACTICE PRINCIPLES	BEHAVIORAL EXAMPLES OF OUR PRINCIPLES IN ACTION
Family-Centered	<p>We discuss and plan for transitions early and often with the child, youth, family, vulnerable and their entire team.</p> <p>We provide newly-introduced caregivers and resource providers with timely and specific information about the child, youth, or vulnerable adult and their family of origin including likes, dislikes, routines, trauma history, needs, medications, etc.</p> <p>We involve supports identified by the child, youth, family, or vulnerable adult, such as fictive kin, caregivers, and community members, in transition planning discussions and meetings.</p>
Culturally & Linguistically-Responsive	<p>We explore ways in which transitions are supported within the individual’s family and community to bolster self-esteem, resiliency and decrease anxiety or stress that may occur.</p>
Outcomes-Driven Individualized and Strength-Based	<p>We use standardized assessment tools to assess progress toward completing goals and readiness for the child welfare or adult service systems to transition from providing services.</p> <p>Throughout our involvement with the child, youth, family, and vulnerable adult, we introduce concepts related to self-advocacy and self-sufficiency and we provide opportunities for them to practice these skills.</p> <p>We help individuals and families prioritize their desired goals and activities that will build a strong foundation for a thriving future.</p>

We PLAN FOR TRANSITION *continued*

Safe, Engaged and Well-Prepared Professional Workforce	<p>We recognize transitions may trigger feelings of loss and trauma. We address the topic directly with the child, youth, family, and vulnerable adult and identify areas or events that may be stressful, challenging or trauma-triggering.</p> <p>We routinely practice self-care activities to minimize the impact of emotional and physical stress and increase staff retention associated with secondary trauma.</p>
Community-Focused	<p>We assist the individual and family to identify peer supports and mentors and build connections for concrete social and community supports after the child welfare or adult service system have transitioned out of providing services.</p> <p>We provide post-permanency supports and interventions before exiting from providing services through the child welfare or adult service systems We provide linkage and access to needed community-based resources and services to increase sustainable success.</p>
Trauma-Responsive	<p>When new or changes in placement are required, we plan and make sure the child, youth, or vulnerable adult and the new resource provider have information and support needed to minimize the impact of trauma related to separation.</p> <p>When individuals and families are faced with separation, we set-up opportunities for them to say goodbye properly to all parties to reduce the impact of traumatic loss. We make sure individuals bring/keep with them any personal items and/or belongings of emotional significance (e.g., stuffed animals, pictures, phone numbers, etc.) and provide appropriate moving supplies (luggage, storage boxes, etc.). We also set-up opportunities to reconnect with each other prior to leaving to preserve relationships and attachments.</p>

NOTES:

Supervisory & Administrative Leadership Behaviors

Supervisors and administrators are critical to the successful and sustainable implementation of the IPM. They must demonstrate, coach, support and hold staff and one another accountable to the application of the IPM values, principles and core practices in their daily work. DHS-SSA aims to create and sustain a culture of safety, learning, and continuous improvement. Supervisors and administrators must focus on building partnerships; creating an outcomes-

driven working environment; promoting strengths and healing from trauma; honoring identity, culture, and language; and, fostering professional growth. The examples in the table below demonstrate how supervisors and administrators can interact and work with staff to install, implement, support, evaluate, and sustain the IPM values and principles in their practice, relationships, and decision-making.

Table 9: IPM Behavioral Examples for Supervisors and Administrators

BUILD PARTNERSHIPS (FAMILY-CENTERED & COMMUNITY-FOCUSED)		
Engage, Assess & Team	Plan & Intervene	Monitor & Adapt
<p>We model our values of collaboration, advocacy, respect and empowerment in our communications and interactions with staff, individuals, families and community.</p> <p>We foster transparency and open communication with staff in daily interactions, supervision, and team meetings.</p> <p>We support staff to be as flexible as possible to accommodate the availability of children, youth, families, vulnerable adults, and partners to participate in team processes.</p> <p>We ensure timely sharing of information with staff, children, youth, families, vulnerable adults, resource parents and providers, and other partners, especially when critical decisions are involved.</p> <p>We ensure that team meetings with children, youth, families, or vulnerable adults occur when individuals may be placed outside of their own homes, placement changes are being considered, or there is a crisis, and in having proactive transitional planning team meetings for older youth and vulnerable adults.</p> <p>We support staff to ensure that team meetings include the child, youth, family, and vulnerable adult, as well as the resource parent or provider and partners that were identified by the individual or family.</p> <p>We forge meaningful and productive relationships with community partners and providers to enlist their support in addressing individual and family needs short and long-term.</p> <p>We educate community partners, law enforcement, court and judicial partners about child welfare and adult services policy, practice and the special needs of the population we serve.</p>	<p>We ensure staff prioritize timely and meaningful identification and inclusion of family members (including both maternal and paternal relatives and fictive kin) when establishing teams and developing and implementing plans.</p> <p>We promote involvement of extended family and social supports in the lives of children, youth, families, and vulnerable adults when planning to build lasting family and community connections and shared responsibility.</p> <p>We provide guidance to and encourage staff to ensure children, youth, families, and vulnerable adults have individualized services and normative social and developmental experiences when separation from their home is necessary.</p>	<p>We monitor practice closely and provide guidance to ensure child, youth, family, and vulnerable adult voice are present in assessments, team meetings, plans, and decision-making.</p> <p>We use reflective practices to support staff to identify what is and is not working well and help find strategies for improvement.</p> <p>We respond in a transparent and timely manner to address and resolve staff and agency conflicts and concerns and system barriers.</p> <p>We ensure ongoing child, youth, family, vulnerable adult and community voice and perspective in system activities, decisions and continuous quality improvement processes (CQI).</p>

CREATE AN OUTCOMES-DRIVEN WORKING ENVIRONMENT (OUTCOMES-DRIVEN)

Engage, Assess & Team	Plan & Intervene	Monitor & Adapt
<p>We use supervision and administrative meetings to strengthen implementation and system alignment with the practice model by creating a culture of healing, teaching, and reflection throughout the agency.</p> <p>We seek to understand the reasons, details and contributing circumstances to an event when progress lacks or mistakes happen, so the team can learn and prevent similar situations from occurring in the future.</p> <p>We involve staff, family, community and providers of varying cultures and identities in agency decision-making when creating and reviewing program development, policy-making and practice.</p> <p>We create supervisory and leadership teams to improve implementation and sustain fidelity to the IPM values, principles, interventions and behaviors.</p> <p>We seek opportunities to educate community partners and external stakeholders about initiatives, and conduct and attend trainings for the community if applicable.</p>	<p>We prioritize and protect individual and group supervision as well as opportunities for peer learning. We promote meaningful supervision by encouraging staff to bring an agenda to supervision that focuses on successes, challenging issues, and outcomes data.</p> <p>We ensure that treatment and service plans are driven by assessment data and information provided by the child, youth, family, and vulnerable adult and that documentation contains clear goals and expectations.</p>	<p>We support staff and ourselves as they engage in implementation processes, including of components of the IPM, and help them recognize that implementation is not always linear or quick.</p> <p>We promote the use of data-informed decision-making and comprehensive monitoring at the individual, unit, and organizational levels.</p> <p>We establish a meaningful and participatory continuous quality improvement process and utilize data regularly with staff, children, youth, families, vulnerable adults, community partners, and providers.</p> <p>We develop detailed and actionable plans to address improvements where needed. We ensure timely follow-up to action steps.</p> <p>We routinely obtain and review feedback from individuals and families about the quality of their care and satisfaction with services and supports. We collaborate with staff and teams to determine a response to challenges and/or difficulties.</p>

PROMOTE STRENGTHS & HEALING FROM TRAUMA (TRAUMA-RESPONSIVE, INDIVIDUALIZED & STRENGTH-BASED)

Engage, Assess & Team	Plan & Intervene	Monitor & Adapt
<p>We create a work environment that acknowledges the impact of trauma and violence on children, youth, families, and vulnerable adults, as well as on resource families, providers, and staff.</p> <p>We model and ensure staff use trauma-responsive engagement and strength-based language in daily communications, interactions, assessments, case documentation, and performance evaluations.</p> <p>We promote the use of tools to assess meaningfully individual and family functioning, trauma exposure, and well-being.</p> <p>We seek opportunities to engage in ongoing training, technical assistance, and coaching on trauma-responsive care and secondary traumatic stress and provide transfer-of-learning opportunities for staff, children, youth, families, vulnerable adults, and resource caregivers.</p> <p>We create policy, training opportunities, and resources that acknowledge and address secondary traumatic stress in the workplace and promote healing and restoration for staff and resource families and providers.</p>	<p>We support staff to identify and address multi-generational trauma, as well as the impact of culture, language, and identity on that trauma.</p> <p>We support staff to identify and address historical and structural bias and inequity in the lives of the individuals we serve and support, as well as in our own lives.</p> <p>We ensure staff review assessment data with the children, youth, families, and vulnerable adults to help them better understand and own their trauma history and its relationship to their current experiences.</p> <p>We promote self-care among staff and encourage and model a healthy work life balance.</p> <p>We provide staff training on de-escalation techniques and model a culture of calm and nurturing.</p> <p>We support staff to have access to and utilize high quality providers who use trauma-responsive assessments and interventions with children, youth, families, and vulnerable adults.</p> <p>We address the impact of secondary traumatic stress on staff through supervision and encourage and enable staff to engage in activities that foster self-care and healing.</p>	<p>We continually assess the impact of trauma exposure on all staff and agency work performance throughout the agency. We integrate this when we review employee attendance or performance, as well as issues of stress and bias.</p> <p>We identify opportunities for outreach and relevant training for community partners, court and legal partners on trauma exposure and impact.</p> <p>We debrief with all staff following any potentially traumatic event, including administrative staff. We bring in external professional assistance as needed.</p> <p>We recognize that responses to traumatic events are different for each person and that there is no single correct way for someone to respond to trauma.</p> <p>We collaborate with community partners to build and sustain quality, effective resources to address individual, family and staff trauma experiences.</p> <p>We review plans and documentation to ensure daily practice and decision-making are actively attending to current and past trauma experiences and trauma behaviors in children, youth, families, and vulnerable adults.</p> <p>We review and integrate data to ensure needs and strengths are attended to in service and treatment plans, including through supervision.</p>

HONOR CULTURE (CULTURALLY & LINGUISTICALLY RESPONSIVE)

Engage, Assess & Team	Plan & Intervene	Monitor & Adapt
<p>We honor and respect individual cultures and traditions within the boundaries of a full separation of church from state and without appropriating others’ cultures, language, or holidays.</p> <p>We promote ongoing training and mentoring of staff and resource caregivers to ensure responsiveness to the cultural and linguistic needs of children, youth, families, and vulnerable adults.</p> <p>We accommodate religious observances of team members when scheduling meetings or appointments.</p> <p>We encourage staff to actively reflect upon their own beliefs, assumptions and biases regarding their work with people of different values, culture, race, religion, national origin, abilities, gender identity or expression, and sexual orientation. We address the impact of cultural bias on staff interactions and decision-making when applicable.</p> <p>We expect that staff will use the preferred name and pronoun of the children, youth, families, and vulnerable adults with whom we work as well as of our colleagues, providers, and community partners.</p>	<p>We ensure agency staff and contractual providers are responsive to individual, family and staff culture and language in assessments, treatment reports, documentation, and family and team meetings, and when developing service and treatment plan recommendations.</p> <p>We build and provide staff with information regarding community resources and providers who are affirming of individual culture, traditions, language, gender identity, sexual orientation, and spiritual needs.</p>	<p>When behaviors or comments are made by staff, resource providers, or partners that are not in alignment with the IPM and culturally-responsive practice principle, we address the issue immediately.</p> <p>We seek regular and transparent feedback from staff on whether they feel that their identity or culture are respected within the workplace and we collectively develop and implement plans to address challenges identified.</p> <p>We pay attention to our social activities and incentives, particularly during the winter holiday season, to ensure we are not promoting any religious observances.</p>

FOSTER PROFESSIONAL GROWTH		
Engage, Assess & Team	Plan & Intervene	Monitor & Adapt
<p>We forge helping and collaborative relationships within and outside the agency by bringing a variety of community resource providers and experts into the agency who can share their experiences and ideas.</p> <p>We think of child welfare and adult services as part of a larger social and human services delivery system and collaborate with partners in other child- and family-serving systems.</p> <p>We provide staff with ongoing training opportunities, modeling and coaching to ensure successful delivery of the IPM strategies in their day to day practice.</p>	<p>We integrate our values of collaboration, advocacy, respect and empowerment into staff professional development through supervision and coaching strategies.</p> <p>We provide feedback to staff and community partners and providers by acknowledging their successes and strengths.</p> <p>We respond to staff needs and challenges rapidly when they arise and report back.</p> <p>We encourage opportunities for upward mobility of staff members and provide them with the necessary practice-based experience and skill development for them to be successful.</p> <p>We support professional development through an individualized training plan for staff based on their needs and desired expertise. We review the training plan with staff on regular intervals and annually.</p>	<p>We actively and routinely seek feedback from staff regarding their satisfaction with their work and work relationships.</p> <p>We ensure active monitoring of staff's individual and team achievement towards agency performance outcomes and professional growth goals.</p> <p>We celebrate staff successes and respond to barriers and challenges timely.</p> <p>We actively and routinely seek feedback from staff and partners to monitor stress and fidelity related to the implementation of the practice model, new initiatives and policy.</p> <p>We use evidence to inform supervision, support and training to staff. We develop corrective active plans and assist staff when needed.</p>

Conclusion

Implementing and sustaining the IPM requires a coordinated effort with and across SSA and the LDSS. Each worker, supervisor, administrator, policy analyst, trainer, manager, and director has a role to play in its successful installation, implementation, and sustainability.

Over time, our specific strategies for continued implementation will evolve, but our commitment to collaborating with, advocating for, respecting, and empowering each other and the children, youth, families, and vulnerable adults we serve and support is unwavering.

Maryland families and communities...



...their safety and well-being are at the center of our work.

NOTES:

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