

PRACTICE NOTES



From the NC Division of Social Services and the Family and Children's Resource Program

Child Welfare Transformation in NC

Volume 26, Number 1
December 2020

This publication for child welfare professionals is produced by the North Carolina Division of Social Services and the Family and Children's Resource Program, part of the University of North Carolina School of Social Work.

In summarizing research, we try to give you new ideas for refining your practice. However, this publication is not intended to replace child welfare training, regular supervision, or peer consultation—only to enhance them.

Let us hear from you!

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2020 has been a challenging year for North Carolina. COVID-19 brought unprecedented barriers and loss to every community in our state. We have also been reminded of the injustices of systemic racism and experienced natural disasters, including Hurricane Isaias and the largest earthquake our state has seen in 100 years. It's been a tough year.

But it's also a promising time, because our state has a vision and a plan to bring significant and much needed change to our child welfare system. Despite this year's challenges, the process of child welfare transformation in North Carolina is well underway.

The ultimate goal of child welfare transformation is to ensure positive outcomes for the children, youth, and families. Transformation will create a sustainable, accountable, state-wide child welfare system where children and families experience consistent, culturally-competent, trauma-informed, family-centered, and safety-focused practices that improve critical outcomes and performance indicators related to child safety, permanency, and well-being.

Accomplishing this will require a complex journey with many steps and stages. In one of the first steps, North Carolina will adopt a practice model to help it continuously improve the way the child welfare system works with families. We will also implement the Family First Prevention Services Act, which will give us new tools—such as more access to evidence-based programs and practices—to better support and serve families and prevent the need for foster care.

Just as the child welfare system in North Carolina is changing, so too is *Children's Services Practice Notes*. For the past 25 years, this publication has focused on helping our state's child welfare workers, supervisors, and agency leaders use information from research to improve their practice with children and families.



To make the changes needed in our system it will take all of us moving forward in the same direction.

Starting with this issue, *Practice Notes* is expanding its audience to include additional child welfare stakeholders. If you are with North Carolina's court system, a mental or behavioral health agency, a community child protection team, or another child welfare system stakeholder or partner organization, or if you've ever been served in any way by the child welfare system, we would like to welcome you to our readership. To make the changes needed in our system, it will take all of us moving forward in the same direction. For that to occur, we need a common understanding of where we are headed.

In this issue and in the coming year, *Practice Notes* will describe child welfare transformation in North Carolina—what it is, how it will unfold, and how it will affect you and those you care about. ♦

In This Issue

Overview of Child Welfare Transformation in North Carolina.....	2
Transformation Glossary.....	5
Unified Leadership Team.....	6
NC's New Practice Model.....	7
Design Teams.....	9
Stakeholder Involvement.....	10
Responding to COVID-19.....	11

North Carolina's Child Welfare Transformation: An Overview

An enhanced statewide child welfare practice model involves stronger partnerships between child welfare agencies and the courts, mental health agencies, and families. It uses new approaches to attract, retain, and train qualified staff. It needs funding and resources to support programs to prevent children and youth from entering foster care, for family-like placements of children and youth in foster care, and more. These things are already underway or will soon be here in North Carolina.

This article will provide an overview to help you get your arms around our state's transformation plan. It will explain—in broad strokes—why our state is embracing change, what our plan is, and where to learn more about child welfare transformation.

Needed Changes

North Carolina's child welfare system exists to serve some of the state's most vulnerable citizens. Those who work in this field are passionately committed to improving outcomes for families and children. Driven by this desire, North Carolina has tried over the years to strengthen this system. Some of these initiatives, including Families for Kids (1995-98) and the Multiple Response System (2001-06), led to meaningful improvements, but areas of struggle still remain.

This has been underscored by reviews of North Carolina's child welfare system. The federal Child and Family Services Review (CFSR) in 2015 and a statewide evaluation of child protective services in 2016 both identified troubling gaps. For example, North Carolina did not meet federal standards for any of the outcomes and systemic factors evaluated by the CFSR. The 2016 evaluation noted the state's limited capacity to monitor and ensure consistency of child welfare services, expressed concern about staff turnover, and called for the state to update its funding methodology for child welfare (PCG, 2016).

Asked to identify the root causes of our difficulties, system stakeholders have named a variety of factors, including local variations in support and compensation for child welfare staff, inconsistently available evidence-supported interventions, insufficient access to a culturally-sensitive, trauma-informed service array, lack of strategic community-level partnerships, and inconsistent access to/use of data to support continuous performance improvement (NCDSS, 2019).

NC Responds

To address these shortcomings, in 2017, the NC General Assembly passed the Family-Child Protection and Accountability Act (SL-2017-41), also known as "Rylan's Law." One of the provisions of this law required an independent assessment of the state's child welfare system. The Center for the

Why NC is embracing change, what our plan is, and where to learn more.

Support of Families (CSF), which was chosen to conduct this assessment, praised the state's "real focus at every level of the system for improvement and commitment to working toward changes to better serve families" (CSF, 2019, p. 2).

CSF's [final report](#), issued in May 2019, represents a formidable "to-do" list. The report's recommendations integrate and align with the mandates of the state's "Rylan's Law" and the 2018 federal law, Family First Prevention Services Act (Family First), which is one of the most sweeping pieces of legislation to impact federal child welfare financing and programs in decades.

Leadership in the NC Department of Health and Human Services (NC DHHS) fully embraced the vision of change outlined in the CSF report. In fact, working in partnership with County Directors of Social Services, NC DHHS used that vision to create North Carolina's Child and Family Services Plan (CFSP), a 5-year strategic plan for child welfare. Through this plan, our state combined recommendations resulting from the many assessments completed on child welfare over the past 10 years to make the commitments outlined below. These commitments represent North Carolina's five major strategic priorities for its child welfare system.

North Carolina's 2020-2024 CFSP focuses on strengthening current programs and practices to improve services to children, youth, and families. It includes a timeline to guide our work as well as a method to ensure diverse stakeholders have input on how the state improves the child welfare system.

According to the 2020-2024 CFSP, over the next five years, our state will:

- Lay the groundwork for implementing Safety Organized Practice, North Carolina's practice model

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FIGURE 1



Overview continued from previous page

- Improve practice in CPS by validating our risk assessment tools and defining services provided in In-Home Services
- Improve permanency outcomes by strengthening data-driven partnerships with the court system
- Increase placement stability for children and youth in foster care by developing a training and licensure process specific to kinship caregivers
- Maximize participation in the state’s Foster Care 18-21 program by developing an orientation to help transition age youth make decisions about their future
- Strengthen the state’s training and technical assistance model to ensure it adequately addresses the knowledge and skills needed to carry out health programming
- Infuse trauma-informed and trauma-responsive practices across all child welfare policies, procedures, and community-based programming
- Ensure child welfare leaders and staff have access to reliable data to use in the continuous quality improvement process
- Develop a new set of core competencies for child welfare that are skills-based, address equity and inclusion, and align with the practice model
- Develop and begin implementing a stipend support program for MSW and BSW students in the Child Welfare Collaborative

In the overall process of child welfare transformation, the 2020-2024 CFSP is an essential roadmap. It gives the system and its stakeholders details about the “what,”

the “how,” and the “when” regarding what is needed and included in this first part of the state’s transformation journey.

Guiding the Change

To help the system achieve the objectives noted above, the state is actively involving stakeholders in a teaming structure. Figure 2 shows the teams and workgroups North Carolina has formed to offer guidance and input as it transforms its child welfare system.

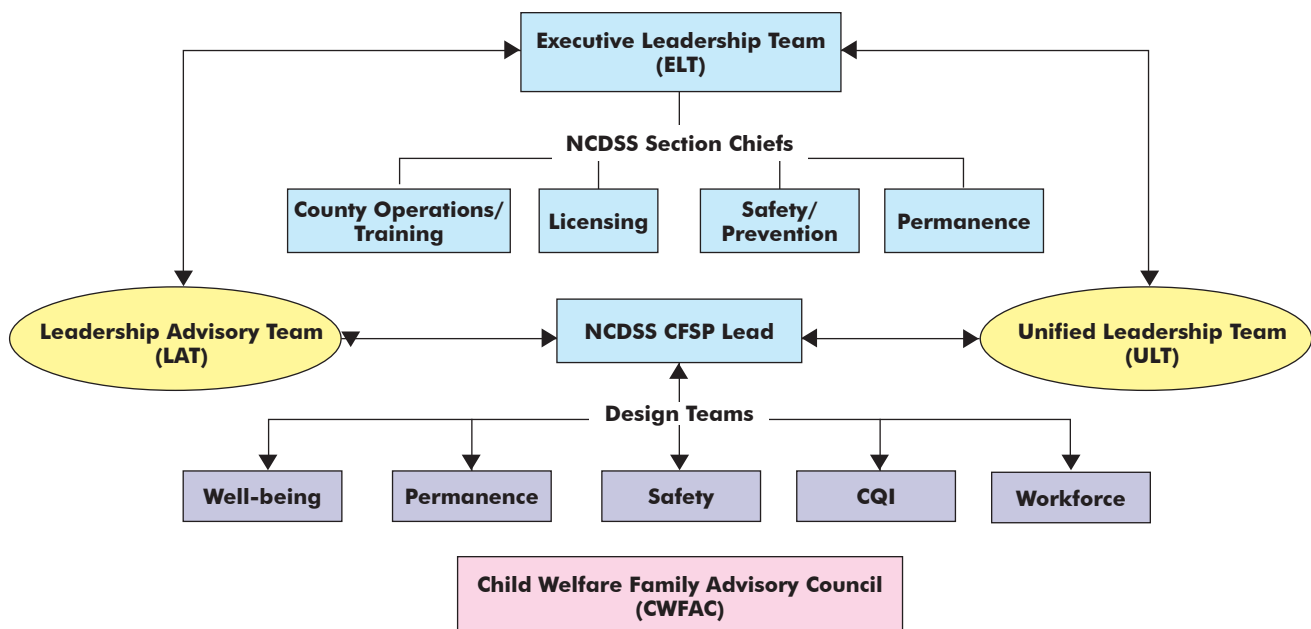
ELT (Executive Leadership Team). The decision-making body that oversees child welfare system transformation. Responsible for setting the vision, leading the implementation, aligning policies and finances, incorporating recommendations for system learning, and ensuring transformation achieves identified outcomes. Meets: monthly. Members: leadership of NCDHHS.

LAT (Leadership Advisory Team). Works with the ELT to inform and support planning, readiness, implementation prioritization, and sequencing of specific recommendations and initiatives related to recently enacted legislation to reform child welfare. Meets: monthly. Members: leadership from NCDHHS, NCDSS, Chapin Hall, GAL, SaySo, Medicaid, county child welfare agencies, CWFAC, and other stakeholders. To ensure alignment, many LAT members sit on different Design Teams.

ULT (Unified Leadership Team). Provides a forum for state and county leaders to provide guidance, direction, and sequencing instruction for child welfare transformation. Meets: 2x/month. Members: leadership from continued next page

FIGURE 2

NC Child Welfare Transformation Guidance and Decision-Making Structure



Overview continued from previous page

NCDSS and county child welfare agencies.

CWFAC (Child Welfare Family Advisory Council). A state-level body comprised of individuals impacted by child welfare services. Meets: monthly. Members: parents who have received child protective services, resource parents, and foster care alumni.

Design Teams. Teams tasked with making recommendations for implementing the CFSP. There are five teams, one for each of NC’s major strategic priorities for child welfare. Meet: monthly. Members: representatives from NCDSS, courts, county child welfare agencies, CWFAC, and other stakeholders.

To Learn More

If you want to learn more about child welfare transformation in North Carolina there are several things you can do. To hear directly from all stakeholders involved and get more detail about the practice model, ULT, Design Teams, and about how we are forging ahead in the midst of a pandemic, please see the other articles in this issue.

Future issues of *Practice Notes* will provide a “deeper dive” into different aspects of child welfare transformation in North Carolina, including a report on the progress on the 2020-2024 Child and Family Services Plan, North Carolina’s plans for implementing Family First, and more. ♦



Three Pillars of Transformation

It can be helpful to think of the following as the three “pillars” of child welfare transformation in North Carolina. Viewed in combination, they describe what lies ahead as North Carolina remakes its child welfare system.

2020-2024 CFSP

North Carolina’s Child and Family Services Plan (CFSP) is a federally required, five-year plan designed to strengthen the child welfare system. It is anchored in the goals of achieving safety, permanency, and well-being. It is required to be updated every year in an Annual Progress and Services Report (APSR). The CFSP must align with North Carolina’s implementation of the Family First Prevention Services Act (FFPSA). To read NC’s 2020-2024 CFSP visit: <https://bit.ly/301ZMyq>

Rylan’s Law

North Carolina’s The Family-Child Protection and Accountability Act (SL-2017-41), passed in 2017. Key elements include:

System Reform Plans. Required hiring an independent evaluator to assess and issue recommendations for reforming NC’s social services system, including the child welfare system.

Social Services Regional Supervision and Collaboration Working Group.

Established to develop recommendations for improving state supervision of the county-administered social services system via a system of regional state offices. Currently North Carolina’s supervision of county DSS agencies is centralized, with most offices in Raleigh. Rylan’s law requires the state to shift to a regional model of supervision, where counties are clustered in regions, with regional state-offices in each area. This does not change any authority of the county DSS agencies; rather, it provides counties with closer support and monitoring by state staff.

Data Dashboards. Requires all 100 county DSS agencies to enter into an annual performance agreement with NCDHHS for all social services programs, excluding Medicaid. Ultimately, a data dashboard will be available to the public, so counties and citizens can easily access program and performance data.

Child Well-being Transformation Council.

A state-level body created to promote a more coordinated approach to services that will help improve outcomes for children. Consists of 17 members appointed by the Governor and General Assembly.

Regional Departments of Social Services. To promote accountability and

increased supervision, Rylan’s Law gives counties the option to create regional departments of social services. This gives two or more counties the option to exercise flexibility by combining programs and resources to improve the provision of social services among more than one county.

To read the full text of Rylan’s law visit: <https://bit.ly/2RT9SNi>

Family First

The Family First Prevention Services Act is an important federal law supporting transformation of the child welfare system in North Carolina. The purposes of Family First are to: (1) give states more front-end flexibility in funding services to prevent children from entering foster care; (2) allow states to use IV-E resources for prevention services such as parental substance abuse and mental health treatment in hopes of allowing children who may be candidates for foster care to stay in their homes (safety permitting); (3) reduce the amount of time children spend in congregate care (i.e., group homes); and to (4) enact numerous other provisions that promote safety, permanence, and well-being.

To learn more about Family First visit: <https://bit.ly/3kJPfzQ>

NC Child Welfare Transformation Glossary

CFSP (North Carolina’s 2020-24 Child and Family Services Plan). A 5-year strategic plan for child welfare in NC. Every June, the state updates the federal government on its efforts to implement the CFSP by issuing an Annual Progress and Services Report (APSR).

CRC (Children’s Research Center). Part of NCCD, much of CRC’s work centers around the Structured Decision Making system, a set of research-based assessments used by NC child welfare agencies.

CSF (Center for the Support of Families). The third-party evaluator that assessed NC’s child welfare system and issued recommendations for improving it; CSF is helping NC implement the practice model.

CSFR (Child and Family Services Review). A periodic federal-state assessment that helps ensure quality services are provided to children and families through state child welfare systems. Administered by the U.S. Children’s Bureau since 2000.

CWFAC (Child Welfare Family Advisory Council). A state-level body comprised of parents who have received child protective services, resource parents, and foster care alumni; by serving on the LAT and in other capacities, members ensure NCDSS receives input from those impacted by child welfare services.

Design Teams. Teams that provide leadership and stakeholder input to help NC improve outcomes for children and families. There are five teams, one for each of NC’s major strategic priorities for child welfare: safety, permanency, well-being, continuous quality improvement, and workforce development.

ELT (Executive Leadership Team). The decision-making body responsible for setting the vision, leading implementation, aligning policies and finances, incorporating recommendations for system learning, and ensuring child welfare system transformation achieves identified outcomes.

Family First (Family First Prevention Services Act of 2018). The most sweeping legislation to impact federal child welfare financing and programs in decades.

LAT (Child Welfare Services Leadership Advisory Team). Works with the ELT to inform and support planning, readiness, implementation prioritization, and sequencing of specific recommendations and initiatives related to recently enacted legislation to reform child welfare.

NCACDSS (NC Association of Directors of County Departments of Social Services). A nonprofit association representing social service directors; the association informs, educates, and empowers its members in order

to strengthen agencies, programs, and the delivery of social services.

NCCD (National Council on Crime and Delinquency). A nonprofit research organization; oversees CRC, which developed the Structured Decision Making system.

NCDHHS (NC Department of Health and Human Services). Manages the delivery of health and human-related services for all North Carolinians; oversees NCDSS.

NCDSS (NC Division of Social Services). Part of NCDHHS; gives guidance and technical assistance to agencies that provide direct services to address issues of poverty, family violence, and exploitation—this includes supervising North Carolina’s child welfare system.

Practice Model. Provides a roadmap for a program’s core principles, values, and related skills; contains definitions and explanations regarding how the agency as a whole will work internally and partner with families, service providers, and other stakeholders in child welfare services.

Rylan’s Law (SL-2017-41). A NC law passed in 2017 to increase accountability and transparency and improve outcomes for children and families in our state.

SOP (Safety Organized Practice). The child welfare practice model NC has chosen to implement.

Transformation. The process of changing completely the character or appearance of something in order to improve it (Cambridge Dictionary, 2020).

ULT (Unified Leadership Team). Provides a forum for state and county leaders to come together to provide guidance, direction, and sequencing instruction for Child Welfare Transformation in NC.



The Unified Leadership Team

A County/State Partnership to Guide Child Welfare Transformation

Child welfare transformation in North Carolina aims to create a culturally competent, trauma-informed, family-centered, and safety-focused child welfare system in North Carolina. We want to consistently meet outcomes related to safety, permanency, and well-being of children and to build and support a stable, effective child welfare workforce in our state.

The Unified Leadership Team (ULT) is responsible for providing guidance and direction to help us sequence and achieve these goals. To learn more about this important stakeholder group, we spoke with Heather Skeens, Direc-

tor of Guilford County Department of Social Services and Co-Chair of the ULT.

As we think you will agree after reading the exchange below, the ULT is an exciting demonstration of state and county partnership. It reminds us of the importance of partnership between the child welfare system and its stakeholders, and also between social workers and families. With the ULT at the helm of child welfare transformation, we are confident North Carolina's child welfare system will continue to improve.

Interview with ULT Co-Chair Heather Skeens

What is the Unified Leadership Team?

The ULT is a partnership between state and county leaders to inform, lead, and think critically about child welfare work in North Carolina and to make the system more impactful. Integrally involved in decision-making, the ULT is the driver of Child Welfare Transformation in North Carolina. More specifically, we set priorities for this work and recommend strategies for improving our system.

What is the vision and purpose of the ULT?

We want to guide child welfare reform in North Carolina, to protect children, to protect county Department of Social Services agencies, and to ensure our child welfare system is fiscally responsible. We are committed to making common sense decisions that work at the state and county level. We think critically about the impact of our choices, with a focus on creating solutions to problems that are simple and effective.

Who is on the ULT and why is this composition important?

The Unified Leadership Team is comprised of Directors of County Social Services and NC Division of Social Services Child Welfare Executive leaders, including:

- Lisa Cauley, Deputy Director of Child Welfare Services, NC Division of Social Services (NCDSS)
- Chuck Lycett (Dare County DSS Director and NCACDSS Second Vice President)
- Heather Skeens (Guilford County DSS Director and NCACDSS First Vice President)
- Karen Harrington (Catawba County DSS Director and NCACDSS Children's Services Committee Co-Chair)
- Jennie Kristiansen (Chatham County DSS Director and NCACDSS Children's Services Committee Co-Chair)
- April Snead (Scotland County DSS Director) and
- Katie Swanson (Cleveland County DSS Director), Co-Chair of the NCACDSS Children Services Committee



Heather Skeens

The membership of the ULT was carefully selected. We wanted to create true, equal partnership between state and county leaders who would guide child welfare work in our state. We wanted people on the team who have the authority to make major decisions for our child welfare system, and we are committed to working together to make these choices. I co-chair the ULT with Lisa Cauley.

What would you say to our readers about Child Welfare Transformation?

To child welfare staff, I'd say: we know you are committed to improving outcomes for children and families. We can do better and we can be better, but that doesn't mean we aren't already doing good work. To truly serve our families well, we must always strive for improvement.

To our stakeholders, I'd say: all agencies and organizations that provide services to children will be impacted by Child Welfare Transformation. We can't protect children without you—it takes a village and a community. Please join us in making our system better. While we have differences, we can all agree to one common goal: children should be safe, protected, and in stable homes. The decisions we all make should begin with this end in mind.

Are there any other messages the ULT would like to communicate?

COVID-19 has presented many challenges to the child welfare system. County agencies, staff, and leaders have adapted quickly to these challenges. Thank you for being flexible and for continuing to do excellent work in the midst of these trying times.

Community partners, we ask that you continue to walk with us, to ask questions, and to expect excellent customer service. Be patient with us as we continue to navigate these challenges, while ensuring children are safe and protected. ♦

Safety Organized Practice: North Carolina's New Practice Model

After North Carolina's legislature passed Rylan's Law (HB 630) in 2017, North Carolina contracted with the Center for the Support of Families (CSF) to develop social services and child welfare reform plans. CSF's recommendation in the child welfare reform plan for a statewide practice model was for North Carolina to develop clear and well organized practice standards for Safety Organized Practice (SOP). This article describes what our state has done to follow through on this recommendation.

Practice Models

A practice model—sometimes also referred to as a practice framework—details the values and principles that guide a system's approach to working with children and families. Practice models describe activities and techniques critical to achieving desired outcomes (CWPG, 2008).

Using practice models helps child welfare agencies by:

- Ensuring staff know what their jobs are and how to do them.
- Helping staff, families, and other stakeholders (e.g., courts, providers, etc.) understand the agency's purpose and what it does.
- Promoting consistency by aligning service provision, training, quality assurance, and policy creation under a single philosophical vision.
- Ensuring staff at every level know agency procedures, policies, and practices. This helps them hold themselves and others accountable.
- Helping staff make critical decisions, even in unusual circumstances.

(NCWRCOI & NRCPCF, 2008)

Safety Organized Practice

SOP combines elements of two other well-known practice models, Signs of Safety and Solution-Focused Casework, with the Structured Decision Making (SDM) system North Carolina has been using for years (Meitner & Albers, 2012). In addition to tools from the above models, SOP incorpo-

rates elements from other approaches such as motivational interviewing, solution-focused therapy, appreciative inquiry, and cultural humility.

North Carolina chose SOP as its practice model for two main reasons:

1) The Structured Decision Making tools North Carolina has used for years are outdated. As part of implementing SOP, the National Council on Crime and Delinquency (NCCD) will update and empirically revalidate our state's SDM tools.

2) Many SOP tools are consistent with North Carolina's values of being safety-focused, trauma-informed, family-centered, and culturally competent and include specific strategies for working collaboratively and effectively with families to assure children are safe. Examples of tools that fit our values include Harm and Danger Statements, The Three Houses, and Safety Mapping.

Current Status

The ULT has selected and defined five essential functions performed by front-line workers, supervisors, and leaders from the beginning to the end of child welfare services that will help North Carolina live into its commitment to provide safety-focused, trauma-informed, family-centered, culturally competent services. Supported by CSF,



Watch this brief video from the National Child Welfare Workforce Institute (2020) to hear the story of how an Indiana agency returned to its core values and mission by rallying around their practice model.

North Carolina's Design Teams have begun providing input into the behaviors stakeholders would like to see included in practice standards. Additional input is being gathered from youth and family members with lived experience with child welfare, front-line workers who provide services, and state staff responsible for training and coaching. When completed, the practice standards will describe in behaviorally-specific terms how staff will engage and work with children and families and how supervisors and agency leaders will support workers and create conditions for success.

Learning the practice standards will build skills and behaviors in the workforce that are fully

continued next page

Examples of Tools from Safety Organized Practice

The Three Questions. These are: What are we worried about? What is working well? What needs to happen next?

Safety Mapping. This facilitated process helps a group gather information (e.g., responses to the Three Questions), organize that information, and create group agreements.

Harm Statements, Danger Statements, and Safety Goals. These statements rely on critical thinking and using behavioral details rather than jargon to keep stakeholders focused on what happened, what the concerns are, and what needs to happen for the child to be safe now and in the future.

The Three Houses. Developed with the child, the House of Good Things, the House of Worries, and the House of Hopes/Dreams help the worker learn about danger and safety from the child's perspective.

The Safety House. Developed by the child, the Safety House is a tool to include the child in safety planning; it illustrates the child's desired state regarding who lives in the house, what activities go on in the house, the rules of the house, who can visit, who should not be allowed in the house, and the safety path.

Circles of Safety and Support. This tool helps identify and build a family's safety network.

(Casey Family Programs, 2019)

Practice Model continued from previous page

consistent with SOP. The practice standard will anchor SOP, provide a foundation for learning and using SOP tools, and help guide decisions on selection and implementation of those tools in North Carolina. Other states—including California where much of SOP was developed—have had success taking a similar approach.

The goal is to finalize practice standards by June 2021 and complete training on the practice standards by June 2022. The timeline developed with NCCD for the implementation of SOP calls for revalidating and implementing updated SDM tools by spring 2022 and beginning training on other SOP tools in summer 2022.

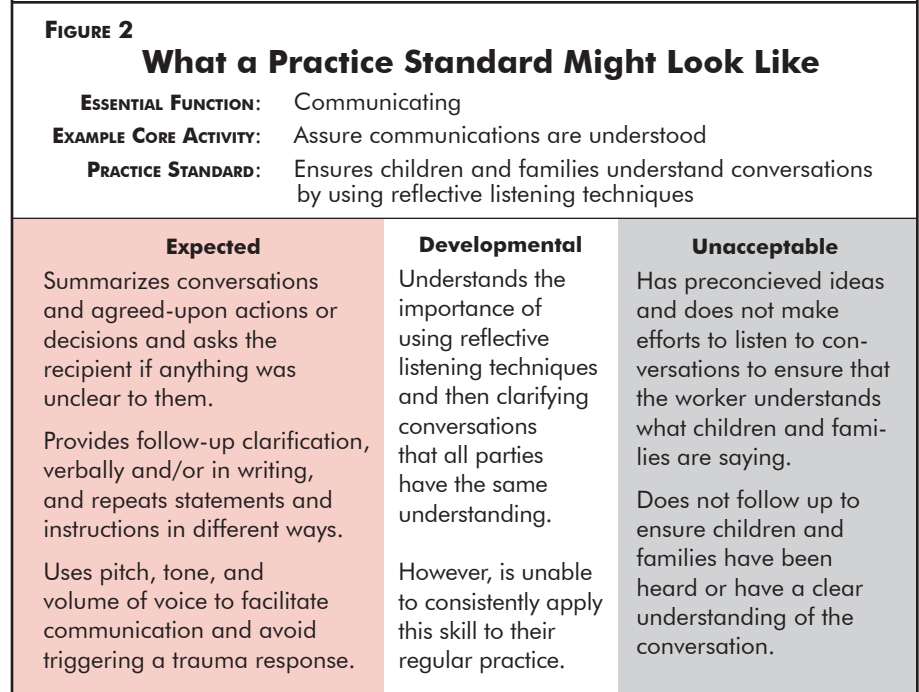
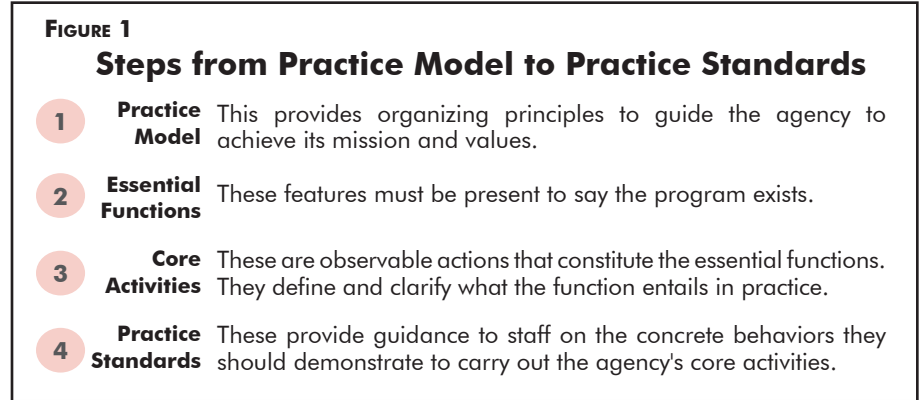
Figure 1 outlines the relationship between a practice model, its essential functions, core activities of those functions, and practice standards. See Figure 2 for a hypothetical example of what a finished practice standard may look like.

There are the five essential functions in child welfare as selected and defined by the ULT:

Communicating: Timely and consistent sharing of spoken and written information so meaning and intent are understood in the same way by all parties involved. Open and honest communication underpins all essential child welfare functions.

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

Assessing: Gathering and synthesizing information from children, families, support systems, agency records, and persons with knowledge to determine the need for child protective services and to inform planning for safety, per-



manency, and well-being. Assessing occurs throughout child welfare services and includes learning from families about their strengths and preferences.

Planning: Respectfully and meaningfully collaborating with families, communities, tribes, and other team members to set goals and develop strategies based on the continuous assessment of safety, risk, and family strengths and needs through a child and family team process. Plans should be revisited regularly by the team to assess progress towards goals and whether changes are needed.

Implementing: Carrying out plans that have been developed. Implementing includes linking families to services and community supports, supporting families to take actions agreed upon in

plans, monitoring to assure plans are being implemented by both families and providers, monitoring progress on behavioral goals, and identifying when plans need to be adapted.

Statewide Implementation

Once North Carolina’s child welfare practice model is complete, statewide training will occur and the practice standards and tools will be used to assess performance and develop the skills of leaders, supervisors, and frontline staff.

A specific timeframe for statewide implementation of the practice model has not been determined. However, implementation will almost certainly occur in phases and be aligned carefully with implementation of the Family First Prevention Services Act. ♦

Design Teams: The Role of the Community

Embarking on large scale change can be feel like an insurmountable task. For many past change efforts, it may have been that a small number of people were driving the change. Previous successful change efforts in North



Lisa Cauley

Carolina—such as the move to the Multiple Response System (MRS)—discovered the key to sustainable change is to involve as many stakeholders as possible from the onset. The development of the Design Teams is based on the idea that the more involvement you have from those who will be impacted by change, the more successful and sustainable the change will be.

“The Design Teams were developed to ensure Child Welfare Transformation is planned and implemented with robust input from all system stakeholders,” explains **Lisa Cauley**, Senior Director for Child, Family, and Adult Services, NC Department of Health and Human Services. “This includes state child welfare staff, county child welfare leaders and frontline staff, partnering public agencies—including the courts, private partners that provide child welfare services, and especially youth, families, and others with lived experience receiving child welfare services.”

In fall 2019, recruitment letters were sent to all 100 county directors asking for nominations for the Design Team membership. In addition, NCDHHS reached out to other key stakeholder groups to ensure the teams represented the variety of community partners across the state. “The ULT was very encouraged by the number of persons who responded to the recruitment effort. Many more excellent nominations were received than could be accepted,” Cauley says. The ULT finished selecting the teams in January 2020.

During the statewide conference, the teams reviewed the goals, targets, and benchmarks related to their assigned strategic priorities and identified “next steps” for moving forward. The work of the teams will be varied and includes Design Team members giving input on proposed policy changes, advising how new practices should be implemented, and giving input into the implementation of North Carolina’s practice model.

“Design Teams are an excellent way to give voice to the many people that are impacted by and participate in the field of child welfare,” shares **Emi Wyble**, Safety Design Team facilitator. “They allow the state to have a solid, committed group of people,



Emi Wyble

who are invested in the transformation of child welfare, to give input to a wide selection of ideas/strategies.”

Design Teams meet monthly. When COVID-19 related restrictions were implemented, the teams adapted by

meeting virtually. To begin development of a statewide practice model, CSF facilitators are working with the Design Teams to solicit input and ideas.



Barbara Young

Asked what it is like serving on a Design Team, **Barbara Young**, member of the NC Child Welfare Family Advisory Council, says, “At first, I was worried that as a parent new to CQI, the information would be way above my head, but our CQI Design Team spent our first few meetings getting everyone “on the same page”. Then, as we began our discussions in earnest, I was able to share my thoughts and ideas with confidence. I was heard and our county representatives were heard, too.”

As we move forward with the work of Child Welfare Transformation, the Design Team members have an important role in ensuring all voices are heard and represented in the new practices that emerge. ♦

2020-2024 CFSP Design Team Benchmarks

Safety Team

- validate Structured Decision Making tools
- implement a statewide practice model
- implement services to safely prevent children from entering foster care with funding from the Family First Act
- develop a comprehensive plan to prevent child abuse and neglect
- identify and plan to reduce racial disparities and disproportionality

Well-Being Team

- strengthen health and well-being programming in CPS In-Home Services
- ensure children in foster care receive timely initial screenings and referrals to medical, dental, and behavioral health services
- ensure Medicaid plans meet the needs of child welfare-involved children and youth
- ensure NC’s practice model and workforce development are trauma-informed

Workforce Development Team

- complete a workload study
- reinstitute a stipend program as part of the Child Welfare Collaborative
- implement a comprehensive workforce development program

Permanency Team

- decrease time children spend in foster care before they are reunified, placed in guardianship, or adopted
- increase the stability of child placements
- maximize the use by eligible youth of foster care 18-21 services

Continuous Quality Improvement

- develop a statewide CQI program that aligns state and county efforts
- assure state and county leaders have access to reliable data

Stakeholder Involvement Matters in North Carolina

In 2019, the U.S. Administration for Children and Families issued an information memorandum (IM-19-03) in which it urged states to find new ways to capture and integrate the expert voices of those served by the child welfare system. It advised that if we truly want to create the conditions for strong, thriving families and communities where children are free from harm, we need to seek out and act on the insights of child welfare system stakeholders—especially those with lived experience of the system.

North Carolina strongly agrees. As it embarks on the journey of Child Welfare Transformation, our state has taken steps to ensure stakeholders with lived experience of the system play an essential role. For example, those with lived experience serve on the Family First Leadership Advisory Team (LAT) and on all five of the 2020-2024 CFSP Design Teams.

This article provides an opportunity for us to hear directly from some of our key stakeholders.



Kelly Kirk

For **Kelly Kirk**, a member of the NC Child Welfare Family Advocacy Council, it all comes down to advocacy. Like other family partners serving on NC's Child Welfare Family Advisory Council, her goal isn't to vent or "share bitterness."

"Family partners," Kirk says, "sign on to make things better for the families that come after them."

Like child welfare professionals and other stakeholders, Kirk says family partners want a seat at the table and an opportunity to be heard so their expert input can be used to advance policy and practice.

To Kirk, creating policies and procedures without input from family voices is like a doctor writing a prescription without knowing the patient's symptoms. Family partners, she says, offer professionals perspectives that they lack. Hearing this different, non-professional perspective is a way for us to discover what works, what doesn't, and what we can do better.



Carloe Moser

Carloe Moser, an alumni of foster care and member of SaySo, says to truly hear the youth and young adult voice, agencies need to avoid surveys, focus groups, and other impersonal methods.

"Youth sense checklists and fake-ness a mile away," he says. If you really want honest input, Moser suggests sitting down with youth one-on-one. When they are genuinely engaged, stakeholders are willing to share stories and insights that draw on the pain and passion of their experiences.

Moser uses a business metaphor to talk about the importance of stakeholder involvement. If North Carolina is the company, he says, child welfare policy and services are the product and families and youth with experience of the system are the customers most qualified to give feedback.

"To succeed," Moser says, "every business needs to make changes based on feedback from those using the product."

Stakeholders are diverse, Moser also points out. "We need villages at the table!"

Jennie Kristiansen, Director of



Jennie Kristiansen

Chatham County DSS and a member of the ULT, concurs. She says it is important for diverse groups of stakeholders to be part of the conversation and to talk candidly about their differences, as well as what they have in common.

"We all want the same things," Kristiansen says. "We all want families to be safe, healthy, and well."

As Kristiansen explains, "when they have honest conversations, people working in the court, child welfare, and mental health systems often realize they struggle with the same lack of resources and services (e.g., transportation). Discovering shared experiences and frustrations can fuel everyone's passion for transformation."



Jeanne Preisler

According to **Jeanne Preisler**, Program Coordinator with the Center for Family and Community Engagement at NC State University, true engagement—of family partners or anyone else—occurs on different levels. "Our heads understand the goal," she explains. "Our hearts believe it is the right thing to do. And, our feet move the work forward. All three have to be aligned for us to see where we fit and what we have to contribute to move the work forward."

Everyone interviewed for this article sees this is a time of great opportunity. Some have waited a long time for this moment to arrive. Stakeholder involvement will help North Carolina ensure decision makers have the information they need to identify both the problems and the solutions needed for Child Welfare Transformation. ♦

Family partners offer perspectives we lack. Hearing a different, non-professional perspective is a way for us to discover what works, what doesn't, and what we can do better.

Faced with Pandemic, NC Perseveres

COVID-19 has disrupted our lives in many ways. Our child welfare system has faced staffing shortages, service disruptions, and has had to make tough decisions about balancing risk to staff while addressing child safety. Caregivers and families faced job loss, financial strain, social isolation, and significant stress—all with a lack of child care and a sudden thrust into virtual schooling. These challenges caused many of us to ponder two important questions:

(1) *How do we, as a system, continue to offer the necessary services to promote safety, permanency, and well-being of children and youth during this crisis?*

(2) *How do we personally cope with all of these disruptions, while continuing to show up as the parents, professionals, and service providers that our children, youth, and families need?*

Guidance from the State

In spring 2020, the NC Division of Social Services offered guidance in response to the first question above. At the heart of that guidance were three key messages:

- Child Protective Services (CPS) is essential for ensuring the safety and well-being of children;
- We must make working conditions for staff as safe as possible, because child welfare staff cannot protect children if they are not safe themselves; and
- The nature of COVID-19 means face-to-face contact with families may involve a contagion risk to child welfare staff, children, and their caregivers. We must assess and weigh these risks on a case-by-case basis using the guidance provided by our healthcare communities.

With this guidance, North Carolina's child welfare system quickly pivoted to focus on two things:

1) **Adaptation and innovation of service delivery.**

Child welfare agencies across the state developed creative ways to continue working with children and families. Many services were temporarily provided virtually. Family visits were held via videoconferencing, caseworkers checked in with parents by phone and, when appropriate, home visits were held virtually.

2) Collaboration with community partners. Child welfare agencies have long valued partnership because they know that on their own they cannot ensure the safety of children. The COVID-19 crisis really brought this home. Since March 2020, DSS agencies and their community partners have been working together to find new ways to meet the needs of children and families impacted by COVID-19.

In the midst of the pandemic, North Carolina still found a way to continue with child welfare transformation. As explained elsewhere in this issue, the ULT, Design Teams, LAT, and other stakeholders have continued to meet and make headway on the state's new practice model and the

ambitious benchmarks outlined in the 2020-2024 Child and Family Services Plan.

Guidance for You

Whether you are a child welfare professional, parent, service provider, or stakeholder we know you have worked hard to support children and youth during this pandemic. Thank you for your flexibility, dedication, and commitment to families during this challenging time.

As you care for others, we hope you also are taking the time to attend to yourself. COVID-19 has taken a toll on each of us. To continue to serve others well, we encourage you to practice self-care, to lean on the people you trust, and to be kind to yourself. If you have been stressed, sad, or irritable, know you are having a normal reaction to extraordinary circumstances. There may be moments when you need to unplug, take a break, and recharge. Here are a few strategies for doing so:

- *Stay connected with friends and family.* While physical distancing is encouraged, you can still connect with loved ones virtually. Social media, Skype, Zoom, and other platforms provide excellent ways to socialize so you will feel less isolated.
- *Go on an information diet.* An overabundance of information can increase stress. If you are feeling overwhelmed, a brief break from the news can help you regroup.
- *Get outside.* Spending time in nature, exercising, and exposure to sunlight help decrease stress.
- *Have fun and laugh.* With all of the serious moments 2020 has brought us, we hope you find time for some playful ones. Being silly with your kids, watching funny videos, and playing with your favorite childhood games are just a few ideas.
- *Focus on the positive.* Shifting our focus to what is working well can help us cope during challenging times. Spend 5 minutes each day writing down what you are grateful for and reflect on these strengths.

(Webster, 2020; The Wellness Society, 2020)

If we've learned anything this year, it is that uncertainty and change are unavoidable. Collectively, we have shown resilience and have risen to meet the challenges with flexibility and creativity. The result is a more adaptive child welfare system—one better suited to manage the unexpected challenges of the future. ♦



We found a way to continue serving families and children and still make headway with child welfare transformation.

References for this Issue

(Children's Services Practice Notes, v. 26, n. 1 • www.practicenotes.org)

- Administration for Children and Families. (2019, Aug. 1). *Engaging, empowering, and utilizing family and youth voice in all aspects of child welfare to drive case planning and system improvement* [IM-19-03].
<https://www.acf.hhs.gov/cb/resource/im1903>
- Administration for Children and Families and the Health Resources and Services Administration. (2020, May 28). *Joint letter*.
https://www.acf.hhs.gov/sites/default/files/cb/acf_hrsa_joint_letter.pdf
- Casey Family Programs. (2019, June). How was Safety Organized Practice implemented in San Diego County? *Strategy Brief: Healthy Organizations*. https://caseyfamilypro-wpengine.netdna-ssl.com/media/HO_Safety-Organized-Practice.pdf
- Cauley, L. (2020, Feb.). *Child welfare reform* [slide presentation]. Presented at Strong Families, Bright Futures: North Carolina's 2020 Child and Family Services Plan Conference, Raleigh, NC.
- Center for the Support of Families. (2019, May 6). *Final report: Child welfare reform plan*.
https://files.nc.gov/ncosbm/documents/files/ChildWelfareReform_FinalPlan.pdf
- Center for the Support of Families. (2020, Aug.). *North Carolina child welfare design teams: Introduction to work on practice standards* [presentation]. NC Dept. of Health and Human Services.
<https://attendeegototraining.com/2b181/recording/153339400502737922>
- Child Welfare Policy and Practice Group. (2008). *Adopting a child welfare practice framework*.
<http://www.childwelfaregroup.org/documents/CWGPracticeFramework.pdf>
- Freitag, R. (2015, Winter). SDM and SOP in California: What we've learned. *Reaching Out*, 5.
https://oercommons.s3.amazonaws.com/media/editor/92375/Reaching_Out_2015_-_Safety_Organized_Practice_AYMFZWM.pdf
- Meitner, H. & Albers, A. (2012). *Introducing Safety-Organized Practice*. National Council on Crime and Delinquency, Children's Research Center. <http://bayareaacademy.org/wp-content/uploads/2013/05/SOP-Handout-Booklet-9-20-12.pdf>
- Metz, A., Bartley, L., Blase, K. & Fixsen, D. (2011). *A guide to developing practice profiles*. National Implementation Research Network, FPG, Child Development Institute, UNC.
- National Child Welfare Resource Center for Organizational Improvement & National Resource Center for Permanency and Family Connections. (2008, July 22). *An introduction to the practice model framework*. <https://bit.ly/2HhjNlt>
- National Council on Crime and Delinquency and the Northern California Training Academy. (2013). *Introducing an integrated Safety-Organized Practice*. <http://dhhs.ne.gov/Documents/SOP%20Overview.pdf>
- NC Department of Health and Human Services. (2019, March). *North Carolina Family First Prevention Services readiness and planning executive leadership and leadership advisory team charter*. <https://files.nc.gov/ncdhhs/NC-Integrated-FFPSA-ELT-LAT-Charter--FINAL.pdf>
- NC Division of Social Services. (2016, May). Federal government finds room for improvement in NC's child welfare system. *Fostering Perspectives*, 20(2). <https://fosteringperspectives.org/fpv20n2/CFSR.htm>
- NC Division of Social Services. (2019, rev. Sept.). *North Carolina child and family services plan, 2020-2024*. NC Department of Health and Human Services. <https://files.nc.gov/ncdhhs/documents/files/dss/statistics/2020-2024-Child-and-Family-Services-Plan-FINAL-2-2020.pdf>
- NC Division of Social Services. (2020). *Child welfare practice guidance during COVID-19 crisis*.
<https://files.nc.gov/ncdhhs/COVID-19-Child-Welfare-Guidance28966-5-1-2020.pdf>
- Northern California Training Academy. (2015, Winter). An introduction to Safety Organized Practice. *Reaching Out*, 2-3.
https://oercommons.s3.amazonaws.com/media/editor/92375/Reaching_Out_2015_-_Safety_Organized_Practice_AYMFZWM.pdf
- Public Consulting Group. (2016, March, 1). *North Carolina statewide child protective services evaluation*.
<https://files.nc.gov/ncdhhs/documents/files/dss/statistics/NC-Statewide-CPS-Evaluation-02-26-16.pdf>
- The Wellness Society (2020). *Coronavirus anxiety workbook: A tool to help you build resilience during difficult times*.
<https://thewellnesssociety.org/free-coronavirus-anxiety-workbook/>
- Transformation. (2020). In *Cambridge Dictionary*. <https://dictionary.cambridge.org/us/dictionary/english/transformation>
- Webster, D. (2020). *Staying mentally healthy during a pandemic*. National Association of Social Workers.
<http://www.helpstartshere.org/?p=12838>