

Child Protective Services Child Protective Investigations PRACTICE MODEL



TEXAS
Department of Family
and Protective Services

INTRODUCTION AND PURPOSE

The Child Protective Services/Child Protective Investigations Practice Model defines our organization, what we believe in, what we work to accomplish, and what we do to help families keep children protected and connected.

Our practice model provides us with common and consistent framework to organize our efforts and establishes the parameters for best practices that deliver good outcomes for children and families. Our practice model drives decisions and actions at all levels of our organization.

We are guided by the belief that people can change for the better. Our work is to help create opportunities for child safety to occur within families and communities. To do this, we partner with caregivers to help them protect their children and youth in new ways while building upon safety that's already present. We also work to establish safety networks for children and youth by organizing other important adults to create a safe environment now and over time.



CHILDREN FIRST: PROTECTED AND CONNECTED

TEXAS CHILD PROTECTIVE SERVICES/CHILD PROTECTIVE INVESTIGATIONS

We serve children and youth who meet statutory guidelines for investigation or assessment and are determined to be unsafe in their homes because of abuse or neglect.

OUR DESIRED OUTCOMES

Our practice secures positive and consistent results for the children, youth, and families we serve. Our desired outcomes include:

- Children and youth are safe and feel safe.
- All children and youth have legal and relational permanency.
- Child, youth, and family well-being are improved.

PRACTICE MODEL PRINCIPLES

Principles represent the ideals we share and serve as broad guidelines for every situation. Our practice is built on our principles.

RESPECT

We show respect to the children, youth, and families we serve by demonstrating our understanding that they are more than the reason that brought them to us, and by seeking ways for them to guide the help they receive.

COMMITMENT

We display our commitment through pursuit of the best outcome for each of the children, youth, and families we serve, knowing our interventions have important implications for them.

INTEGRITY

We demonstrate integrity by communicating to the children, youth, and families we serve about our purpose and how we make decisions in a way that is easily understood, and when we follow through on our words and obligations to them.

EQUITY

We achieve equity in outcomes by applying our methods fairly and consistently, and customizing our interventions to the unique cultural and community context of the children, youth, and families we serve.

URGENCY

We work with a sense of urgency to reach safety, permanency, and well-being concurrently for every child and youth we serve, and this is reflected in each of our interventions.

OUR APPROACH

Our approach defines our guiding principles, or the way in which we go about our work.

SAFETY ORGANIZED

We arrange every aspect of our practice around child safety, focusing on what must happen and who must be involved in the everyday life of the child or youth to address danger.

CHILD CENTERED

We help children and youth to understand why we are involved with their families and ensure they have a voice in saying what should change.

FAMILY FOCUSED

We engage caregivers and families in partnerships to help them develop a new understanding of their children's needs and to support them to take protective actions that address danger.

*All plans rigorously address
day-to-day danger to the
child or youth.*

COLLABORATIVE

We team with members of a child or youth's safety network to strengthen safe patterns of connectedness between the child or youth, caregivers, and other adults who can help support safety in real time.

Assessments are based on balanced, unbiased, and factually supported information.

SUSTAINABLE

We help bring about sustainable safety for children and youth by joining with caregivers and their safety networks to develop innovative plans that are likely to be carried out over time.

Children and youth need to understand why we are involved with their families and have a voice in saying what should change.

INNOVATIVE AND EVIDENCE INFORMED

Our practice is state-of-the-art and directed by the best and most recent available research. We rely on our values and approach, fundamentals of social work practice, supervision, and teamwork when research doesn't provide direction.

OUR PROCESS

Our process refers to the set of actions we carry out to achieve our desired outcomes. These actions are the core of our practice competencies.

ENGAGING

Engaging means we develop trust-based relationships with children, youth, families, and safety networks for the purpose of driving positive change. Successful engagement is the basic building block of child safety, permanency, and well-being.

Engaging the families we serve involves a combination of skills: the ability to intervene to protect children while developing a helping relationship with caregivers. Our work requires that we cooperate with the caregiver while remaining vigilant about danger.

Hope must be present for positive change to occur. We help build hope by describing the change process to families in detail and in a way that allows them to see possibilities. The most effective engagement strategies motivate caregivers to change on behalf of their children.

Viewing families and safety network members as resourceful and able to significantly contribute to solutions promotes a commitment to change. Prescribing solutions without the family's input creates contention and undermines the family's ability to take responsibility for change.

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Gaining details by using solution-focused strategies as opposed to making assumptions is the key to engaging children, youth, families, and safety network members. Good questioning helps elicit from caregivers and safety network members ownership of the solutions to the problem.



Engagement with caregivers includes paying careful attention to the times when safety already exists and learning what caregiver and family actions contribute to safety. This creates momentum for change and a pathway to solutions.

We look for general strengths of caregivers and families as a means to know and engage them, though our primary focus is on leveraging demonstrated protective actions or finding new ways for them to act protectively.

Engaging children and youth involves providing them with age appropriate explanations of our worries so they understand what planning will look like, and creating opportunities for them to participate.

ASSESSING

Assessment of safety, permanency, and well-being is based on balanced, unbiased, and factually supported information. Our assessment tools are objective, reliable, and support consistency and accuracy in decision-making. Decisions are consistent across all stages of service. Although part of our work is helping families solve their problems, we must make impartial

decisions about whether caregivers and families can change quickly enough to meet the child’s safety and permanency needs.

We share the work of ongoing fact-finding and organization of relevant information about the family with the safety network. We continuously seek new information and revise our assessments accordingly.

The voices of children and youth are important to assessment. We find out about their worries and wishes and share them with caregivers and the safety network so all the adults have complete information.

Assessments about case closure are not based on the caregiver's compliance with services, but instead on the caregiver's protective actions that address danger over time and the sustainability of the safety network.

TEAMING

Assembling a safety network to team with the child or youth and the family is the best way to achieve safety, permanency, and well-being. Constructive relationships between people are critical to effective child protection work.

Safety networks must include adults who will play a long-lasting part in the lives of children, youth, and families for sustainable safety to occur. Other professionals, community members, and resource families are also important contributors to the safety network.

Effective safety networks require good partnerships. Partnership is all about:

- **Developing understanding** so everyone is clear *why* we are here, *what* we are trying to accomplish and *how* we are going to do it.
- **Participation** that allows everyone's voice to be heard and allows people to feel a sense of ownership and presence in the process.
- Creating **shared commitments** for action and the outcomes.

We team with members of a child or youth's safety network to strengthen patterns of connectedness between the child or youth, caregivers, and other adults who can help support safety in real time.

We lead safety network meetings early and often as a means to integrate information and use it to develop change strategies.

Our primary role in the safety network is to establish safe patterns of connectedness between children, youth, their caregivers, and other people who will help ensure the child or youth is safe both

now and over time. We mobilize families and safety network members to take identified actions to ensure sustainable, real time safety of the child or youth.

Safety networks can help caregivers understand the behaviors that are unsafe for their children. This empowers caregivers to take responsibility for outcomes. At the heart of an effective safety network is an engaged relationship with caregivers.

PLANNING

Planning involves setting goals, developing strategies, and prioritizing tasks and schedules to meet goals.

Developing plans requires us to first define the problem in a way that is solvable. This means we describe our worries to families and safety networks in behavioral terms that define the danger to the child or youth. We also help families and safety networks create a vision of what safety will look like in the family so that everyone knows what needs to happen to close the case.

Goals involve the presence of a new, protective action rather than the absence of a problematic behavior. Working towards incremental, attainable objectives is the most effective approach to helping caregivers make changes that keep their children safe.

Plans are action-oriented. Tasks assigned to caregivers and safety network members are behaviorally specific and directly related to dangers as well as permanency and well-being barriers. Plans make good use of what caregivers are already doing to keep the child or youth safe and strengthen those behaviors at times when the situation is unsafe.



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All plans rigorously address day-to-day danger to the child or youth. We develop contingency strategies to account for the what-ifs that might disrupt the plan.

The worries and wishes of children, youth, caregivers, and safety network members are included in planning. Whenever compatible, their goals are united with our goals.

Children and youth play an especially important role in planning. Their ideas are reflected in all plans, which are written in a language that each child or youth understands.

INTERVENING

Our intervention is the least intrusive required for child safety. When we take a more intrusive course of action to address danger to the child, interventions are designed to be brief. Our goal is to mobilize caregivers and safety networks to take action quickly, knowing that each intervention has an impact on the long-term outcome for the child. The best permanency happens in the earliest stage of the case.

While we set the bottom line for child safety, we invite caregivers and families to develop their own plans to establish safety. In circumstances that require us to take a different action, we offer choices to the caregiver about how this might look.



Responsibility for the safety, permanency, and well-being of children and youth must be placed with caregivers and safety networks as early and often as possible. Constructing safe patterns of connectedness between children, youth, caregivers and safety network members provides the foundation for our interventions.

Interventions are designed to help caregivers come to an understanding of the impact of their behaviors on their children and support them to take new protective actions that address danger to ensure their children are safe.

While services may be helpful to families, they are only important to child protection work if and when they contribute to changes in the care of the child or youth. A caregiver's participation in services doesn't equate to child safety. When services are part of an intervention plan, our role is to help caregivers connect what they learn to protective actions that address danger and create opportunities for them to demonstrate those new behaviors over time.

Activities and services are coordinated in a way to avoid overwhelming families and unintentionally sabotaging their efforts.

EVALUATING

Plans are routinely evaluated with children, youth, families, and the safety network. Good evaluation requires us to continually consider why we are involved with a family and be able to describe what safety will look like in the family. Continued involvement with a family means that the child is unsafe.

Evaluation is different than monitoring. While monitoring is a part of our work, creating lasting change in families is our priority. Keeping evaluation of practice in mind helps us define safety in the family in measurable ways, logically connect our interventions to our goals, and determine success. Evaluation of practice supports effective change strategies and should inform each intervention from the beginning to the end of a case.

We promptly adjust plans to meet changing conditions and the needs of the child or youth and family. Strategies that have proven to be ineffective are stopped, and new solutions are found.

New strategies are best developed by repeating our process until we reach a good outcome.

OUR ORGANIZATIONAL STRATEGIES

Our organizational strategies help ensure our work is integrated and aligned with the practice model.

LEADERSHIP

Our leaders are practice model experts and hold themselves, their peers, and their staff accountable for demonstrating skills that are consistently aligned with the practice model.

An important part of leadership is creating and sustaining an organizational infrastructure that supports our practice model. Our practice model lives in our infrastructure, which includes recruitment, training, supervision, and evaluation of staff, as well as policy, information technology, tools, organizational structure, programs, and services.

Building excellence in practice requires leadership to promote a culture of learning and support among our workforce. This means leaders create routine opportunities for their staff to share good ideas and accentuate good work rather than focusing solely on compliance. Our staff learn best when leaders validate what's going well.

QUALIFIED WORKFORCE

Our staff members are change agents who utilize their professional skill set to promote effective, safety-building partnerships with families and safety networks. We set standards for staff that are in

accordance with our practice model, and we provide support to staff to enhance their capacity to put our practice model into action.

We develop staff using a combination of theory-based learning and professional training. Most job skills are learned through real-world experiences guided by supervisors, mentors, and other tenured staff who are proficient in our practice model.

Supervision is strengths-based and reinforces the focus on partnership reflected in our practice model. Supervision and training methodologies support staff to continually improve their critical thinking skills and ability to practice with innovation and agility.

CONTINUOUS QUALITY IMPROVEMENT

We collect and analyze qualitative and quantitative data for the purpose of evaluating our service delivery and how well front line practice aligns with the practice model. Our quality improvement system is not just a data reporting mechanism but instead supports continual practice enhancement consistent with the practice model.



Children First: Protected and Connected

Building Excellence through a Culture of Learning and Support

Practice

Outcomes

Children and youth are safe and feel safe

All children and youth have legal and relational permanency

Child, youth and family well-being are improved

Values

- Respect
- Integrity
- Commitment
- Equity
- Urgency

Approach

- Safety organized
- Child centered
- Family focused
- Collaborative
- Sustainable
- Innovative and Evidence informed

Process

- Engaging
- Assessing
- Teaming
- Planning
- Intervening
- Evaluating

Leadership

Qualified Workforce

Continuous Quality Improvement



FOR MORE INFORMATION ABOUT THE CPS/CPI
PRACTICE MODEL, PLEASE EMAIL:

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Practice Model