**Foundational Element:**

**Family-Centered Decision Making**

Welcome to “Family-Centered Decision Making” foundational element. In this element we examine decision making as a continuous process where changing circumstances are monitored for their impact on safety and the relevant and sufficient information that is needed for current decision making is continuously considered.

These workbook pages will support your learning through this element and aid your supervisor and/or coach in understanding the purpose of the element (see the Element Learning Objectives below), its sections (see Element Sections below), and how they can support you in your learning.

Beginning on page 2, you will find space to capture your responses to activities within the online modules – some of your responses will be brought to Community Huddles, while others will be shared with your supervisor, coach, or colleague for on-the-job application activities.

**Element Learning Objectives**

Upon completion of this element, child welfare professionals will be able to:

* Describe safe/unsafe.
* Describe Parental Protective Capacities.
* Determine who makes up the household to know who to assess in the family.
* Identify relevant and sufficient information necessary to make a safety decision.
* Determine if enough information has been gathered to start an intervention.
* Articulate the thought process of safety decisions made in case examples.
* Use information gathered from the Areas of Assessment, Parental Protective Capacities, and family strengths to practice deeming a child safe or unsafe.
* Apply the critical thinking model to safety decisions.
* Identify where and when personal bias, judgment, and/or assumptions impact the analytical process.

**Element Sections**

This element contains the following sections:

* Packet 1: Safety and Relevant and Sufficient Information – online content (90 minutes)
* Packet 2: Parent/Caregiver Protective Capacities – online content (45 minutes)
* Packet 3: Considerations for Protective Action and Plans – online content (45 minutes)
* Community Huddle 1 – virtual session via Zoom (120 minutes)

**Packet 1: Safety and Relevant and Sufficient Information**

In the Safety and Relevant and Sufficient Information packet, you will apply key practice concepts related to safety and relevant and sufficient information from previous foundational elements when evaluating current circumstances in case scenarios. You are asked to (1) complete a photo activity where you capture your observations, safety concerns, and family strengths and (2) return to the Jones family where you will consider the impact of new circumstances on child safety through a series of activities and reflections. Use the sections starting below to record your activities as you complete the online packet.

**Photo Activity**

1. **Review the illustration in your online packet and record 5-10 observations in the space below.**

|  |  |
| --- | --- |
|  | **Observation 1:**  **Observation 2:**  **Observation 3:**  **Observation 4:**  **Observation 5:**  **Observation 6:**  **Observation 7:**  **Observation 8:** |
|  | **Observation 9:** |

1. **In the space below, record at least one safety concern and explain why you identified it as a safety concern.**

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|  | **Safety Concern:**  **Explanation:** |
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1. **In the space below, record what you want to learn more about from the illustration.**

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1. **List at least 10 family strengths that you see in the illustration in the space below.**

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| --- | --- |
|  | **#1:**  **#2:**  **#3:**  **#4:**  **#5:** |
|  | **#6:**  **#7:**  **#8:**  **#9:**  **#10:** |

1. **Photo Activity Summary:**

* You were presented with a snapshot of a point in time for a family and asked to make observations about the family. Some of the first things that you noticed were likely the potential dangers. This is not surprising since our role is to ensure safety and well-being. However, additional information, including the family’s strengths and protective measures, was needed to understand the full circumstances.
* It is critical to avoid assumptions and quick judgments, to check your biases and thinking, and to continue to ask questions to learn more.

**Jones Family Activity**

1. **Assessing New Information – Reflection Questions, Part 1**

Listen as Annie shares new information about the family’s circumstances. Then process the new information and capture your responses to the reflection questions below.

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| --- | --- |
|  | 1. **What has changed about this family’s circumstances?** |
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|  | 1. **What additional information do you need to better understand the situation, clarify relevant details, and identify the protective capacities of these parents?** |
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|  | 1. **What irrelevant information have you chosen to disregard because it may lead to biases, assumptions, and incorrect conclusions?** |
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|  | 1. **Based on what you’ve learned, what, if any, changes would you recommend to the current safety plan?** |
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1. **Assessing New Information – Reflection Questions, Part 2**

Listen as Annie shares additional information about the family’s circumstances. Then process the new information and capture your responses to the reflection questions below.

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|  | 1. **Which Principles of Partnership could be especially important to utilize given these new circumstances?** |
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|  | 1. **How would building partnership with the Jones family assist your understanding of the safety of the children? How might your partnership with them aid you in addressing safety issues?** |
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| --- | --- |
|  | 1. **What more relevant and sufficient information would be needed to help clarify all of the family’s options for their children’s safety?** |
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|  | 1. **What does child safety look like in this situation? What supports might you suggest or offer that could assist the family in ensuring continued safety?** |
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1. **Actions to Ensure Continued Safety – Reflection Questions**

Listen as Annie shares an update on actions taken to support the family through the new circumstances. Then process the new information and capture your responses to the reflection questions below.

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| --- | --- |
|  | 1. **Annie and Don were able to secure many supports to help them out in a time of crisis. What if one or more of these supports were not available or had not worked out as hoped? How might that have affected child safety?** |
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| --- | --- |
|  | 1. **How might the child welfare professional’s recommendations have changed under these circumstances?** |
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| --- | --- |
|  | 1. **What other choices might have been available to the family? What other supports, resources, or services might have been explored?** |
|  |  |

1. **Continuing to Gather Information – Reflection Questions: What has changed in the family’s situation?**

Listen as Annie and Don share more about the family’s situation. Then process the new information and capture your responses to the reflection questions below.

|  |  |
| --- | --- |
|  | **How does this new information affect the current safety plan?** |
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| --- | --- |
|  | **Are there new safety considerations? What are they? Are there new areas of improvement or concern?** |
|  |  |

1. **Continuing to Gather Information – Reflection Questions: How will you apply the Critical Thinking model to this situation?**

Listen as Annie and Don share more about the family’s situation. Then process the new information and capture your responses to the reflection questions below.

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| --- | --- |
|  | **What information did you learn?** |
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| --- | --- |
|  | **What information did you learn that was relevant to child safety?** |
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| --- | --- |
|  | **Do you have a sufficient amount of information? Do you need additional or clarifying information?** |
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| --- | --- |
|  | **What information did you learn that did not have an impact on the children’s safety/was not relevant?** |
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|  | **What information, words, or phrases might reveal some of your own biases, judgments, or assumptions?** |
|  |  |

1. **Continuing to Gather Information – Reflection Questions: How are we centering the family and their experiences?**

Listen as Annie and Don share more about the family’s situation. Then process the new information and capture your responses to the reflection questions below.

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| --- | --- |
|  | **What might help to reduce the likelihood of a long-lasting trauma response?** |
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| --- | --- |
|  | **How might the recurrence of Annie’s cancer bring to light, or trigger, her past traumas?**    **How might your work with the family change knowing that Don is the victim of domestic violence?** |
|  |  |

1. **Responding to New Information – Reflection Question: What other actions would you consider recommending?**

Review an update on actions taken to support the family through the new circumstances. Then process the new information and capture your responses to the reflection question below.

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| --- | --- |
|  | **What other actions would you consider recommending?** |
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1. **Personal Reflection Questions**

Capture your responses to the personal reflection question on the Jones Family case below.

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| --- | --- |
|  | **What assumptions or biases might you have had while learning more about the Jones family?**    **How does the child welfare professional in this case use the Six Principles of Partnership to build a relationship with the Jones family?** |
|  | **How did building partnership with the Jones family assist in deepening an understanding of the children’s safety? How did it aid in addressing the safety issues?**    **What additional or different approaches might you have taken?** |

**Bring your responses to all of Packet 1’s reflection questions to the Community Huddle.**

**Packet 2: Parent/Caregiver Protective Capacities**

In the Parent/Caregiver Protective Capacities packet, you will apply key practice concepts related to parent/caregiver protective capacities when evaluating current circumstances in a case scenario. You are asked to (1) review the Parent/Caregiver Protective Capacities found in the Child Protective Service Standards, (2) complete protective capacities application activity, and (3) consider changes to the household composition of the Jones family and the implication for child safety through a series of activities and reflections. Use the sections starting below to record your activities as you complete the online packet.

**Parent/Caregiver Protective Capacities Review**

The online packet refers you to your workbook to find the Parent/Caregiver Protective Capacities. The Parent/Caregiver Protective Capacities are found in the Child Protective Service Safety Intervention Standards, Appendix 5. You will find the CPS Safety Intervention Standards on the DCF website page: <https://dcf.wisconsin.gov/cwportal/policy> in the “Standards” section.

The Parent/Caregiver Protective Capacities include definitions and examples and can be used as a tool in assisting the child welfare professional in identifying the specific Parent/Caregiver Protective Capacities that exist or present as an opportunity to be enhanced.

Use the space below to capture notes or questions about the Parent/Caregiver Protective Capacities that you’d like to discuss with your agency supervisor or coach.

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**Protective Capacities Drag-and-Drop Application Activity**

* In advance of the drag-and-drop activity, you are asked to review:
* The Child Protective Service Safety Intervention Standards, Appendix 5: Parent/Caregiver Protective Capacities (which you just completed).
* The Jones Family Case Report which is found in Packet 6 section of the Engaging Families Workbook.
* Annie’s Strengths and Annie’s Needs. You will find these starting on the next page.
* The new information about the Jones family presented in this element’s online Packet 1.
* As you review these items, pay attention to any behaviors, thoughts, or feelings that indicate Annie and Don have demonstrated the ability to safely take care of their children.
* Complete the drag-and-drop activity within the online packet.
* Capture your response to a reflection question:
* Some of the examples of Don and Annie’s protective capacities fit into more than one of the categories and therefore it was a struggle to decide the best placement for the protective capacity. One example that could have fit into multiple categories was “Annie took action and stood up for Tommy at school with the bully and the bully’s parents, when Tommy was bullied”.
* Use the space below to explain why you thought this example fit into the category you selected.

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| --- | --- |
|  | **Which category did you say the example best fit into (behavioral / cognitive / emotional)?** |
|  |  |
|  | **Explain why you choose this category rather than one of the other two:** |
|  |  |

Annie’s Strengths

1. Open to trying new things, takes suggestions and tries them out before discounting them. Very determined person who is not easily discouraged by setbacks.
2. Is a cancer survivor. Was diagnosed with a rare type of cancer at age 14. Not expected to live but did. Doctors called her “a real fighter”
3. Very skilled auto mechanic. Can fix anything with an engine and wheels. Has used this skill to make extra cash when she runs out at the end of the month.
4. Keeps scrapbooks for each of her kids with photos, school papers, and memorabilia. Has a “song” for each one of them.
5. Once she sets her mind to something she works at it until she gets it. Is especially motivated by a “challenge” or problem that is difficult.
6. Got her GED, passing the test on the first try after only a month of program-required classes.
7. Has significant periods of time (nine months to a year) with no binging episodes or substance use. Her substance use often correlates with depression.
8. Works well with people once she trusts them. Will do anything for you if she feels valued.
9. Savvy about getting information when she needs it. Uses the internet to research anything that interests her including parenting dilemmas.
10. Signed her kids up with a local church’s youth group and Sunday School so they have extra activities on the weekend even though she and her husband don’t attend.
11. Actively involved with the kids. Takes them to the park to play on the playground. Gets right down on their level to play. Very engaged and bonded with her kids.
12. When there is food in the house, she cooks hot meals for dinner every night. Her children are will-fed most of the time.
13. Able to see solutions for friends in trouble and often acts as a mediator between couples or between a friend and his or her parent.
14. Is passionate about life and approaches most everything she tackles with great energy and zeal.
15. Able to quickly assess problems in the workplace and develop solutions that work. She excels at jobs where she is allowed to contribute critical thinking.
16. Maintains regular phone contact with a few of her family members including two of her brothers and grandmother.
17. Fiercely protective of her children. In a previous school, she stood up for her son who was being bullied first with the school and then with the bully and his parents.
18. Prefers to handle her own problems rather than rely on the system. Hesitant to get public assistance even though she qualifies.
19. Even in a small house, she makes sure each child has his or her own space or own room.
20. Excellent basketball player. Plays at the local recreation center on the weekend in pick-up games.
21. Writes stories about her children and her own childhood. Keeps a journal off and on.
22. Passionately in love with her husband and three children.
23. Very generous person who is always willing to help out friends or family in need in whatever way possible.
24. Spends her free time designing web pages, scouring the internet and using social media. Very tech savvy.
25. Likes to plan family events or trips for the weekend when her husband is home. Will surprise the kids with a swim in the lake or a picnic in the summer.
26. Her husband, Don, has known her for most of her life and has stuck by her through medical and financial stress.
27. Her husband is a loving father when he is home. He plays ball with his oldest son and dolls with this daughter. Neighbors have described him as an involved Dad with his kids.
28. Her core belief about parenting is to prepare her children to be self-sufficient so they have what they need to succeed in life - better than she and her husband have done.
29. Tommy, the oldest child, is very independent, a good helper to his Mom, and does well in school. He especially likes reading.
30. Don is a very compassionate, soft-spoken and gentle man. He loves his children and his wife, and he can’t wait to get home to them on weekends.

Annie’s Needs

1. Has been substantiated for neglect by the department of social serves (in North Carolina) for allowing an 11 year old to watch her children.
2. Has abused substances including pot, painkillers, and sometimes alcohol. Has mixed two or more drugs of choice. Not an addict, but has bouts of regular substance use.
3. Thinks all social workers and therapists have ulterior motives that are ultimately dangerous to her family’s well-being.
4. In their previous location, the police were called to the trailer on more than one occasion to handle disturbances.
5. Absolutely hates being told what to do. Very independent person who often bucks authority.
6. Diagnosed with bipolar by a mental health professional. Resistant to taking medication.
7. Verbally abusive with her children when angered - she calls them names, swears at them, yells, etc.
8. Has history of using physical discipline as the primary means of behavior control with the kids.
9. Married a man 20 years her senior when she was a teenager, against her parents’ wishes.
10. History of fighting that often gets physical with pushing, shoving, or hitting, throughout her marriage.
11. Always has the latest technology in phones, computers, and video games. Sometimes prioritizes those purchases over paying the bills.
12. Slow to trust. Very suspicious of anyone from “the system”.
13. Unable to hold down a job for more than six months at a time.
14. Shunned by certain members of her family of origin because of lifestyle choices.
15. Fired more than once for insubordination and fighting with co-workers, supervisors, and bosses.
16. Puts on cartoons to occupy her kids and then sleeps on the couch for several hours in the evenings and especially during the weekends.
17. Lives in a different state than her family of origin. Has almost no contact with her mother. Is aware of few local supports.
18. Is a “single parent” much of the time because her husband drives a truck for a living and is often on the road for a day or two at a time.
19. Relies on Tommy to care for and watch out for himself and his younger siblings when she is busy or sleeping at the house. She feels strongly that this “builds independence”.
20. Got started as a parent very early without much female guidance. Her mom disapproves of her marriage and getting pregnant so early.
21. Dropped out of school at 17. Never graduated from high school.
22. Right after her move to Wisconsin she made many poor choices as a new parent. She often left her kids with a neighborhood girl and partied on weekends.
23. Frequently ignores own health issues. Is reluctant to seek medical help for serious concerns.
24. Always broke at the end of the month. Sometimes runs out of basic necessities and has to find ways to get additional household supplies like hygiene or cleaning products.
25. Moved to Wisconsin when husband was transferred. She has few friends and is going to have to figure out the network of support all over again here.
26. Has very loose boundaries with her friends. They often take advantage of her generosity.
27. They moved here nine months ago, because her husband’s trucking company was bought out. He now has a new unfamiliar route and sometimes is gone longer than expected.
28. Growing up she was the only girl of five siblings. As the youngest, she picked up “street smarts” and scrappiness from her brothers. She knows how to fight and take care of herself.
29. Family was unprepared for the Wisconsin winter when they first moved here. As fall progressed, the children brought notes home from school saying they needed to wear warmer clothes.
30. Sometimes Tommy or Megan goes to school/preschool with the same clothes on from the previous day or with unwashed hair. They sometimes smell.

**Jones Family Activity**

1. **Ready for Case Closure? – Reflection Questions**

In the online packet, information about the Jones family from a recent home visit is shared. Capture your responses to the reflection questions below.

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|  | **What information is and is not relevant?**    **Is there an impact on the children’s safety?**    **Is the information provided sufficient to cause concern, warrant additional questions, or change the current safety plan?**    **What more, if anything, do you need to know to close the case?** |
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1. **Household Composition – Reflection Questions, Part 1**

In the online packet, additional information about the Jones family from the recent home visit is shared: Don’s brother, Steven, is temporarily staying with the family. Reflect on the new information and capture your responses to the reflection questions below.

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|  | **Is this relevant to the children’s safety?**    **What additional information is needed?**    **What questions do you have?** |
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1. **Household Composition – Reflection Questions, Part 2**

Capture your responses to the reflection questions below.

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|  | 1. **How, if at all, does the new information impact safety decisions regarding the children?** |
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|  | 1. **What specific parental or caregiver protective capacities are associated with the new information and related to child safety?** |
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|  | 1. **How can the parent/caregiver’s demonstrated protective capacities, or those that can be reinforced, be used in safety planning?** |
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|  | 1. **Where could biases be influencing how the new information was gathered or is being analyzed and thus impact the safety decision?** |
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1. **Questions and Inquiries – Reflection Questions**

In the online packet, answers to the child welfare professional’s primary questions are shared and Annie provides an update. Reflect on the implications of what you have learned and capture your responses to the reflection questions below.

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|  | **How do these most recent changes impact child safety?** |
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|  | **Are you able to identify any parent/caregiver protective capacities? Describe them.** |
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|  | **How has the child welfare professional’s family-centered approach assisted in the family’s successes?** |
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|  | **Is this case ready for case closure?** |
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**Bring your responses to all of Packet 2’s reflection questions to the Community Huddle.**

Space for any additional notes or questions that you’d like to capture for discussion with your agency supervisor or coach.

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**Packet 3: Considerations for Protective Action and Plans**

In the Considerations for Protective Action and Plans packet, you will consider how to remain family centered when evaluating and recommending an appropriate level of protective action to ensure safety. You are asked to (1) review key terms and definitions related to protective action and complete a knowledge check within the online packet, (2) review two brief case scenarios in the workbook, (3) write down any adjustments that you would recommend to the original safety plan in the workbook, and (4) record your answers to the Scenario Reflection Questions in your workbook. Use the sections starting below to record your activities as you complete the online packet.

**Situation Assessment Activity**

Review two brief case scenarios and record any adjustments that you would recommend to the original safety plan.

Case Scenario #1:

* Original report:

John Miller is a 34-year-old single parent living with his 5-year-old daughter Savannah. John has been experiencing blackouts that leave him unresponsive for periods of time. John’s blackouts have started occurring more frequently and sometimes have left him unavailable to care for Savannah.  On Tuesday, Savannah was left waiting for her dad to pick her up from pre-school for over two hours.  The school mentioned there is an aunt named Valerie, but they were unable to reach her. When John arrived, he appeared disoriented and in need of medical attention. John was admitted to the hospital and no other family members were available to care for Savannah. Savannah was taken into protective custody.

* New information:

John was released from the hospital the following day.  The CPS professional went out and talked with John.  Upon arrival the CPS professional noticed John and a woman in the home. John informed the CPS professional that he has a brain disorder that causes him to black out. Three weeks ago, the doctor prescribed a new medication, the side effects leave him feeling out of it and unable to care for Savannah.  Valerie, John's sister, moved in with him and Savannah last month to help out while doctors figure out his health condition.  Valerie stated she went to visit her friend in Boston for a week and returned late last night but no one was home. Her flight got delayed and she was unable to reach John.

Valerie and John both stated John has been good about taking his medication and the blackouts had stabilized. But last week he was sick and unable to take his medication.  John is in a trial program for a new medication for his condition, and the doctors are hoping to identify an alternative medication. John and Valerie, have a structured schedule for Savannah school, meals, and bedtime routine to ensure needs are met.

* Reflection Questions:

1. What has changed regarding dad’s functioning and the impact on his child’s safety, if any?
2. How does Valerie’s role in the family impact the safety plan?
3. Did the new information provide new insight from the family’s perspective?
4. What other information is necessary to gather and understand about the family, relationship, adults’ protectiveness?
5. Does the original safety concern still exist?
6. What bias, judgments, or assumptions do we want to be aware of?

* Record any adjustments that you would recommend to the original safety plan in the space below.

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Case Scenario #2:

* Original report:

Shelia repeatedly leaves Andrew (age 6) with a teenage neighbor named Rachel.  On several occasions, the child reports that he has told his mother that Rachel will leave him alone for long periods of time and tells him to “stay inside”.  He does not know where the sitter goes when she leaves, and he is afraid.  The mother denies that it has been a problem before and blames both the child for exaggerating and the “sitter” for being irresponsible. Three months ago, Andrew was found wandering the streets at 9pm, while Shelia was at work. The CPS professional and Shelia agreed with an in-home plan.

* New information:

A report was called into CPS regarding a 6-year-old walking alone on a busy street asking for his mother. The CPS professional went out and met with Shelia. Shelia told the CPS professional her cousin, who was a part of her in-home plan, left the home due to an argument three days ago. Shelia said she could not miss work or else she would lose her job.  Shelia started using Rachel again for help and stated Rachel had agreed to be more responsible in supervising Andrew.

* Reflection Questions:

1. Consider mom’s functioning and the impact of her behavior on her child. Are there any changes?
2. Have her protective capacities changed?
3. Is there a need to revise the original safety plan? If so, why?
4. What more, if any, information is needed in order to change the level of intrusion?
5. What biases, judgments, or assumptions do we want to be aware of with this family?

* Record any adjustments that you would recommend to the original safety plan in the space below.

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**Scenario Reflection Questions**

For both case scenarios, capture your responses to the reflection questions spaces below.

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|  | 1. **What do we need to consider when things have changed?** |
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| --- | --- |
|  | 1. **What do we know about household members?** |
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| --- | --- |
|  | 1. **What are the adults’ protective capacities?** |
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| --- | --- |
|  | 1. **Do the initial concerns for child safety still exist?** |
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| --- | --- |
|  | 1. **What did we learn and what do we need to know more about?** |
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|  | 1. **In addressing safety, what level of intrusion could be considered and why?** (Keep in mind that we are always looking to take the least intrusive level of protective action to keep children safe.) |
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| --- | --- |
|  | 1. **What information, words, or phrases might reveal some of your own biases, judgments, or assumptions?** |
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|  | 1. **Might the family’s race impact whether or not they were ever reported to CPS in the first place?** |
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**Protective Action and Plans Summary**

* In the Situation Assessment Activity, you were presented with two case scenarios and asked to evaluate the appropriate levels of protective action within the context of the family’s changing circumstances. You were asked to reflect on the protective action of the adults within each home, whether concern for the child’s safety exists, and the additional information to be gathered before recommending adjustments to the original safety plan.
* As you considered adjustments to the original safety plan in both case scenarios, you were asked to keep in mind that we are always looking to take the least intrusive level of protective action to keep children safe.
* Because circumstances change, making adjustments to existing plans is a regular part of child welfare case practice. These are often times complex situations where the decision depends on the information you know today – and information that you gather tomorrow could require another adjustment to the plan. Remember, when grappling with complex situations, consult with your supervisor to talk through the information you have, discuss your logic and thinking, and check your biases.

Space for any additional notes or questions that you’d like to capture for discussion with your agency supervisor or coach.

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**Community Huddle 1**

In the workbook introduction, you learned that the Foundational Elements include Community Huddles as a way to discuss learning and build connections and community with your cohort colleagues.

Community Huddles are held virtually via Zoom. You will find the date, time, and Zoom link for this Community Huddle within the *Welcome to the WiLearn Program* enrollment email that you received from WCWPDS.

Please see that email for details about logging in to the Community Huddle and contact information should you have any questions about the Community Huddle.

During this Community Huddle, we will:

* Review the key learning points from the packets
* Apply the Wisconsin Child Welfare Model for Practice to the Jones Family case scenario
* Create final reflections and commitments

In this Community Huddle, we spend time:

* discussing the importance of observing, gathering information, making adjustments as circumstances change, reflecting upon the new information, explaining thought processes, and remaining family-centered throughout work with families.
* examining, through a small group activity, how continue to integrate the values and principles of the Child Welfare Model for Practice into practice with families.
* exploring, through a small group activity, how to continue to use the skills learned in the Foundational Elements to support a family-centered approach.

**Jones Family Culminating Application Breakout Group Discussion**

Space to capture notes from your group’s discussion on how the child welfare professional:

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| --- | --- |
|  | Practiced from a family-centered approach |
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|  |  |
| --- | --- |
|  | Built trust with the family |
|  |  |

|  |  |
| --- | --- |
|  | Showed respect to the family |
|  |  |

|  |  |
| --- | --- |
|  | Engaged with the family |
|  |  |

|  |  |
| --- | --- |
|  | Was accountable to the family |
|  |  |

|  |  |
| --- | --- |
|  | Used trauma-informed approaches in their practice with the family |
|  |  |

|  |  |
| --- | --- |
|  | Used culturally responsible approaches in their practice with the family |
|  | * Share with each other how you checked/mitigated your personal biases as you heard the updates about the Jones family. |

|  |  |
| --- | --- |
|  | As you work with families, discuss how to attend to workforce supports, including awareness of secondary trauma, asking your supervisor and colleagues for support, and continuing to enhance your practice skills. |
|  |  |

**Action Plan**

**Family-Centered Decision Making**

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| --- | --- |
| Please list three important concepts, ideas, or skills which you plan to take from the training and implement in your work. | |
|  | |
| 1. |  |
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| 2. |  |
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|  | |
| 3. |  |
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|  | |
| Identify a plan to implement these concepts upon return to your agency. | |
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| Identify resources that will help you to implement this plan. | |
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|  |  |
| Identify any barriers to the implementation of this plan. | |
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***Please share and discuss your Action Plan with your supervisor and/or coach.***