

State of Alaska • Department of Health & Social Services
Office of Children's Services

Practice Model

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Introduction

The Department of Health and Social Services, Office of Children's Services (OCS) has implemented a child safety driven intervention system that defines who the agency serves and is grounded in key core principles. While safety of children has always been a focus of the Department, OCS Practice Model brings clarity and purpose to child protective services and establishes clear parameters for the safety of children and how families are treated within the system. Child safety is the determinate for each key decision point throughout involvement with the family from intake to case closure.

This document has been developed to serve as a guide and reference for helping staff, stakeholders, and those we serve better understand the role of child protective services in Alaska. This document also seeks to define, affirm, and support a strengths based, collaborative, family-centered model of practice that all families entering the system should experience.

Vision & Mission

Vision - Safe Children, Strong Families.

Mission - The Office of Children's Services works in partnership with families and communities to support the well-being of Alaska's children and youth. Services will enhance families' capacities to give their children a healthy start, to provide them with safe and permanent homes, to maintain cultural connections and to help them realize their potential.

Who We Serve

OCS serves families whose children have been determined to be unsafe or at high risk of maltreatment by their parent or caregiver. Every family served will be treated with dignity and with consideration to their cultural values. Services to families will always be done in the least restrictive, least intrusive manner possible. Decisions regarding needed interventions with families are based on thorough information collection that guides the initial and ongoing assessment of safety and risk.

Outcomes

OCS' Practice Model works in concert with the seven outcomes required by the Federal Child and Family Services Review.

- Children are, first and foremost, protected from abuse and neglect.
- Children are safely maintained in their homes whenever possible and appropriate.
- Children have permanency and stability in their living situations.
- The continuity of family relationships and cultural connections is preserved for children.
- Families have enhanced capacity to provide for their children's needs.
- Children receive appropriate services to meet their educational needs.
- Children receive adequate services to meet their physical and mental health needs.





Guiding Principles

OCS Practice Model is grounded in the following principles:

- A child's safety is paramount.
- A determination that safety threats are present within a family does not equate with removal of a child from their home. The assessment of safety threats directs staff to make informed decisions about safety planning that will control and manage the threats identified. These actions may be in- home, out- of- home or a combination of the two.
- Relevant services will be sought with respect for and understanding of the families' culture and specific needs.
- Collaboration with Alaska Native Tribes is fundamental to best practice.
- Families are treated respectfully, thoughtfully and as genuine partners.
- A person's right to self determination is valued and supported.
- A safety intervention system is congruent with strengths based and family centered practice. Assessing for the safety of children is what we do; family centered practice is how we do it.
- Interventions are identified using the family's perspective about what needs and strengths exist that are selected in collaboration through family engagement.
- By engaging in a collaborative problem solving process with the family, case plans will be specific to the uniqueness of each family served.
- Enhancing parent/caregiver protective capacities are essential for the ability of families to protect their children.
- OCS needs partnerships within the community and stakeholders to achieve strong outcomes for children and families.

Five Core Components

I. Intake

Intake is a critical function and provides the first assessment of child safety. Intake is the process of receiving reports of allegations of child maltreatment, called a Protective Services Report (PSR). All reports of child maltreatment will be entered into ORCA, our automated case management system of record. OCS will respond to all reporters promptly and respectfully, capturing all the necessary information known to the reporter, including the extent of the alleged maltreatment, circumstances surrounding the alleged maltreatment, family/adult functioning, child functioning, parenting practices of the parent/caregiver and disciplinary practices of parent/caregiver, to determine whether a response is required by child protective services.

This is an interactive process that involves not only gathering the above information, but also gathering other related information that could help determine the appropriate agency response. This may include, contacting collateral sources if necessary to corroborate available information and if screened in for intervention to help inform the initial assessment of safety. If the available information indicates that the child is either unsafe or at high risk of maltreatment by their parent/caregiver, the report will be screened in for initial assessment or if not, the reporter will be

referred, if appropriate, to community services. As per state law, all mandated reporters will be notified of the screening decision.

2. Initial Assessment

Formerly called investigation, initial assessment more accurately captures the essence of this decision making process once a PSR is screened in for OCS intervention. At its core, an initial assessment requires OCS to go beyond whether the reported allegations are substantiated or not substantiated, but rather to gather information to make an informed assessment about whether the child is unsafe or at high risk by the parent/caregiver. By employing family centered practices, information can more easily be gleaned to learn the extent of the alleged maltreatment, circumstances surrounding the alleged maltreatment, family/adult functioning, child functioning, parenting practices of the parent/caregiver and disciplinary practices of parent/caregiver.

The initial assessment process assists OCS in determining whether the child is unsafe or at high risk of maltreatment and the extent of the familial protective capacities. Previous practice centered on only the alleged maltreatment and was more narrowly focused on the condition of the victim at the time of the report. Practice is now geared to evaluation of the obvious present danger, but also to the entire family and their overall functioning. This helps the case worker determine whether it's likely that the child will soon be unsafe and what type of intervention is needed to alleviate the impending danger. If it is determined that the child is unsafe or at high risk, OCS will open a case for Family Services and work with the family to implement the least intrusive approach to keep children safe, first with consideration of an in-home safety plan and last, an out-of-home placement. The initial assessment serves as the foundation for building the ongoing assessment and case plan with parents being an equal partner in that process.

3. Family Services

OCS provides Family Services to families with children remaining in their home as well as to families whose children have been placed in out-of-home care. The identified safety threats and/or high risk and diminished protective capacities will be reviewed with the family, including age appropriate children and youth and tribal representation if appropriate, and will be used to help inform the case plan. OCS will further assess the needs of the child and family members assuring that all safety/risk issues are addressed in the case planning process with the family.

Family engagement is critical to laying the foundation to build trust and build mutually beneficial relationships with the family, community providers, stakeholders and OCS staff. The engagement process must take into account the culture of the family and help the family to identify all potential support systems to better assist them to be active participants in their own family's problem solving. It is imperative that parents clearly understand and be able to articulate the identified threats to child safety, such that both parent and worker have a clear understanding of what must change. The case plan must work to alleviate the underlying issues that resulted in the safety threats and to enhance diminished protective capacities. Family engagement also commits OCS





to full disclosure with the family as to OCS' decision making, and laws and policies that affect family's situation. Parents have the right to self-determination. They are the experts about their family. Within the constraints of child safety, case workers will engage families in a process whereby the parent(s) are in control, not the agency. Decisions about what they need and when they need it are theirs to make. Trust and partnership should be built so that case workers are viewed as a true "helper" thereby providing a stronger likelihood of the parental success in changing behavior.

Essential to the Family Services provision is case worker visits, with both the child and parent/caregiver. The assigned worker must meet with both the child and parents face-to-face at least once monthly, but as often as indicated to keep the child safe and consistent with the needs of the family to achieve the case plan goals.

When considering the conditions needed for the child to be returned to the parent/caregiver, the factors to be explored by those involved in the family's decision making are whether safety can be managed in the home and extent of behavioral changes made as a result of the work on case plan. Clarity in conditions for return assures that the parent/caregiver knows exactly what must be accomplished in order to be reunified with their child. Complete compliance with the case plan should not be the determining factor whether a child is returned to the parent/caregiver, but rather that safety can be achieved in the home.

From the point of intake to case closure, continuous reassessments of child safety and family functioning are being determined to ensure steady progress toward the child and family's goals. In collaboration with families, tribes and service providers, case plans are updated to address the family's changing circumstances. OCS works first to reunify children with their parents/caregivers. When that is not possible, other permanency goals, such as guardianship, adoption or other planned living arrangements are considered in an effort to meet the child's best interests.

4. Resource Families

Resource families consist of relative or kinship families, licensed foster care families, guardianship families or adoptive families. Regardless of the type, resource families play a key role in the life of a child in care.

When out-of-home placement is needed to keep the child safe, OCS will make diligent efforts to identify, evaluate and consider relatives, family friends and those culturally tied to the family as the primary placement option. When relatives cannot be a placement option for the child, OCS will make efforts to actively recruit and support resource families within the child's home community and in close proximity as possible to the child's parents, to assure that the child may continue to maintain important and lasting cultural, familial, educational and community-based connections.

Relative assessments, licensing standards, and home studies are utilized by OCS staff to ensure

that children are placed with resource families that can provide a safe environment for the child. Families and resource families, in partnership with OCS workers, will work together to ensure that the placement best meets the child's needs for safety, permanency and well-being, and will promote reunification of the family whenever possible.

While placement of the child with their siblings is always preferred, frequent visits are arranged when siblings are placed apart due to specific needs of the child or other permanency issues. Likewise, frequent visits are arranged between the parents and the child to ensure that the child remains connected to their parents and the parents remain a primary force in the child's life.

At the point of family reunification, OCS staff and resource families will actively support the child and the child's family to successfully and permanently return home. Should the child be unable to return to the parent's home, OCS staff and the resource family will actively prepare the child for adoption or guardianship with a permanent, "forever" family.

5. Service Array

The State of Alaska has in place an array of services that is aimed at meeting the needs of all children and families that come to the attention of the child protective services system. Services are provided by grantees that are funded by OCS and various divisions within the Department of Health and Social Services, including Juvenile Justice, Public Assistance and Behavioral Health. These community providers perform a critical role in their partnership with OCS to keep children safe, enhance the parent's protective capacities, achieve permanency and child well being. Strong community partnerships, especially those with Tribes and stakeholder input into the service array needs in Alaska are an important component to OCS achieving its necessary outcomes for children and families in Alaska.

Conclusion

OCS Practice Model is supported by agency staff, management and leadership; Alaska's automated child and family information system; an evaluation unit that completes quality assurance reviews and leads continuous quality improvement efforts; and a staff training unit run by the University of Alaska – Anchorage. We are pleased to present this Practice Model document, with the intent that our families, stakeholders and communities better understand the mission, vision and guiding principles of our agency. By continuing to practice these core principles and collaborating with our community partners, Alaska can keep children safe and help families become strong.





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