

## California Partners for Permanency: A Comprehensive and Culturally Responsive Approach to Practice and System Level Change.

*“Being invited to the table as a Partner, to pose the problem and create the solutions, is an important step forward”*

*Youth, Families, African American and Tribal Community Representatives*

California Partners for Permanency (CAPP) is one of six projects nationwide funded through the Permanency Innovations Initiative (PII), a multi-site federal demonstration project designed to improve permanency outcomes among children in foster care who have the most serious barriers to permanency.

CAPP’s focus is on implementing a practice model that effectively addresses disparities in outcomes and supports positive permanency outcomes for all children and families with a targeted effort to help those children and youth who are in care the longest and experience the worst outcomes.

CAPP acknowledges the fundamental relationship between community and tribal involvement and partnership and the successful implementation of a child and family practice model that reduces long term foster care for the most impacted families. In addition, there is a clear recognition that practice and system changes are inextricably linked and true partnerships are needed to understand how the day-to-day actions and interactions of child welfare and the broader system of services and supports for children and families must change so that all children remain connected to their families and to cultural, community and tribal supports that address their underlying needs.

With the technical support and assistance of the Center for the Study of Social Policy, and with significant input and guidance from local community and Tribal partners, CAPP sites have been conducting local system reviews to better understand the systemic barriers that undermine achieving optimal permanency outcomes for children and families.

This comprehensive focus on identifying and addressing key systemic barriers to permanency has guided the development of the CAPP Child and Family Practice Model. Key findings and how they are addressed by the **four front-line practices** in the Child and Family Practice Model are illustrated in the chart below.

<b><i>Systemic Issues</i></b>	<b><i>CAPP Child and Family Practice Model: Front-Line Practice Approach</i></b>
<p><b>1. <i>Weak and Insufficient Engagement Practices</i></b></p> <ul style="list-style-type: none"> <li>• Social workers, lawyers, judges and other practitioners are not effectively organized in ways that prioritize supports and enhance engagement and support of families, youth and caregivers.</li> <li>• There are inadequate systems of accountability and support for a culturally-sensitive and respectful, strength-based approach with families.</li> </ul>	<p><b>1. <i>Exploration &amp; Engagement</i></b></p> <p>Five practice behaviors support effective <u><i>Exploration and Engagement</i></u> with families and involve skillful use of appreciative inquiry, honest and respectful interactions with families, and actively listening to and learning from families so that their strengths, perspectives and underlying needs become central in the work of child welfare agencies and partners.</p>
<p><b>2. <i>Lack of Family Voice and Urgent Sustained Permanency Focus</i></b></p> <ul style="list-style-type: none"> <li>• There are too few opportunities for family and youth voices in decision making and information from the family, their caregivers and Tribes is limited or missing in assessments, reports, or other critical decision points.</li> <li>• Staff, resources and partnerships are not organized to maximize opportunities for safe and timely permanency, resulting in an inadequate and irregular focus on permanency for children, particularly older youth.</li> </ul>	<p><b>2. <i>Power of Family</i></b></p> <p>Six practice behaviors recognize and support the <u><i>Power of Family</i></u> and involve seeking out, strengthening, affirming and incorporating the voice of the child and family in all casework and documentation. The family is actively involved in assessing, finding solutions, planning and decisions about their lives. There is linkage to and coordination with formal and informal advocates and peer supports (parent partners, attorneys, CASA's, community and tribal representatives, cultural brokers, etc.)</p>

<p><b>3. Lack of Relevant, Timely, Well-Coordinated Services</b></p> <ul style="list-style-type: none"> <li>• Lack of system coordination and meaningful involvement of families, communities and Tribes to effectively identify and address underlying family needs.</li> <li>• Poor systems of accountability to determine families receive services with progress tracked and case plans adjusted/cases closed.</li> </ul>	<p><b>3. Circle of Support</b></p> <p>There are seven practice behaviors that establish, bring together and support a child and family team or <u>Circle of Support</u>. The team includes natural family and cultural/ community supports and is facilitated in critical thinking and discussion about child safety, family and cultural strengths, underlying needs and the roles team members will play over time, including post-permanency, to ensure child safety and family support.</p>
<p><b>4. Lack of Accurate Understanding of Family Strengths and Needs</b></p> <ul style="list-style-type: none"> <li>• Problematic administrative protocols and practices that do not focus on strengths and underlying needs of families; casework tools and processes do not take into account personal histories of trauma, the trauma of child welfare interventions on parents and child and historical trauma.</li> <li>• Inadequate resources to support parents/caregivers in their ability to heal and parent children.</li> </ul>	<p><b>4. Healing Trauma</b></p> <p>Five practice behaviors focus on <u>Healing Trauma</u> and involve partnerships with families and their communities and Tribes to understand and meet the underlying needs of children and their families. These practices identify, advocate for and support use of culturally sensitive and trauma-informed supports and services to address child safety, cultural relationships and health, wholeness, healing, recovery and well-being of the child and family.</p>

The Child and Family Practice Model is a comprehensive and culturally responsive approach to both *practice* and *system level* change. Outreach and involvement of communities and tribes has laid the foundation for local partnerships that are guiding development of system solutions and promoting accountability in implementing and evaluating the Practice Model in 4 California counties: Fresno, Humboldt, Los Angeles (Pomona and Wateridge offices) and Santa Clara.



The Child and Family Practice Model was developed as part of a 5-year, federally funded project to reduce long-term foster care. To learn more, visit [www.reducefostercarenow.org](http://www.reducefostercarenow.org), or contact [CFPMinfo@cfpic.org](mailto:CFPMinfo@cfpic.org). The contents of this document are solely the responsibility of the authors and do not necessarily represent the official views of the Children's Bureau, which funded the CAPP/CFPM project under Cooperative Agreement 90CT0153.

