The Lifelong Connections Initiative

AN EXAMINATION OF EXEMPLARY ENGAGEMENT PRACTICE

INTRODUCTION

This learning brief explores the evolution of exemplary practice, along with the elements and conditions primarily responsible for its development, in a combined Family Finding/Family Group Decision-Making model implemented by a partnership between San Francisco Human Services Agency and Seneca Family of Agencies. Core themes were synthesized from a series of individual and dyad interviews with team members who carried out the project, lifting up what worked and was learned in the process. Key reflections and recommendations are formulated to provide the reader with ideas to accelerate and enhance their practice development and ultimately the installation and implementation of the desired practice.

BACKGROUND

Child welfare agencies across the United States are mandated to "promote the well-being of children by ensuring safety, achieving permanency, and strengthening families to care for their children successfully" (Children's Bureau, 2016). At the federal level, the passage of the Adoptions and Safe Families Act in 1997 helped to bring permanency explicitly into the goals and objectives of child welfare. Nearly a decade later, legislative requirements to keep children with families and to look for relatives as placement options were expanded through the Fostering Connections Act of 2008. Local child welfare agencies, many of whom were already promoting relative placements and other permanency practices, such as Family Finding, had to examine their policies and practices to ensure that permanency was central to their core practice model.

Historically, San Francisco's Human Services Agency (HSA) had been at the vanguard of finding family members for placement. However, despite positive trends in reducing the number of children entering and remaining in care, San Francisco HSA has struggled with a disproportionate representation of African-Americans in the child welfare system, and lengthy stays and multiple placements for older system-involved youth. Leadership at HSA identified a need to improve their success in reunification and relative placement through better finding and engaging of a network of supports who develop several options to attain safe and enduring permanency for every child involved in the system.

KEY FINDINGS

- Successful installation and implementation of new practices require a sufficient planning period to align and stage the introduced model with existing, on-going efforts.

- Effective staff selection, training, and coaching are vital to ensure chosen practitioners have the tools, skills, and confidence they need to be successful.

- Collect and monitor key indicators from the onset of service delivery to establish regular and consistent continuous quality improvement cycles that track progress and indicate when adjustments to practice and systems are needed.

The National Institute for Permanent Family Connectedness (NIPFC), a member organization of Seneca Family of Agencies, has been at the forefront of integrating the Family Finding model with other key practice models, such as Safety Organized Practice and Family Group Decision-Making. Additionally, NIPFC's precursor, the California Permanency for Youth Project (CPYP), provided technical assistance to 21 county child welfare agencies across California, including San Francisco, to support system-wide incorporation of key permanency practices, including the integration of Family Finding.

Since the late-1980s, Seneca has built a strong partnership with San Francisco HSA that carries throughout the child welfare continuum of care. Seneca and HSA, with consultation from NIPFC, have been co-involved in multiple federally funded activities and projects focused on strengthening permanency practices within San Francisco's child welfare system. Seneca currently partners with San Francisco to provide trainings for practitioners and agencies that serve youth in or at risk of out-of-home placement, using federal Title IV-E Training funds.

The existing partnership between San Francisco's HSA and NIPFC/Seneca laid the groundwork to pursue federal funding that was released in conjunction with the Fostering Connections Act. In September 2012, NIPFC/Seneca, in partnership with San Francisco's HSA, was awarded a three-year federal Family Connections grant to implement the Lifelong Connections Initiative (LCI). The LCI is grounded in the belief that permanency can be improved by addressing the immediate emotional and resource needs of the child and caregiver through the process of building a lifetime network support team of family and informal supports. The LCI was a combined Family Finding and Family Group Decision Making (FF/FGDM) service model ("the model") imple-mented by Seneca, targeting children and youth entering foster care. The LCI aimed to provide integrated FF/FGDM services to these children and youth to improve safety, wellbeing, and permanency outcomes through engagement of families and other informal supports. Embedding these practices within San Francisco's child welfare system was designed to shift the practices of child welfare workers and involve families more in the planning and decision-making process during permanency planning[1]. The service delivery for the grant period began in March 2013 and ended in November of 2015.

For the service delivery component of the LCI, the team structure included 6-8 permanency specialists, a relative notification specialist, a program supervisor, and a project director. Training, coaching, and consultation support were provided by NIPFC.

1 For more detailed information on the Family Finding model, as defined by the National Institute for Permanent Family Connectedness, see www.familypermanency.org. Additional information on Family Group Decision-Making can be accessed here: http://www.ucdenver.edu/academics/colleges/medicalschool/departments/pediatrics/subs/can/FGDM/Pages/FGDM.aspx

Child Trends, a research and evaluation firm based in Washington, D.C. with significant experience evaluating Family Finding and other permanency practices, joined the project in order to conduct the formal evaluation of the LCI (www.childtrends.org). To promote successful model implementation and evaluation, an Implementation Team met monthly to track and monitor progress and discuss successes and challenges related to the LCI. The Implementation Team was comprised of the director of NIPFC, Seneca's research director, the project director, the project supervisor, Seneca's data analyst, a senior analyst from HSA, and the research scientist assigned to the project from Child Trends. On an ad hoc basis, permanency specialists would attend monthly meetings to provide perspective from the field on how the work with families was proceeding and to learn and contribute to implementation of the LCI. A subset of the Implementation Team served as the Leadership Team. The Leadership Team included the director of NIPFC, the LCI project director, and the research director and helped set the agenda for monthly meetings and provided overall oversight and direction for the project.

KEY DRIVERS

The LCI Leadership Team was interested in developing a learning brief to present knowledge gained over the course of the project that fell outside the scope of Child Trends' formal evaluation. The team felt there were important lessons to be gleaned from talking directly with key staff involved with the delivery of services and with those involved in the training, coaching, and supervision of those staff.

- Observations by the LCI coaches and supervisors of the evolution of high-quality and exemplary work by the permanency specialists over the life of the project, the nature of which could only be satisfactorily captured in narrative form.

- The installed coaching and supervisory structure created the space which allowed permanency specialists to tell stories about the work that was happening with families. These stories were highlighting successes with families and drawing out important lessons about collaboration with county protective service workers and the larger system.

- Two fidelity meetings were conducted where the team carefully reviewed and discussed case progression in terms of key fidelity measures (e.g. number of family connections discovered and engaged). These meetings helped to differentiate between cases that were progressing at a good pace and ones that were not gaining momentum, from a model fidelity perspective.

- An internal shift observed by San Francisco HSA to better align with the content, values, and purpose of the work, as a result of the context of partnership, training, and supervision that supported the work.

- Motivation to capture the work and context not only for internal purposes but to inform the field around implementation of Family Finding.

These observations, narratives, and explorations of the work spurred the decision to invest additional efforts and resources into a learning brief. It is also a way of honoring the people doing the work and the courage and resilience of the young people, parents, and families with whom they worked.

METHODOLOGY

The director of NIPFC, in collaboration with the former Seneca research director, developed a set of questions that would guide the interview process with the permanency specialists. Once those interviews were completed, interviews with the primary coaches and trainers were conducted to learn more about the training components and the support provided to the permanency specialists. It was also determined that interviewing dyads of permanency specialists and county protective service workers, who would collaborate on cases during the project, could render some insights on what effective collaboration looked like in practice, and what elements could be identified as foundational to the success of that collaboration. With these goals in mind, the interviews included the following key informants:

- Five permanency specialists

- Two dyads of Seneca permanency specialists and HSA protective services workers

- The Project Supervisor who oversaw the work performed by the permanency specialists

- The NIPFC director who provided oversight for the training and coaching of staff

- An NIPFC trainer and coach who provided additional support for permanency specialists

- An HSA senior analyst in charge of overseeing external contracts with nonprofit agencies

Interviews lasted between thirty and sixty minutes and were video or audiotaped and transcribed.[2]

2 Youth and families were not included as interview subjects for several reasons. First, it was beyond the scope of the brief, which is intended to reflect internally on the processes, successes, and challenges of the project. We also wanted to respect the confidentiality and privacy of families who received services. Lastly, we were mindful of not replicating focus groups of families conducted as part of Child Trends' formal evaluation.

"You have to trust the family and let the process unfold."

THEMES FROM INTERVIEWS

The interviews were designed to explore what was most effective about the work, what permanency specialists felt most proud of, and to better understand the foundational aspects in place that helped facilitate the best individual and collaborative work possible with families. The following summarizes the themes that emerged from the conversations with respondents. The themes are connected and interdependent, providing important insight into the nuance and texture of family engagement and permanency work.

VALUES AND RELATIONAL STANCE OF THE PERMANENCY SPECIALISTS

The practice of Family Finding depends on effective engagement with found family members to learn of the families' strengths, values, and history, and to continue discovering more people connected to the child and family. The model directs a positional shift on the part of the helper—doing *with,* not *for*—which enhances authenticity to each interaction via a stronger and more respectful connection[3]. This shift promotes trust and respect, leading to worker commitment to the model. When permanency workers can convey genuine interest and concern for the family's well-being, instead of focusing solely on the child welfare agency's need for placement, they foster the family's openness and willingness to partner with the social service agency.

Every permanency specialist and trainer/coach interviewed spoke of establishing a particular relational stance towards families, grounded in the belief that families have the answers to the difficulties they are facing. The permanency specialists emphasized the importance of maintaining an open, non-judgmental, strengths-based view of families, even as these families were experiencing challenges. This stance is transmitted to families through asking about their values, hopes, abilities, and intentions for their lives, prior to delving into the vulnerabilities and behavior of their past. This helps permanency specialists to more fully appreciate the range of experience and strengths of the family, rather than to base their planning on a narrower, problem-focused viewpoint. This stance of openness about the whole person is grounded in the understanding that families involved in the child welfare system may be experiencing significant trauma, grief, and loss that may impact their thoughts and behaviors. These lenses are helpful for generating alternate explanations and perspectives about difficult behaviors to remain open to ongoing engagement with families.

3 Madsen, William C., & Gillespie, Kevin. (2014). Collaborative Helping: A Strengths Framework for Home-Based Services. John Wiley & Sons, Inc.

For example, one permanency specialist talked about a family where the grandmother who was experiencing significant grief via multiple, tragic losses, was sending threatening voicemails to her and the county protective services worker. Instead of immediately ceasing contact with the grandmother, the permanency specialist provided the opportunity for the grandmother to express the grief about the losses she was experiencing, and once she felt listened to, she was then able to work with the permanency specialist to provide a list of names and phone numbers for over 30 family members who could be supports for the children.

Other values mentioned across interviews with permanency specialists were curiosity and courage. Curiosity was repeatedly stated by permanency specialists as an important value and stance to maintain in order to be open to families, to hear what is important to them, and to understand the values they hold. By remaining curious, permanency specialists were able to engage with family members in an authentic way, and to learn more about the hopes, dreams, and intentions of the youth and family members. This stance leads to collaboration with the families and the sense that permanency specialists are there to support families and assist with the planning process, instead of deciding what is best for a family. Permanency specialists learned through training and coaching to see distress as testimony, i.e. what one is stressed about is indicative of what they hold as important. When workers were curious about what is implied in the distress or anger or frustration conveyed by a youth or family member, they became more likely to learn more about what is important to that person.

Courage and curiosity seem related in the sense that permanency specialists talked about needing to "lean into uncomfortable moments" and hold the stance of curiosity even when conflict arises or roadblocks occur. As put eloquently by one permanency specialist, "When you have faith in what you're doing is the right thing, you can have courage." Implicit in this statement is the idea that if you have faith in the family as experts, you can summon the courage to hear the testimony underlying the family's distress.

The values discussed by the permanency specialists resonated with the values and the praxis of the Family Finding model. The model emphasizes the notion that the family is the expert in their lives and they belong at the table to participate in and drive decisions about their kin. This stance conveys that every family has value and is necessary and ultimately responsible to make the commitments and provide the safe love, care, and oversight of their kin, challenging the perception that the child welfare agency knows what is best. Michael White (2007) refers to this as being "decentered but influential." Professional knowledge is not privileged over local knowledge brought by the family. The training and coaching provided by NIPFC to the permanency specialists reinforced how to enact, embrace, and transmit these values to families for authentic engagement, which is in alignment with safety-organized practice.

"When you have faith in what you are doing is the right thing, you can have courage"

TRUST

Trust was a theme that emerged over and over in the interviews with LCI grant staff, including those with permanency specialists, the worker dyads, and with the trainers/coaches. Aspects of trust included the need for trust between the family and the permanency specialist, between the permanency specialist and the protective services worker, as well as between the workers and the model process. This idea of trusting the model was linked to having the courage to do the work and embrace the unknown. One permanency specialist described a meeting with many family members from both maternal and paternal sides, where she had initially been told by county protective service workers that such a meeting was a "terrible idea" because of the observed conflict between the two sides of the family and the fear that bringing them together would escalate conflict. After careful planning and preparation, the permanency specialist and the HSA protective services worker decided to hold the meeting and trust in the model and in the family. In her words: "You have to have faith in the model. You have to trust the model, and you have to trust the family and let the process unfold." Trusting the model is synonymous with trusting the family. As in Safety Organized Practice, the Family Finding model identifies collaborative practice as more effective than patriarchal, top-down approaches. The permanency specialist goes on to describe that during the meeting with the family she was not sure whether it was going well because there was a lack of resolution or consensus among family members. At that moment, an uncle spoke up and said, "What we are talking about is love. We're talking about providing love for these kids." She describes a tonal shift in the room after he spoke where the sense of confrontation dissipated and people quietly nodded in agreement. For the permanency specialist, this was the signal which validated her faith in the meeting process, resulting in the family moving away from conflict towards productively offering their ideas and perspectives as they established ongoing supports for the children. This story beautifully illustrates the transmission of trust through authentic engagement—when the permanency specialist had trust in the model and in the family, and created the space for the family to trust in the process, and in each other's positive intentions, they were able to move past their conflict to talking about love. As Bruce Perry notes, "The more healthy relationships a child has, the more likely he will be able to recover from trauma and thrive. Relationships are the agents of change and the most powerful therapy is human love."[4]

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4 Perry, B. D., & Szalavitz, M. (2006). The boy who was raised as a dog: And other stories from a child psychiatrist's notebook : what traumatized children can teach us about loss, love, and healing. New York: Basic Books.

Another important aspect of trust which emerged from the interviews was the notion of trust between the permanency specialists and the trainers/coaches and supervisors. Permanency specialists established and benefited from a great deal of peer support, in addition to the support they received from their supervisor and two trainers/coaches with extensive experience with the model. Whenever permanency specialists identified areas they felt they needed additional training or coaching, it was provided. This trust helped foster an openness to learning and growth from the permanency specialists, both those who were more seasoned with permanency work, as well as those newer to the field. This trust enabled permanency specialists to embrace more fully their abilities to be present, humble, and curious. Holding this stance with families helped elicit meaningful discussion during family team meetings.

An important facet of the coaching with permanency specialists was to help them transmit to the protective services workers the values and relational stance they held in their work with families as well. Coaches reinforced the need to retain curiosity and a spirit of collaboration in their interactions with social workers, and practiced those behaviors during coaching sessions. The coaches helped shine light on the trust being built between permanency specialists and county protective service workers by eliciting stories of partnership. During the trainings with protective services worker clusters, the lead coach invited a permanency specialist to talk about ways in which they successfully partnered with protective services workers. If the protective services worker was also present at the training, they were also invited to share their perspective. These activities helped to establish a culture of shared recognition and accomplishment, and to demonstrate the importance of alignment and collaboration among all involved as key elements to achieve the desired outcomes.

COACHING AND SUPERVISION

Early on in the project, permanency specialists identified a need for more of a clinical lens in their supervision, so NIPFC trainers were enlisted to support the project supervisor during group supervision, as well as to assist with individual supervision. The group supervision model was interactive and based on the idea that each team member, regardless of position and responsibility, functions as both a teacher and a learner. Supervisions were structured so that team members presented to each other, sharing with each other the practices and tools they used successfully, which in turn, helped them feel more grounded in and confident of their work. While there were moments of didactic teaching, they were woven into the case presentations and the conversations among the team, a tested strategy from adult learning theory that promotes absorption of the content.

> **INTENTIONAL STRENGTHS**
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> *When standard intake instruments ask for youth and family members to list strengths, social workers often receive an answer such as "Charles is good at art." The engagement techniques in which the Family Finding model is rooted try to ask questions that thicken that story. Questions such as "Where did you learn about art? Who in your family do you connect with around art? Where do you hope it takes you? Why it is important to you?" These questions tease out the social-relational aspects that are connected to the strength, and help the workers understand the values, hopes, commitments, and stories that surround the strength. We develop "thick versions of people. Not the single story, but the full, thick story" (Bateson, n.d.)*

Another core construct of the training and coaching brought into the group supervisions was to introduce tools and strategies experientially so that permanency specialists could viscerally understand what families may experience during engagement. The process of performing the exercise themselves helps connect permanency specialists to their own values, and explore where the connection to those values comes from, while simultaneously giving them more exposure to and practice with a tool for engagement with families. Connecting back to values also helped permanency specialists remain centered during conflict, and thereby maintain the trauma lens and a family-centered, strengths-based approach.

An important component of the coaching and supervision was the development of the team itself. Deliberate efforts were made to strengthen the team's reliance on one another, creating a powerful dynamic of peer support. For example, permanency specialists were given the opportunity to practice with each other during supervision, and to shadow each other during family team meetings and meetings with county social workers. During interviews, both key trainers talked about helping permanency specialists go "deeper" with the work and become "more sophisticated" with their work with families, while maintaining fidelity to the model. This language is in contrast with the idea of doing something better or correctly, and demonstrates the concept of continuous improvement to better serve families, no matter what one's clinical background or experience level. One trainer spoke of it this way:

"The best programs are the ones where staff know, 'Why are *we* doing this?' and 'Why am *I* doing this?'" When staff ask that personal "why" and get connected to their own personal values and ethics related to the work, they can work hard and not get burned out as easily. Being connected to their own values helps them better understand how to listen and be open to families' stories, and connect to their values.

This component of supervision and training was embedded into the training modules not only for permanency workers, but for any protective services workers who were interested in the model and adopting its practices. Each training session had opportunities for demonstration, practice, coaching, and feedback to ensure the model components were connected to the values and beliefs of the individuals receiving the training, so that those values would be held in the work with families.

IMPORTANCE OF TOOLS

Access to clinical tools, implementation tools, and tools related to the model itself was cited in the interviews as a critical support for permanency specialists. One permanency specialist spoke about her use of the "Tree of Life", which is an engagement tool designed to elicit information about how and what is important to the individual doing the tree. Here is how she described using the "Tree of Life" as an engagement tool:

> *I don't think I learned how to do engagement until I started working on this project—embarrassing for someone who has been doing family therapy for years! When I saw how clients reacted to me when I truly engaged them, that they were more willing to share their story, they felt like they were being heard for once, then they were will-ing to share information about other family members. The "Tree of Life", and this way of engaging people with their preferred identities, getting them thinking about their best self...refocuses so that you aren't starting with the problem. It shifts from what I've read about the family in the paper-work and about how horrible they were to their children, to who their best self is, what they care about. I did a "Tree of Life" with a kid, and when I showed up, he's dressed entirely in gang clothes, and I thought, 'There's no way this kid is going to do this exercise.' But he got into it and it turns out he's not this gangster kid on paper. He wrote about a football coach that he admired. It brought out all these sides of him that I never would have known about.*

Other permanency specialists talked about genograms, blended perspective meeting checklists, and the fidelity instrument that was created specifically for the LCI and was used in supervision to track progress toward goals, including the number of connections made and the number of meet-ings held. Once they learned to utilize the tools effectively, they created their own reinforcement systems for using them. For example, in the vignette above, the permanency specialist could then bring that story into group supervision, provid-ing a specific example of how it helped her engage with the youth and elicit intentional strengths.

TEAMWORK AND COMMUNICATION

Alongside trust, teamwork and communication were noted as key facilitators to effective practice. Permanency specialists spoke of how important it was to have their internal team meet regularly and have the space to discuss cases, prob-lem-solve, and support each other. This was also one of the most important themes that emerged from the dyad conver-sations between protective service workers and permanency specialists. County protective service workers talked about how much they relied upon permanency specialists to update them on the case and to engage with the family so that many family members showed up to the table.

To enable this kind of close teamwork and regular commu-nication, it was hugely beneficial that the permanency specialists were co-located with the protective service workers in the HSA office and could, in addition to emails, texts, and phone calls, stop by desks or catch people walking to another meeting. This ensured a smooth flow of information about the case and built trust between the permanency specialists and their county counterparts. When families sensed the alignment between their county protective service worker and the permanency specialist, it helped foster trust between the families and the system, creating a different experience for families who had perhaps had less positive relationships with the system in the past.

ALIGNMENT AND SYSTEMS CHANGE

One of the key indicators of success for the LCI was to influ-ence systems change at HSA, as evidenced by acceptance and support of the Family Finding/Family Group Decision-Making model and incorporation of its elements into core practice by county protective service workers and the units in which they work.

One shift the HSA Senior Analyst, who participated on the Implementation Team for the three-year duration of the grant, observed over the course of the grant was a change in county protective service workers' attitude towards and openness to permanency practices. Prior to the grant, she noted that the contracted permanency workers had to work hard to "win over" the protective service workers, but by the end of the three years, everyone who was working on perma-nency had a waitlist for services. She also reported seeing an increased focus on family members as permanency options and supports. She said:

> *Before, there was a much more narrow definition of who the relatives were. There was no sense of having a back-up plan to the concurrent plan. Workers would say, 'Well, the plan is family reunification.' Workers over time got used to using the discovery sheets [the documents used to list as many family members as possible] and saw it as information worth looking at.*

When asked what was the driving factor behind these shifts, she stated it was the relationships that developed between county social workers and the permanency specialists. This resonates with the findings regarding the importance of trust among the team, in the model, and with the families.

When the HSA System Analyst was asked to reflect on what her own primary takeaways were, she answered:

> *❝…you can increase the number of connections for children. And that even when you think you've done an exhaustive initial review, you haven't. We learned about the significance of having plans A, B, and C and the value of bringing the family to the table. It's an effective way of doing the work. ❞*

Based on these observations and other feedback that was given by county supervisors and social workers, it is clear that HSA's culture shifted in meaningful ways, in part due to the work of the LCI grant, and in part due to other complementary initiatives, such as Safety-Organized Practice, happening in tandem with the grant. The County continues to explore options to institutionalize permanency practices by establishing a unit that focuses on Family Finding and Family Group Decision-Making, i.e. bringing family members to the table for team meetings and decision-making for the child.

REFLECTIONS AND RECOMMENDATIONS

This brief is designed to articulate the exemplary practice which evolved during the LCI in greater detail than a standard evaluation report would investigate, and to identify the elements and conditions that that helped incubate and accelerate the development of the practice. This section will focus on three broad categories that were absolutely necessary to the development of the desired practice, along with recommendations for prioritizing and strengthening the conditions that would help this practice mature more readily and fully.

SYSTEMS' ALIGNMENT AND TEAM DEVELOPMENT

Upon award of the demonstration project, the Leadership Team was eager to begin serving families as soon as possible; however, it is now clear how important it is for successful implementation to use a more thorough and extensive planning period to ensure staff are fully trained, teams are operational, and partners are clear about their roles and responsibilities. In this case, there was a leadership shift with HSA, our primary partner, which should have signaled the need to reestablish system alignment and roles and responsibilities.

If the system in which the permanency practices are being embedded is aligned with and fully invested into the underlying assumptions of the work, i.e. families are the experts

and it is valuable to seek their input on placement options and other supports, then the model is more likely to be effective. To that end, there was significant effort made to ensure that the permanency specialists and trainers/coaches were knowledgeable about other permanency practices being installed concurrently, such as safety-organized practice. One element that would have further facilitated this alignment, as identified by the senior analyst from HSA, was to have established a framework under which all permanency initiatives operated that was developed at the leadership level and used across all levels of the agency. This framework was later developed after the close of the grant, but implemented earlier, could have been a useful tool for fostering system and model alignment and buy-in.

KEY RECOMMENDATION:

Allowing sufficient time for a planning period prior to implementation is crucial for securing leadership support of the model, for understanding what the practices are on the ground and the extent to which they are aligned (or not) with the model, and for tailoring training to address any skepticism, build upon excitement, and dovetail with existing initiatives. While it is tempting to jump into new initiatives quickly, a deliberate planning phase is a necessary step to successful implementation and sustainability of efforts. This will establish the groundwork and foundation for sustainable, effective practice.

SELECTION, TRAINING AND COACHING OF DIRECT LINE STAFF

In terms of staff recruitment and selection, LCI practice improved following the refinement of the selection process, which sought to align the attitudes, beliefs and skills of the applicant with those of the intervention. Individuals hired to be experts in engagement have to be committed to the relational stance, including the process of engagement and the tools related to it; embody the values and beliefs underlying the model; be comfortable working with families; and see their purpose as constructing networks and facilitating conversations instead of making the decisions.

Greater attention was paid to shadowing, training and coaching of the new staff, who benefited from learning from the more senior permanency specialists who were good fits with the values and purposes of the model. More consultation and coaching were provided during the second half of the project, and the two fidelity meetings were immensely helpful to the staff as a venue to present complex situations and hear a variety of perspectives, as it was to the team who listened to those presenting the work and could discern the circumstances and conditions which fostered or hindered good practice.

Key skills of permanency specialists were having the capacity for organizing big groups and facilitating conversations with families with different opinions and perspectives. They had

to be comfortable with group dynamics and have the ability to connect to the larger social justice aspect of the work. It was also important that permanency specialists, as well as county protective service workers, value respectfulness, curiosity, openness, and humility, and hold these values with families. Permanency specialists needed to reject the single story of how people were victims and/or abusers, but also explore their resistance, their power, and their values. From a dual dialogues perspective, if professional discussion focuses only on how those served have been victimized, and not look at how they have responded in the face of difficult circumstances, we run the risk of totalizing them as helpless and not recognizing the strengths they bring.

KEY RECOMMENDATION:
The importance of defining the values, attitudes and skills of the practice in order to conduct the hiring, coaching, training, and supervision of staff charged to perform this work cannot be overstated. Implementation teams should take the necessary time to ensure that the personal values of the staff selected to perform the work align well with the values/beliefs perspective of the practice model being implemented. Sufficient time and opportunities to practice, be observed and receive feedback are needed in order to build the confidence and repeatability needed for consistent practice that meets fidelity standards. Practitioners require individual and group support to talk through what they are learning, what is working, and what changes need to be made to the model and training plan as the practice is being installed.

While the drive to provide service as quickly as possible is often a prominent driver to launch initiative/grant efforts, the unintended consequence is that the early efforts do not have sufficient confidence or possibly honed skill to produce the consistent level of desired practice, which may not then differentiate itself from a control group for an extended period of time. Training, supervision, and ongoing coaching is critical for this work. Once the people who possess the capacity to embrace this work are recruited and brought onto the team, making sure that they receive adequate on-boarding and training on the model is essential.

Just as importantly, establishing a plan for strong supervision and ongoing coaching and consultation will help the team develop its competencies and skills and support each other

in the work. There is a nuance and complexity to successful engagement—it is more than simply talking about engaging. It takes time to cultivate the ethos, practice the skills and become confident with the tools available to elicit a multi-dimensional story and connect with families around their values, hopes, dreams, and intentions. Hiring people who bring the necessary values and relational stance is a critical initial step, followed by providing them with experiential learning opportunities of the model's engagement tools and techniques, to grow their skills, confidence, and trust when working directly with families.

DATA-DRIVEN DECISION MAKING
In order to make data-driven decisions to improve the work, the data must be accurate, timely, and consistently reviewed by the Implementation Team. For this project, the team could have analyzed process measures more frequently and intentionally that would have provided a concrete, quantified picture of how the work was progressing and where the team might need more support. For example, the team developed a fidelity tool whose function, in part, was to track the number of family connections discovered, engaged, and subsequently listed as a potential permanency options for the youth. In analyzing the tools, the Implementation Team found permanency specialists were not consistently meeting the established targets for numbers of connections discovered and engaged, which was having implications for the frequency of family team meetings and number of permanency options. The trainers/coaches provided additional consultation and coaching around the importance of and resulting benefits from meeting those targets, along with a post hoc analysis of the fidelity tools which revealed encouraging results, including a greater sense of buy-in to the tool itself by the team.

KEY RECOMMENDATION:
Working with internal and/or external evaluators at the outset to clarify roles and responsibilities, data collection and analysis timelines, and data checkpoints can ensure that processes are in place to track and monitor progress, and make adjustments in real-time as needed. Real-time evaluation strategies can help uncover where staff may need additional training, where additional efforts to secure buy-in may be necessary, and to identify other implementation drivers that require attention.

CONCLUSION

This brief is designed to articulate exemplary practice demonstrated in LCI in greater detail than a standard evaluation report would investigate, and to identify the elements and conditions that that helped incubate and accelerate the development of the practice. The mature practice identified in the brief was characterized by the presence of a humble and open relational stance held by the practitioners, accompanied by respectful curiosity to learn about the values, assets, culture, history, and intentions of each family they served to balance the stories of dysfunction or victimization typically present in child welfare reporting. This stance was accompanied by the courage of the permanency specialists to forge ahead in situations in which they were uncomfortable as they were fortified by the trust in the values and beliefs of the model, the opportunities to learn and practice the behaviors, and the support received from their supervisor and coaches. These factors created a quiet confidence that the practitioners could face the complex challenges of the work and remain open to further learning and refinement of their craft.

Additionally, the permanency specialists were steeped in a robust set of tools and strategies, and benefited greatly from partnerships and alignment with their HSA protective social worker peers, which allowed for creativity and spontaneity in the moment as unplanned situations arose in the field.

The hope is that these reflections, and the subsequent recommendations to intentionally establish the conditions to incubate and accelerate this exemplary practice will be of use to many who strive to engage more family and connections of children in care, and improve the quality of relationships of those who are engaged, and promote their involvement in the processes that impact their lives and the lives of their kin.

AUTHORS

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The mission of the National Institute for Permanent Family Connectedness is to advance permanency for all children and youth in care or in danger of entering the child welfare system. NIPFC offers a range of training topics that promote permanence, along with coaching and consultation, across the United States and Canada to provide child welfare agencies with the preparation and motivation needed to implement and support Family Finding in their programs. The single factor most closely associated with positive outcomes for youth is establishing meaningful, lifelong connections to family. NIPFC believes that families are the experts of their own lives and that every child has a family, and family members can be found when we try. For more information on NIPFC and their training, coaching and consultation offerings, please contact the NIPFC Coordinator at: nipfc@senecacenter.org

National Institute for Permanent
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The following are a list of additional resources where you can learn more about the tools and theory that underlie the practice model discussed here. A subsequent implementation brief, which is designed as the companion piece to this document, will offer an analysis of drivers using a stage-based implementation framework.

Additional Resources

The following resources can be found at familypermanency.org under "NIPFC Written Resources":

What is Family Finding?
Robert Friend, Director of NIPFC, LCSW
National Institute for Permanent Family Connectedness, Newsletter April 2016
What is Family Finding

Quality Relative Internet Searches
Clif Venable, Search Specialist
National Institute for Permanent Family Connectedness, Newsletter December 2013
Quality Relative Internet Searches

Defining Due Diligence: Identifying Relatives for Foster Youth
Kelly Beck, J.D.
National Institute for Permanent Family Connectedness, Newsletter February 2014
Defining Due Diligence

Family Finding & Engagement
Michael Mertz, NIPFC
National Institute for Permanent Family Connectedness, Newsletter February 2014
Family Finding & Engagement

The following resources can be found at Resources", under "General

A Call for Radical Change in Child Protection Practice
Kevin A. Campbell, Family Finding Model Author, Jill Borgenson, MSW
National Institute for Permanent Family Connectedness, Newsletter February 2014 A
Call for Radical Change in Child Protection Practice

Family Connections Hawai'i: Final Report
Department of Human Services, State of Hawai'i, December 2012
Family Connections Hawai'i