

# Partnering

*Respectful and meaningful collaboration with families to achieve shared goals.*

“Approaching parents as the experts on their own children, listening openly to their concerns and perspectives, and seeking solutions with them (rather than providing for them) helps foster a trusting relationship between service providers and parents.”

— *Child Welfare Information Gateway, 2012*



## Partnering Ideal

## Developmental

## Unacceptable

Emphasizes collaboration through language that demonstrates respect, inclusion, validation and encouragement for the family members' primary roles in planning and making decisions for themselves and their children.

Inconsistently emphasizes collaboration through language that demonstrates respect, inclusion, validation and encouragement for the family members' primary roles in planning and making decisions for themselves and their children.

Fails to use language that demonstrates respect, inclusion, validation and encouragement for the family. This may include intimidating, blaming or shaming the family.

Encourages the family members to identify and select the services and agencies they feel will best meet their individualized needs, and provides the family members with other known services and agencies that they may want to consider.

Provides the family with a list of agency-identified services and service providers to select from and does not inquire to see if the family has any thoughts on services or providers that were not on the list.

Identifies a service or service provider for the family without any discussion of other options.

Encourages and emphasizes the importance of families participating and engaging in family meetings during home visits and critical junctures in the life of the case, such as safety planning, family service planning, family service plan reviews and case closure.<sup>1</sup>

Sometimes and/or insufficiently encourages and emphasizes the importance of families participating and engaging in family meetings during home visits and critical junctures in the life of the case.

Discourages or avoids opportunities for families to participate in family meetings.

Provides the family with blank documents, such as safety plan, family service or case plan, and reviews, that are completed with the family, using the family's words.

Sometimes provides the family with blank documents that are completed with the family, using the family's words.

Provides the family with an agency-drafted document or a blank document that is left for the family to complete, independent of the worker.

Demonstrates genuine interest in the family members' perceptions of their involvement. Regularly asks the family members if they feel involved, supported and empowered in making decisions that impact them.

Inconsistently inquires about the family's perception of involvement, support and empowerment in making decisions that impact the family.

Overlooks or avoids inquiry about the family's perception of involvement, support and empowerment in making decisions that impact the family.

<sup>1</sup> There may be compelling reasons to work with family members separately – for example, in those cases with a mandatory exclusion from the Alternative Response pathway, intimate partner violence or child safety concerns.



## Partnering Ideal

## Developmental

## Unacceptable

Tailors interactions with the family based on the family's feedback – for example, makes family-requested adjustments as needed to support child safety and the family's involvement in decision-making.

Sometimes tailors interactions with the family based on family feedback. Inconsistently makes family-requested adjustments to support child safety and the family's involvement in decision-making.

Does not tailor interactions with the family based on the family's feedback.

Provides transparent information that is accurate, understandable and complete to the family members to help them make informed decisions and choices in ensuring the safety of their children. Shares results of the assessment with the family, and discusses progress from the perspective of both the family and the agency.

Inconsistently provides transparent information to the family members to help them make informed decisions and choices in ensuring the safety of its children. Sometimes shares results of the assessment with the family, and sometimes discusses progress from the perspective of both the family and the agency.

Does not provide transparent information when working with families. Does not share all known information with families, including results of the assessment. Family progress is discussed only from the perspective of the agency, or the worker withholds the agency's perspective from the family.

Demonstrates and recognizes the family as expert. For example, tells the family members that they are the experts on their family, and they know their family best. Encourages family members to do most of the talking.

Inconsistently recognizes the family as expert, or does not verbalize this. Caseworker does the majority of the talking.

Minimally or does not demonstrate and recognize the family as expert; monopolizes conversations with the family.

Offers to accompany the family to the first appointment with new providers and any additional appointments as requested by the family.

Sometimes offers to accompany the family to the first appointment with new providers and any additional appointments, as requested.

Does not offer to accompany the family to the first appointment with new providers or any additional appointments, as requested.

Encourages families to participate in all formal case reviews (90-day reviews and semiannual administrative reviews).

Inconsistently encourages families to participate in all formal case reviews.

Does not encourage families to participate in all formal case reviews.



# Thank You

## *Fundamentals of Ohio's Differential Response System and Child Welfare Practice Model*

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