

Collaborative Policy for:
Clark County Department of Family Services
Nevada Division Child and Family Services
Washoe County Department of Social Services

**NOTE: This policy has been renamed
0203: Case Management Practice Model**

CASE MANAGEMENT PRACTICE MODEL

200 NAME OF POLICY
Case Management Practice Model

201 POLICY STATEMENT
The purpose of the practice model is to provide a principle-based framework of practice that will govern the design of front-line practice, training, policy, resource development and quality assurance. In addition, the competencies and skills required to implement the practice model intends to standardize practice and improve safety, permanency and well-being outcomes for children and families.

The Nevada Case Management Practice Model utilizes the Systems of Care Principles as a foundation:

Community-Based: Children thrive in the context of their own homes, communities and schools. Systems of Care ensure a wide range of home-and community-based services and support to promote the safety, permanency, and well being of children, families, and the community. Decision-making responsibility rests at the local level, with key links to the county and/or State government.

Child and Family Involvement: In Systems of Care full family participation requires mutual respect and meaningful partnership between families and professionals in the planning, implementation, and ongoing operation of the Systems of Care. Families are involved and their voice is valued in all levels of the Systems of Care.

Interagency Collaboration: Interagency collaboration within Systems of Care engages all child and family serving agencies at all levels of the public, private, and faith-based sectors, including child welfare, juvenile justice, mental health, education, substance abuse, domestic violence, health, and agencies responsible for serving Native American families.

Cultural Competence: Systems of Care tailor services (location and types) and programs by considering the cultural, ethnic, and racial makeup of the community. Agency policies, training suitable resources and family engagement are critical to ensure cultural competence.

Individualized and Strength-Based: Every child enrolled in a System of Care participates in an individualized plan of care that focuses on the strengths, challenges and needs of the child and family.

Accountability: Systems of Care ensure outcome data is collected, analyzed, and reported on the individual child and family services system, performance, and financial efficiencies. This information is used to inform all stakeholders and serves as a quality assurance process.

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Key Practice Area Skills

In order to operationalize the Systems of Care Principles, caseworkers will develop skills to be competent in the following key practice areas:

Engagement: Children and families are more likely to enter into a helping relationship when the worker or supporter has developed a trusting relationship with the child and family. Key skills of engagement include the following:

- Developing positive and trusting relationships;
- Listening to families and recognizing strengths and needs;
- Understanding the role of the family's culture; and
- Facilitating the creation of a child and family team for purposes of team decision-making to include the child and family in the decision-making process.

Teaming: Decisions about child and family interventions are more relevant, comprehensive and effective when the Child and Family Team generates them.

- Families are core members of the team;
- Coordination of the activities of case contributors is essential and is most effective and efficient when it occurs in regularly scheduled face-to-face meetings of the child and family team;
- Strengths and needs of the child and family are assessed within the team as children and families are more likely to pursue a plan or course of action when they have a key role in the designing of their plan;
- Collaboration with informal family supports and community services is the resourceful way to build effective services and support for child and family; and
- Communication and interaction with the court must reflect timeliness, preparation, knowledge, respect and accuracy.

Assessment: Obtaining information regarding the events that brought the children and family to the agency's attention, and the underlying causes that brought about their situations is part of the assessment development. Assessment incorporates a structured process of gathering information regarding child and family factors related to:

- Safety;
- Risks of future maltreatment;
- Strengths;
- Needs;
- Culture;
- Goals; and
- Protective capacities (assets and resources that may be mobilized to meet family needs and goals).

Planning: The planning process utilizes assessments to create individualized case plans for children and families, which defines action steps for the Child and Family Team. The plan should list the strengths of the child and family and prioritized needs and specify options and commitments for implementing the plan. Service planning requires the planning cycle of:

- Assess case circumstances and identify formal/informal supports and resources needed;

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- Making decisions on directions to pursue;
- Celebrating all successes; and
- Help families understand time limits on permanency planning

Intervening: An intervention with the child and family is needed through the development of Crisis and/or Safety plans in order to:

- Decrease risk;
- Ensure safety;
- Promote permanency; and
- Establish well-being for children.
- Accessing a continuum of care to support the child and family service plan

Tracking/Adapting: Skills and processes are required to ensure:

- The plan is implemented as developed;
- Evaluating the ongoing effectiveness of the plan;
- Reworking the plan as needed;
- Resources are accessed in a timely manner;
- Challenges and/or barriers to implementation are addressed; and
- The plan is updated as goals are met; additional information is acquired and as new needs arise.

202 AUTHORITY

NRS 432B.030	“Agency which provides child welfare services” defined
NRS 432B.553	Plan for permanent placement of child
NAC 432B.1366	Conduct a family assessment
NAC 432B.180	Assessment of risk required
NAC 432B.185	Assessments of safety of child required
NAC 432B.190	Requirements for case plans & agreements with parents
NAC 432B.200	Use of family’s strengths and resources
NAC 432B.210	Strengthening parental capacity to care for children
NAC 432B.220	Objectives for children
NAC 432B.240	Provision of services to preserve family & prevent placement of child

203 DEFINITIONS

“Agency which provides child welfare services” or **“Child welfare agency”** refers to: 1. In a county whose population is less than 100,000-the local office of the Division of Child and Family Services; or 2. In a county whose population is 100,000 or more, the agency of the county, which provides or arranges for necessary child welfare services. (NRS 432B.030)

“Child and Family Team” consists of the family, the case manager and four to eight people who best know the family. The team develops the service plan; supports the implementation of the plan; inspires unconditional care; and supports the family long after formal services are gone.

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“**Continuum of care**” connotes a range of services or program components at varying levels of intensity.

”**Systems of Care**” has a broader connotation than Continuum of Care. Systems Of Care includes not only the program and service components, but also encompasses mechanisms, arrangements, structures, or processes to ensure that the services are provided in a coordinated, cohesive manner. A System of Care model is built on guiding principles that support community-based services, which are individualized, child-centered, family-focused and provided in the least restrictive environment.

204 PROCEDURES

Not Applicable

205 REFERENCES

Case Planning Policy and Practice Guidelines
Assessment Process Policy and Practice Guidelines