

# Teaming in Child Welfare: A Guidebook



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## **Preface**

Welcome to *Teaming in Child Welfare: A Guidebook*. Teaming is an innovative approach to casework practice. Implementing Teaming is one way that child welfare agencies can support the effectiveness and morale of their caseworkers and line supervisors.

Developing, implementing, and maintaining an effective casework team takes work. It takes time to learn. It takes commitment. It takes focus. It is well worth the effort.

Whether you are an experienced teaming supervisor, a new teaming unit caseworker, an administrator of a local district where teaming is in practice—or just curious to learn more about teaming—*Teaming in Child Welfare* is for you. In this Guidebook we have tried to capture what we have learned over the past three years of implementing teaming in New York State. The Guidebook outlines the processes and steps involved implementing teaming, explains why they matter, makes recommendations regarding the dos and don'ts learned from experience, and details how the New York State Office of Children and Family Services (OCFS) and the Research Foundation of SUNY at Buffalo State College/Center for Development of Human Services (CDHS) support counties in starting and maintaining teams. However, this is *not* meant to be a do-it-yourself instructional manual or cookbook. Starting or expanding teaming is best done with the help of a knowledgeable teaming trainer, facilitator, and coach. This Guidebook is intended to be a resource for you and a companion to the training and technical assistance provided by the Teaming Project staff.

This Guidebook was organized keeping the busy work schedule of child welfare professionals in mind. It is comprised of five chapters that break down the elements of teaming into segments for quick and easy reference. Information on teaming fundamentals is reiterated throughout the chapters to provide context for users who chose to read only those chapters of immediate interest to them. We hope you find the information contained in these pages informative and useful.

## Acknowledgements

*The development of this Guidebook was made possible through the efforts of all the county staff who have bravely changed the way that they work with each other and with families; by the Teaming Model Initiative Project staff at the Research Foundation of SUNY at Buffalo State College/Center for the Development of Human Services (CDHS); the New York State Office of Children and Family Services (OCFS) Design Team staff; and the evaluation team from the State University of New York at Albany, along with our teaming colleagues from Massachusetts whose groundbreaking efforts served as an impetus for bringing teaming to New York State.*

*The information in this Guidebook represents the collective wisdom of the many individuals who have worked on teaming over the past few years. We are deeply indebted to our Massachusetts colleagues, both past and present, for generously sharing what they learned from their state's development and implementation of teaming in child welfare work. Special thanks to Harry Spence for his vision and to Eleanor Dowd, Dennis Souza, Charles McCrea, and Mia Alvarado for their valuable knowledge, support, good humor, and unflagging enthusiasm. The development and spread of teaming in New York State would not have happened without the consistent support of Gladys Carrión, Esq., Commissioner of the New York State Office of Children and Family Services, and her team of child welfare managers, Laura Velez, Sheila Poole, and Bill McLaughlin. The OCFS Design team has worked over the past four years to create and sustain Teaming in New York State. While the team's membership has changed over the years, it has been consistently led by Gail Haulenbeek, Office of Regional Operations and Practice Improvement, with the generous support of Deb Shave, Bureau of Training, and Lori Lehner, Office of Regional Operations and Practice Improvement. The evaluation team led by Nancy Claiborne and Maureen Sinclair of the School of Social Welfare, State University of New York at Albany, have also contributed greatly to learning what makes teaming work.*

*Teaming involves a continuous process of learning—learning how to implement its practices and principles in the unique environments of specific staff units and counties, in varying organizational cultures, and in different program areas. Great admiration and appreciation is due to the CDHS Teaming Model Initiative Project staff, including its former project coordinator, Jim Brustman, and trainers Kathleen McLean and Sandra Wilson for contributing their skills in navigating all of those differences and for sharing their own passion for making the benefits of teaming real for all with whom they work.*

*Their collaboration with the counties participating in the Teaming Model Initiative Project has created the body of learning collected within this Guidebook.*

*All the county staff across New York State who participated in the Teaming Model Initiative Project have contributed to this Guidebook. They have struggled to manage their work while saving time for team meetings and group supervision. At the same time they have taken a chance to learn a different way of working, have been willing to trust others to do work with “their” families, have learned to deal with conflict effectively—and they have all come out stronger for doing so! Creative, resilient, and persistent, they can be very proud of their contributions to the creation of a better way of providing child welfare services and a better environment in which to do this difficult work.*

*January 28, 2010*



# Chapter 1: Overview of Teaming

## *What is Teaming?*

Teaming is an innovative approach to child welfare casework, one in which individual casework is replaced by team casework. This restructured approach challenges and changes the traditional paradigm of how casework services are provided to families, how caseworkers are supervised, how casework is distributed, and how activities are conducted in the agency office. Teaming reassigns responsibility for case outcomes and progress from the individual caseworker to the entire casework team. The restructuring involves assigning responsibility for accomplishing case tasks to both a primary and a secondary caseworker, who are provided with the input and assistance of other team members when needed. Supervision is transformed into a facilitated group process with all members of the group providing input into the decision-making process.

In order to make this significant transition, the organizational culture of individual caseload responsibility must be altered to one that places emphasis on the team's caseload responsibility. This reorganization allows for a true sharing of thought and action as caseworkers seek assistance from each other, their supervisor, and the families they serve. Together, the key players can collaborate to design solutions for the child welfare issues being faced and, as a result, families feel more supported because they know that they have a team of child welfare caseworkers that they can contact when necessary, rather than just a single individual.

## *How Teaming is Different from Traditional Casework*

Teaming is more than just cooperation among unit staff or occasionally helping out with cases. It is not just pairing two workers together to go out in the field to support worker safety. With the teaming approach, individual caseworkers become able to shed their sense of isolation and total responsibility for their cases, since the burden of the decision-making process and the responsibility for task accomplishment is shared among team members. The primary caseworker is ultimately responsible for the quality of the work and the results of that work, but that caseworker is assisted by the secondary caseworker in interviewing, assessment, contacting collaterals, and in documentation. The pairings rotate, so that all team members will function as the primary worker on some cases, the secondary worker on other cases, and a contributing team member on still other cases. In this way, members of the child welfare team are able to rapidly gather assessment information from multiple sources, can arrange services much more quickly, and are better able to manage their responsibilities with regard to accountability

and documentation. With this arrangement there is a shifting of responsibilities, depending on specific case needs and team assignments. Not all cases are formally teamed through the assignment of primary and secondary caseworker roles, but all cases may be the focus of group review and problem-solving, if needed. Caseworkers truly become part of the team when they develop a sense of shared commitment and strive for synergy among team members, who together share a clearly defined purpose (mission) and goals. Successful teamwork is defined by a shared commitment to both the team's process and the desired child welfare outcomes.

The supervisor is integral to this transition. As the supervisor's role shifts to focusing more on promoting, coaching, facilitating, and monitoring casework through teamwork and group supervision, both the supervisor and caseworkers on the team benefit from the shared caseload responsibility. The group supervision process allows supervisors to primarily focus on facilitating and providing quality assurance for decisions, rather than having to bear the burden of making decisions all alone (see Chapter 4: Group Supervision). With teaming, while the supervisor assigns a primary and secondary caseworker to each family selected to be teamed, other team members identify how they can contribute to solutions for the family, to making decisions, and to accomplishing various case tasks.

### ***The Rationale for Teaming in Child Welfare***

Traditional approaches to child welfare casework often result in extreme stress and leave caseworkers with a feeling of isolation and lack of support. Utilizing a teaming approach to casework alleviates the stress of single ownership of casework and decision-making and promotes an environment where multiple viewpoints and complementary skills can result in these improved benefits for team members and families:

- Families have more than one caseworker that they can contact for support.
- Caseworkers can take time off, feeling confident that if a family crisis occurs it will be handled by others in the unit who are familiar with the family's issues.
- Challenging cases provide an opportunity for team members to collaborate in brainstorming strengths-based solutions and in identifying and taking appropriate actions.
- There is an ongoing sharing of knowledge, expertise, and experience among the team members, thus enhancing the effectiveness of each team member.

- Supervisors can have confidence that, even in their absence, the team can use their teaming skills to effectively manage their work and make good decisions.
- Supervisors can focus on coaching case practice, rather than actually doing case practice.
- The team takes on a greater degree of responsibility with regard to case decision-making and management.
- Caseworker satisfaction and feelings of support increase, thereby lowering the risk of burnout and increasing caseworker retention.

### ***A Brief History of Child Welfare Teaming Projects***

The New York State Teaming Model Initiative Project grew out of an effort to make substantial changes and improvements in the way that the child welfare workforce is developed and supported. After the first Child and Family Services Review (CFSR), and as part of the Program Improvement Plan (PIP) developed in 2003, the New York State Office of Children and Family Services (OCFS) implemented two strategies: Strengthening Supervision and Workforce Development.

- The Strengthening Supervision workgroup was charged with identifying strategies to strengthen supervisory practice in order to improve casework practice and, ultimately, to generate better outcomes for children in the areas of safety, permanency, and well-being.
- The Workforce Development workgroup sought to identify the reasons for caseworker turnover and to institute methods for reducing preventable turnover.

In an effort to address the above conditions, OCFS acquired information from the Massachusetts Department of Social Services (now the Department for Children and Families), which had developed an award-winning teaming model to address several of those same conditions, especially with regard to lessening caseworkers' sense of isolation and stress in decision-making.

In 2006 OCFS, along with representatives from several local districts in New York State, met with Massachusetts executive, administrative, supervisory, and casework staff to discuss the experiences of those staff members in developing and implementing their model of teamed casework. Based on the positive Massachusetts experience, OCFS decided to support a pilot of the teaming model in New York State. Given the inherent organizational differences between the New York State system (where local districts administer child welfare services) and the Massachusetts model (which is administered

by the state) certain adaptations of the model were necessary, including recruiting interested local departments of social services to participate in the New York State Teaming Model Initiative Project.

During the initial phase of implementation, OCFS developed a design team consisting of participants from both OCFS and CDHS, along with consultants from Massachusetts. The design team began meeting to develop a design for teaming that would work in New York State and a design for providing the local districts with the training and support that they would need in order to be successful. OCFS solicited interest for Phase One of the pilot in 2007. Six counties volunteered to participate in a learning collaboration with OCFS, and the pilot was launched with a group orientation session for the managers and team leaders from the six counties and staff from OCFS and Massachusetts. The design team adapted from Massachusetts the standard best practice criteria that each pilot site was advised to follow in order to test the effectiveness, design, and structure of team practice in New York State. A corresponding evaluation conducted by the Social Welfare Education Consortium (SWEC) from the State University of New York at Albany (SUNY Albany) began with the administration of baseline surveys at the first Teaming Symposium in March 2007. The evaluation consisted of an annual longitudinal design, with surveys of Round 1 Teaming staff and comparison groups over a three-year period.

In 2008 OCFS issued a second round of invitations to join the Teaming Pilot Program. Two additional counties joined the pilot program, and three counties added a second team. The state-to-state peer consultation process with Massachusetts continued. In addition, state-to-state peer consultation with Vermont was sponsored by Casey Family Services. A second symposium was held with 10 teams from New York State and a team from Massachusetts.

In 2009 OCFS received and accepted applications from seven additional counties, and two counties added a second team. The third annual symposium brought together 17 teams from New York State, two teams from Massachusetts, and a representative from Vermont.

Teaming can be effective in all areas of child welfare. Currently there are the following teaming unit types:

- CPS Investigation
- Blended (CPS, Long-Term Preventive, and Foster Care)
- Ongoing (Court Supervision, Long-Term Child Protective Services with Preventive)

- Family Support (Preventive, Foster Care, and Alternative Planned Permanent Living Arrangement – APPLA)
- Long-Term Preventive
- Foster Care – Adult Services
- Foster Care – Adoption (APPLA-focused)

OCFS anticipates continuing support for the Teaming Model Initiative Project through sponsorship (as resources allow) of annual symposiums, as well as by conducting monthly teaming training meetings for newly formed teams with trainers from CDHS and additional meetings held on an as-needed basis for the existing teams. OCFS, CDHS, and the teaming counties continue to work together to determine the most effective mechanisms to provide this support on an ongoing basis as teaming continues to expand throughout the counties of New York State.

### ***The Roles of CDHS and OCFS in Supporting Teams***

The CDHS Teaming Project staff and members of the OCFS Design Team work collaboratively to plan for the support and ongoing development of teams enrolled in the project. The actual provision of this support is carried out in the following ways:

- CDHS staff meet with individual teams (both at their local district offices and offsite) to provide individualized training, coaching, and technical assistance. Training topics include team-building, group dynamics, and group supervision. Coaching is designed to help supervisors and their teams refine the skills developed during training, as well as to help them troubleshoot any obstacles to team development that they may encounter. This process begins with an initial orientation (“Teaming 101”) for the team members and administrative staff. During this orientation, mutual expectations are discussed and a training plan is developed. CDHS trainers visit the teams on at least a monthly basis during the first several months of teaming, and thereafter meet with them on an as-needed basis. Throughout this process, CDHS trainers also provide technical assistance to supervisors, team members, and administrators by telephone and e-mail.
- The OCFS Design Team organizes and facilitates quarterly conference calls that include the design team itself, the teams participating in the pilot, and CDHS project staff. These conference calls provide an opportunity for teams to share the challenges and benefits they are experiencing. Teams also are encouraged to exchange insights, tips, and techniques among themselves.

- Both OCFS and CDHS staff encourage new teams to visit with established teams in other counties. Such visits provide the opportunity for new teams to observe these experienced teams in action, as well as to deepen their understanding of teaming. CDHS staff can help organize these visits and (depending on resource availability) travel expenses may also be covered.
- An annual Child Welfare Teaming Symposium held in Albany is supported by CDHS project staff and the OCFS Design Team. The Symposium provides an opportunity for county teams, administrators involved in providing support to the teams, and county leads to come together in a collaborative learning environment where they are able to share ideas, learn about best case practices, and attend workshops and issues forums. Topics for the workshops are developed based on the recommendations and requests of current teams, as well as the suggestions of members of the OCFS Design Team. The symposium allows team members to network with other team members representing communities throughout New York State and to learn new skills that they will be able to utilize in their own position, offering an excellent opportunity for revitalization of existing teams and providing valuable focus and guidance for the new teams. CDHS and OCFS will continue to organize these symposiums on an annual basis (as resources allow).

### ***Beginning and Expanding Teaming Initiatives in Local Districts***

During the first three phases of the teaming pilot, OCFS conducted an annual solicitation process in which local district commissioners were invited to submit written proposals of interest. The proposals consisted of a rationale for implementing or expanding teaming, the type of unit participating in the project, the resources that the agency would make available to support the project, and a description of how participation in the project would fit in with the agency's goals.

Applications from all interested counties are reviewed, and a decision is made regarding the number and type of applications that can be supported with the resources available. The selected counties are invited to participate in a conference call with the OCFS-CDHS Design Team to discuss their application. If a county's application is approved, CDHS staff arrange for a mutually convenient time and date to begin working with the new team.

## ***The Teaming Project Planning Guide***

The Teaming Project Planning Guide is a tool for team development (see Appendix A: Teaming Project Planning Guide). The Guide was created in response to requests from existing teams to have access to a reference that would provide useful direction in developing a successful team. CDHS trainers provide copies during the Teaming 101 Orientation meeting. The Guide provides a work plan, in an easy-to-follow chart form, that itemizes the specific steps to be taken to form effective and cohesive teams. It also includes valuable information for supervisors and administrators regarding ways of providing support for the development of the teams. Since the first six months of team development are often challenging, the Guide provides helpful direction for administrators, supervisors, and the newly formed teams regarding various ways of working through any challenges that may surface.

The four sections of the Guide provide information about each of the four key steps in the development and implementation of casework teaming initiatives:

- 1. Team Development**
- 2. Practice-Related Strengths and Needs**
- 3. Advisory Committee and Agency Communication**
- 4. Phasing-In of Teaming Cases**

The chart for each of the four steps is divided into four columns:

1. **Tasks** that need to be completed but that will vary, depending on the development stage of the team. The first tasks are completed with the assistance of CDHS trainers.
2. **Target Dates** for accomplishing key team development activities and milestones, which may actually vary from team to team due to time constraints and the demands of the child welfare casework setting.
3. **Responsible Parties**, where the roles of various key players are designated:
  - CDHS trainers meet with the team to complete various tasks and provide guidance on a monthly basis during the initial startup and on an as-needed basis thereafter.
  - Supervisors and team members are given various tasks to complete (such as development of their team's mission statement and operational agreement), which are accomplished with the guidance of CDHS trainers.

- Management personnel also need to complete certain tasks that support team development (including assisting with the formation of the advisory board and providing materials and support for the team).

4. **Date Completed and Comments on Progress**, which enable teams to keep a clear record of all tasks accomplished during the teaming process.

After working with many teams, CDHS trainers have concluded that completion of each of the four steps outlined in the Guide leads to the foundation of a successful team.

Team supervisors are required to forward an updated copy of the Guide to the CDHS project coordinator via e-mail for review on a monthly basis. This provides CDHS trainers with up-to-date information on the status of the team's progress, which in turn allows project staff to determine how to best meet the needs of the teams during face-to-face meetings.

### ***Levels of Team Development***

Learning to function as a team doesn't happen overnight. It is a developmental process. In order to help current and future teams set clear goals for their development as a team and to help teams self-assess their current level of development, OCFS and CDHS have developed descriptions of the indicators or benchmarks for each of the four levels of team development. The benchmarks for team behavior in each level can be used by team members, the supervisor, and administrators (in conjunction with the Teaming Project Planning Guide) to assess growth and progress in team development and functioning (see Appendix A: Teaming Project Planning Guide, and Appendix B: Levels of Team Development).

### ***Benchmarks for Teams***

The descriptive indicators associated with the various levels of team development included here were developed based on the Teaming Project's experience with actual teams.

#### **Level 1 Team Development**

Level 1 is the first stage in the development of teaming. During this time, the team members work closely with CDHS trainers and their local administration to build a successful foundation for teaming. The team develops its mission statement and establishes the operational agreement to be utilized by the team. At this time, adminis-



tration should be providing the team members with support in their teaming process, providing them with space to sit in close proximity to each other, allowing them sufficient flexibility in their caseload assignments, and providing material support in the form of printed business cards and brochures. During the early phase of team development the team meets on a weekly basis for group supervision and teambuilding activities that are conducted at a regular time and consistent place. Criteria for teaming a case are developed, primary and secondary workers are assigned to the teamed cases, and other team members assist with tasks associated with the case.

### **Level 2 Team Development**

By the time that they reach Level 2, the team members have developed a shared identity as valued members of the group, have established relationships with other members, and have consistently demonstrated collective responsibility for teamed case outcomes and activities. When sitting in close proximity to each other, the team members engage in informal case discussions about both teamed and non-teamed cases. Team members are willing to discuss conflicts with one another and are able to successfully resolve issues. Operating agreements are regularly reviewed and, if necessary, further refined. The team has implemented a successful process for acclimating new team members to the team, and the existing members of the team have been acclimated to any changes in the team membership. The team practices rotation of facilitation roles during group supervision, and each team member has at least one teamed case.

### **Level 3 Team Development**

Teams functioning at Level 3 are regularly taking initiative to brainstorm approaches to working with non-teamed cases. (For example, several counties maintain a short daily morning meeting, at which time they discuss cases that are not “officially” teamed but which are often referred to as “small t” cases, as opposed to the “big T” cases involved in actual teaming activities.) Other cases are informally discussed as part of group supervision. The team’s advisory board is utilized to solve networking and public relations challenges, to share learning, and to support expansion of the teaming approach within the agency. Team members are demonstrating skill in handling multiple roles during group supervision, and the team is seeking feedback from families and service providers regarding the services that the team provides.

### **Level 4 Team Development**

Teams that have reached Level 4 development are successfully incorporating new casework approaches learned in training and group supervision into daily practice, and they are utilizing such approaches in their engagement with families. Mentorship is a distinguishing characteristic of a Level 4 team, and as such the members offer their mentorship as expansion occurs within their agency. They also serve as “voices of experience” as they share their experiences and insights regarding the lessons they have learned with other teams in the project’s team network. Level 4 teams integrate both formal and informal teaming into their team’s daily practice.

### ***Benchmarks for Teaming Supervisors***

The four levels of development for supervisors described here were developed so that supervisors can use them as indicators to assess and measure their own level of effectiveness in their supervisory role in teaming.

#### **Level 1 for Supervisors**

The supervisor plays a critical role in supporting and providing structure for the developing team unit, schedules weekly group supervision, and facilitates case presentation and discussion. During this phase, the supervisor facilitates discussion about the unit’s criteria for teaming a case, helps the team choose an appropriate first case to team, and assigns primary and secondary roles and tasks on that case and other cases. During this initial phase, the supervisor’s role includes helping the team members adhere to the operating agreement developed by the members themselves, as well as ensuring that Tasks 1–11 included in the Teaming Project Planning Guide chart are completed by the team members.

#### **Level 2 for Supervisors**

Supervision benchmarks for a Level 2 team include facilitating the group supervision of more than one case; fostering a supportive, inclusive teaming environment; identifying conflicts between staff; and modeling conflict resolution. The supervisor develops a structure for rotation of facilitation roles during group supervision and initiates and models the process for integrating new members and processing the transition of existing members who are leaving the team. In addition, the supervisor identifies the developmental needs of the team and uses that information to develop or obtain appropriate training for the team.

### **Level 3 for Supervisors**

At Level 3, the supervisor enhances team functioning to include discussion about the emotional impact of case events and circumstances on family members and caseworkers, as well as about generalizing applied learning from a teamed case to other cases. The supervisor encourages team members to brainstorm team case approaches while working with non-teamed cases. Additionally, the supervisor is able to provide feedback to staff during group supervision where the supervisor is concerned about the quality or direction of case practice and can engage the team in developing better alternatives.

### **Level 4 for Supervisors**

The Level 4 supervisor is a “big picture” thinker. The benchmarks for supervision at this level include facilitating team discussion about lessons learned through teaming, along with how the team can share the lessons they have learned with other teams and units in the agency. The supervisor provides mentoring/coaching to new teams internally in the office or at an alternative location. In addition, the supervisor works with the team to identify best team practice goals. The workload is managed collectively and the unit’s work meets timely, quality practice standards (see Appendix B: Levels of Team Development).

### ***What Has Been Learned So Far***

Data from several sources were compiled in order to assess the viability and efficacy of teaming from multiple points of view, including outside evaluation, individual responses, and team reactions. Some of the highlights are included here.

### **Evaluation**

In March 2007 OCFS contracted with the New York State Social Work Education Consortium (NYS SWEC), School of Social Welfare, State University of New York at Albany, to conduct an independent evaluation of the Teaming Model Initiative Project piloted in local districts. This independent evaluation of the Teaming Model Initiative Project employed an annual, longitudinal design over a three-year period. (As of this writing in January 2010, Year Two data is currently being collected.) The study compared survey responses from Round 1 county staff participating in the Teaming Model Initiative Project to a similar unit in a county that is not participating in teaming. In this way, the teaming model can be assessed for its ability to improve participating supervisors’ and caseworkers’ perceptions of their team cohesion, job satisfaction,

professional quality of life, professional self-efficacy, and perception of supervision, along with the caseworkers' intention to stay in child welfare.

Preliminary evaluation results (conducted one year after the Teaming Model Initiative Project implementation) compare all teaming units with similar units that are not teaming. Year One findings indicated that teaming groups are showing signs of movement toward more cohesive functions than the comparison groups with regard to psychological safety, clear direction, shared vision, and commitment. Teaming groups are significantly more satisfied with supervision and are significantly less likely to interview for a job at another social services agency.

To complement the information gathered from teaming and non-teaming staff regarding their perceptions about their work, OCFS is planning to review teaming cases and similar cases from the comparison groups. Indicators of teaming, along with certain potential differences between the groups (in areas such as responsiveness to families and foster families, quality of decisions, and provision of services) will be reviewed to determine whether teaming appears to have any discernable impact on case practice.

### **Anecdotal Observations**

In the past three years of working on the Teaming Model Initiative Project, CDHS has recognized certain elements of teaming that enhance group cohesion and successful teaming:

- **Team members who sit in close proximity to each other and to the supervisor form strong personal and working alliances more quickly and begin to share information regarding teamed and individually managed cases more readily.** Such a seating arrangement allows team members to overhear, discuss, and remain active in the teamed cases, which in turn results in the development of knowledge and relationships with the families and children on their caseloads. Another benefit is a beneficial transfer of knowledge between experienced caseworkers and newer caseworkers, and also to non-teamed cases.
- **Having team members meet at least once per week for group supervision (at which time staff discuss case issues and assignments, as well as their successes and challenges in teaming) enables optimal team development and builds group cohesion.** Observations reveal that the teams that are unable to meet at least once per week have a more difficult time developing group cohesion, are unable to gain the benefits of group supervision, and tend to be less prepared to share tasks. When the team meets on a weekly basis, team members gain a deeper sense of purpose

and can witness the benefits of teaming. There is a sharing of ideas and knowledge, as well as sharing and enhancement of professional skills, between new and experienced caseworkers.

- **During the first six months of the team's existence, it is beneficial for team members to meet with CDHS trainers once a month to develop their mission statement and operational agreement, to conduct their strength and needs assessment, and to engage in other integral activities/trainings.** Since each team is unique in its operations and personal needs, CDHS trainers adapt training content to each team's specific needs.

### Feedback from Teams

The overall reaction on the part of the team members regarding the teaming initiative has been very positive. Team members cite reduced stress, shared decision-making, the opportunity to share the burden of working with challenging family members, and the ability to take needed sick leave or enjoy a vacation without feeling guilty or apprehensive that the needs of the cases they are responsible for will go unmet.

Team members have shared stories about some of their frustrations as well as some of their successes. Since the newly formed teams generally experience the Four Stages of Group Development (Forming, Storming, Norming, and Performing) as explained by American psychologist Bruce Tuckman (1965), it is important for team members to be patient, maintain their vision, and allow the teaming process to develop over time (see Appendix J: Print and Web-Based Resources).

When the teaming process unfolds successfully, team members report positive experiences such as these:

- In one instance, a primary worker was unable to engage with the biological father on a long-term case. While the primary caseworker was initially reluctant to share the case due to a sense of commitment to the case and family, once the case became a teamed case another team member was able to engage with the father and that engagement then promoted positive change in the family.
- Many caseworkers admitted to being skeptical about sharing their assigned cases until they truly realized that the team is there to support them in providing what is best for the family and children. These caseworkers observed that it became much easier for them to relinquish full control over a case once they saw the team develop, build trust, and become better able to focus on achieving family outcomes.

- One caseworker stated “I don’t wake up in the middle of the night anymore,” noting that before she became a team member she often worried so much about her cases that she could not sleep at night for fear that she may have missed something. She went on to relate that after teaming was instituted she realized that she would have more help with her cases and others assisting with the decision-making process, and then she began to relax and got the rest she needed.
- During another team meeting, team members shared their observations regarding how teaming has helped them to gain a better sense of confidence in their work, both within their team as well as in other outside endeavors. They reported that successful teaming rejuvenated their attitude regarding their work and noted that teaming helped them to enjoy a greater sense of satisfaction from doing their job.
- One team member shared a revealing fact, saying that while she had started at the same time as another new worker in her county and their individual experiences were quite different. The new team member related that—as a result of the teaming experience—she had received ample support and guidance during her first months with the county, while the other new worker had to wait for experienced caseworkers to have the time necessary to answer her questions and provide the guidance she required. The new team member related that she was more readily able to acclimate to the child welfare culture and made a much faster and smoother transition into that culture than the co-worker who was hired at the same time that she was but who did not have the same opportunities to discuss casework issues directly and on a timely basis in the course of her work.

## Chapter 2: The Role of Agency Management in Supporting Teaming

### *How Administration Can Support Teaming*

The role of agency administration in supporting the teaming unit(s) in their district is integral to the success or failure of the team(s) involved. Since teaming challenges existing agency culture and staff habits, teaming requires staff to develop better interpersonal skills, to improve their conflict management skills, and to build a sense of trust in each other. Teaming also requires time for staff to focus on team development, as well as on learning how to work differently on their case assignments.

Supervisors need guidance from their managers in order to make the transition to group supervision, a process in which team members collaboratively address case issues on a periodic basis and offer insights and suggestions (see Chapter 4: Group Supervision). Supervisors also need to learn how to effectively manage the interpersonal issues that may emerge as teams evolve. In order for team members to be able to meet the many challenges of the teaming approach, to take the risk associated with trying something new, and to develop into strong and effective teams, they need the support of administration and middle managers. Since administrative support is essential to team development, CDHS and OCFS look for evidence of that support as an indicator that the teaming support resources invested in a district will be well spent and will yield good results.

These are just some of the many ways in which administration and managers can provide the active leadership and support necessary for successful teaming:

- Discuss with the prospective teaming unit supervisor what the agency hopes to learn and gain from teaming, along with what the supervisor's goals are for the unit.
- Assist the prospective supervisor to self-assess his/her strengths and needs regarding supporting change in the unit culture and how staff accomplish their jobs.
- Enable team staff to sit in a location that supports their working together.
- Make it possible for team staff to meet in a secure meeting space at a regular time on a weekly basis, and protect that time by not scheduling conflicting meetings, etc.
- Inform others in Children's Services, across the agency, and in the provider community regarding the purpose of teaming, why the agency is supporting it, and how it might impact their work, as well as keep staff informed of what is being

learned and dispel their potential concerns or perceptions that the Teaming unit is receiving special treatment.

- Support the team's need to take time for ongoing training (such as Family Engagement and Solution-Focused Casework).
- Attend some teaming training activities and events.
- Monitor the progress of the team, the completion of the tasks specified in the Team Planning Guide, and the team's progress through the various levels of team and supervisor development.
- Demonstrate their commitment to the teaming process and the success of the team through participating in the advisory board process, attending board meetings, advocating for the team within the agency, supporting the team by conducting presentations on teaming to others in the agency, and providing the necessary materials (such as team business cards and brochures) and other supplies to support teaming initiatives (see Appendix C: Business Card and Brochure Examples).
- Observe a few group supervision sessions to learn firsthand how teaming works and to provide coaching and feedback to the supervisor regarding the supervisor's facilitation and guidance of the case review process and the team development process.

Teams that have management support develop more quickly and are more successful in integrating teaming into the agency's culture and way of doing business. The expertise gained from an existing team can be utilized by newly formed teams within the same district.

### ***Space, Time, and Materials Support for Team Development***

One concrete indication of management support is the provision of suitable space within the agency environment where team members will be able to sit in close proximity. Such an arrangement is essential to the development of an effective team. The team also needs a designated meeting place and protected time so that members will be able to hold regular team meetings at least once a week (at minimum) for group supervision.

Administration can also support teaming by providing the types of materials necessary for the team's success, including team business cards listing each team member's name, phone number, and e-mail address. Teams benefit when management provides printed brochures that can be made available to families, family court, service providers, others working in the agency, and individuals in the community at large. Other materials



considered important for teaming would include a whiteboard, binders, folders, and other items and equipment as determined by each individual team's needs.

Additionally, each team needs support from administration in the form of allowing team members to regularly attend scheduled training and technical assistance events facilitated by CDHS Teaming Initiative Project staff. Being provided with protected time and space in the district office (or other designated location) will enable team members to reap the benefits of optimally efficient team meetings and activities when they meet with CDHS trainers. CDHS trainers need to meet with new teams on a monthly basis during the initial stage of the teaming process, and then on an as-required basis once the team is established. Some teams have needed support throughout the first two years and less frequent contact thereafter.

### ***The Advisory Board***

The function of an advisory board is to provide resources and support for the team. The board assists with problem-solving and evaluating the teaming process. Members of the board also provide advice and act as a buffer for the newly formed team within the agency. The board also serves as a conduit to and educator of outside services such as family court, schools, and community-based organizations. The advisory board is also an important source of information to other parts of the agency regarding what teaming is and how teaming is working. Therefore, the board is an important advocate for the spread of teaming throughout the agency (if teaming is deemed to be a benefit to the casework process).

The advisory board can be made up of a variety of individuals representing various areas that support the needs of the family (CPS, Preventive, Foster Care, Adoption, or a blended unit) that the team is working with, including persons representing functions such as these:

- Commissioner/Deputy Commissioner
- Supervisors from other Children's Services units (as well as from units such as Medicaid, Food Stamps, or Child Support)
- Probation staff
- Regional office staff
- Judges
- Law guardians

- School administrators
- Developmental disability services staff
- Mental health staff
- Early intervention staff
- Foster parent(s)
- Family member(s) involved in the child welfare system

Each team will be unique and will have different needs, based on the population it has chosen to team. Forming an advisory board requires that agency administration and team members work closely together to determine the names and positions of essential members to include on the advisory board. Once the names of the individuals to be included have been determined, the date of the first board meeting can be scheduled and administration can then extend invitations. The specific role of the advisory board can be decided at the time of the first meeting, along with the vehicle selected for informing administration, other units in Children's Services, and external stakeholders about the goals of teaming, the progress being made, and the potential impact on others. (For example, this is the point at which the team members and advisory board members decide how multiple workers will handle family court appearances.) The decisions made during the first meeting are fully documented and a copy is provided to the project coordinator.

While the advisory board's role and interaction with the team(s) is determined by the individual team's specific needs, it has been found that those boards that meet on at least a quarterly basis are most effective and beneficial. A written description of the advisory board's method of communication with the team (as well as its role in guiding the team, identifying and resolving issues, communicating with internal and external stakeholders, and engaging the rest of the agency in the learning process) will be provided to each of the board members, the team members, and the project coordinator.

One of the main benefits of creating an advisory board is the ability of the board members to provide advocacy (both inside and outside the agency) for the team in any number of ways, including these examples:

- If the team is having difficulty with receiving necessary mental health services for a family member, a board member representing mental health services can meet with the provider and facilitate collaboration.

- If the team is working with a child who is a Person In Need of Supervision (PINS) and his/her probation officer will not speak to anyone except the primary caseworker, a board member can meet with the probation officer to educate and advocate for the team members as well as to promote better collaboration.
- If the team members are having difficulty with a family court judge not accepting one team member testifying in place of another team member during a hearing when it would be legally acceptable to do so, the advisory board can educate the judge regarding the role of the team in the teamed case.

## **Communication**

Communication between county management and their teams working with CDHS and OCFS is important. OCFS views teaming as a learning collaboration between OCFS, CDHS, and the counties involved in teaming. CDHS and OCFS welcome feedback regarding team progress and issues, interest in expansion, and any changes that impact teaming. Management staff are encouraged to proactively inform CDHS of all changes within their agency (and/or within the team itself) that would affect team functioning as soon as the changes occur, including (but not limited to) these types of changes:

- Personnel changes
- Supervisory staff structural changes
- Any change(s) in the team's mission
- Any other event(s) that may affect the team's functioning

This proactive approach to communicating important information will allow CDHS trainers an opportunity to support and provide guidance to the team as it navigates its way through such changes. CDHS trainers will then also be able to better tailor their training to meet the changing needs of the team.

OCFS hosts quarterly conference calls with team supervisors, administrators, CDHS trainers, and regional office staff. However, due to the number of teams that currently exist, it is not feasible to include all of the teams simultaneously on one conference call. The conference calls are therefore divided among teams (according to the teaming phase and teaming unit type) so as to be most beneficial for the teams' development.

CDHS uses the Teaming Project Planning Guide to measure how each team is progressing with its tasks and to determine exactly what type(s) of technical assistance would best fit the needs of each team. Therefore, it is important that the supervisors of

the newer teams submit an updated Teaming Project Planning Guide to the project coordinator on a monthly basis (see Appendix A: Teaming Project Planning Guide).

## Chapter 3: How to Develop an Effective Team

### *Selection Process for Supervisors and Team Members*

The process used to select and prepare casework staff and supervisors to participate in teaming has considerable impact on the team's ability to learn and to successfully implement teaming. The following guidelines are to be considered when a county is considering implementing or expanding teaming:

- **Ask for volunteers.** Experience to date shows that staff members who willingly engage in teaming in the beginning have an easier time starting up and maintaining commitment through the learning processes. Those members that are involuntarily placed in the role of teaming are sometimes less willing to engage in the teaming process.
- **Provide sufficient information for volunteers to make an informed commitment.** While teaming sounds simple, it takes work, it challenges the traditional culture of casework, and it asks staff to relate to each other in very different ways. It is therefore very important to discuss both the benefits and the challenges of teaming when meeting with potential teaming staff.
- **Emphasize that teaming is a great opportunity for supervisors and staff with experience to enhance their practice, to become more focused on their results, and to increase the sense of support they feel for doing this difficult work.** It is more difficult for new supervisors and a group of new caseworkers to acquire the knowledge and skills required of their positions, as well as the knowledge and skills of teaming, than for more experienced staff to do so. Therefore, it is suggested that the team supervisor have a solid foundation with regard to supervisory skills and that all the caseworkers in the unit also have experience or (at a minimum) that the unit has a combination of experienced staff and one or two newer staff. When that basic background experience does not exist it becomes challenging for the team to establish the momentum required to make progress and move forward. It is also very challenging for a new supervisor to learn the supervisory role while concurrently learning his/her role in the teaming process.
- **Bear in mind that team size also impacts the ability of the unit to function effectively as a team.** If the team is quite small (four workers or less) or large (eight workers or more) it is difficult to develop team cohesion and implement shared case assignments, shared team commitment, and effective group supervision.

## ***Teambuilding Training and Events***

It is essential that the teambuilding process be given adequate attention. Teambuilding training affords an opportunity for team members to become familiar with one another on a personal as well as a professional basis. This training also provides CDHS staff with a valuable opportunity to assess the strengths and culture of each team, which is important in determining appropriate activities. As part of the implementation process, CDHS requires new teams to meet with the project trainers monthly for at least the first six months of the pilot. During that time CDHS staff facilitate specialized training, mentoring, and coaching in assisting the teams with teambuilding activities. Games and experiential learning activities provide an interactive approach for effective team learning and development.

Teams are provided with teambuilding activities during their monthly meetings with CDHS team trainers. These activities allow team members to learn about one another on a personal level and develop closer bonds. Some of the teambuilding activities (such as using a hula hoop or pads on the floor) are physical in nature, while other activities (including creating drawings, sharing interests, and/or describing events) are more abstract and/or social in nature. While team members are allowed to pass on participation if they are physically unable to engage in certain tasks, they are still expected to take an active part in assisting their team through the activity in whatever way they are able. It is during this active participation process that teams develop cohesiveness and team members begin to develop trust in one another.

In addition to benefitting from the monthly support that CDHS trainers provide, team members are also encouraged to engage in other types of teambuilding events on their own. Several of the teams have participated in group activities such as hiking, cookouts, rope courses, dining out, boat trips, luncheons, etc. There is a great diversity in the districts, personalities, locations, personal responsibilities, physical abilities, and likes/dislikes of team members and teams throughout the state. When the outside activities of team members are limited due to other interests, family activities, or other obligations, getting together once a month for lunch or sharing a morning coffee can provide an effective way of staying connected. The focus for both informal and formal gatherings is on the development of a sense of shared respect and cohesiveness among team members.

## ***Social Styles Profile***

The social styles profile instrument utilized by CDHS is a tool that provides an opportunity for teaming participants to assess how each of their personal work styles compliments those of others in order to provide a sound foundation for the optimal effectiveness/efficiency of the teaming process. As they complete the profile individual participants answer questions related to how they interact in the workplace and, upon its completion, they learn where they fit in with regard to the four social styles quadrants, based on their aggregate scores relative to each quadrant.

Assessing each team member's social style profile is an essential step in the teaming process. The results of the profiles provide key information that is especially important when caseworkers are coming together for the first time in a teaming environment. Understanding each team member's preferential style (whether that style is to primarily function as a driver—who may want to make decisions quickly—or, alternately, someone who operates in a more analytical fashion and who therefore needs sufficient time to analyze information and look at the whole picture) is important in enabling the team members to fully understand and appreciate each other's decision-making style and preferred mode of functioning. This key information will assist the team in avoiding conflict due to hurt feelings and/or misunderstandings that may be a result of not appreciating each other's innate way of operating and interacting with others.

Knowledge of each team member's preferred social style will allow the team members to be more aware of the nature of their own style and interactions, as well as those of their teammates. This knowledge also enables them to interact in an optimal fashion, conduct negotiations effectively, engage in productive brainstorming sessions, and fully cooperate in the process of in-depth decision-making. It also results in elimination (or at least minimization) of possible personality clashes that may otherwise occur if team members are unaware of each other's social styles and, as a result, are offended by another member's personality and social style.

## ***Other Assistance***

In addition to the expertise provided by CDHS trainers during the social styles profile exercise, training and additional specialized technical assistance from other consultants may be available for visits to the participating local district office. Trainings that have been offered in the past include Solution-Focused Casework, Group Supervision Skills, and Team Facilitator Training. CDHS can also support a limited amount of travel for off-site visits at county offices where there are experienced teams already functioning

successfully. CDHS also provides financial support to hire consultants for site visits for additional specialized technical assistance.

The annual Child Welfare Teaming Symposium facilitated by CDHS provides a series of workshops and issues forums that are designed to provide both current and newly established teams with an opportunity to enhance their case-teaming strategies. The symposium makes technical support available through skill-building workshops, serves as a vehicle that allows current teams to discuss their specific challenges with other teams, and makes it possible for information about lessons learned by the initial, more experienced teams to be easily disseminated to the newly established teams.

### ***Protected Meeting Times***

In order to make a transition from individualized casework to the team approach, the organizational culture of *individual caseload responsibility* must be transformed into attitudes and behaviors reflective of *team responsibility*. This transition requires the three C's: Commitment, Consistency, and Communication. Teams need to designate a protected time (or times) each week to meet for group supervision and internal team-building activities. This protected time—along with consistent communication—enhances commitment to the teaming process, allowing team members to feel safe with one another and to establish team cohesion and trust. In addition, protected time fosters a culture of mutual respect, an open communication process, a shared team identity, and more effective conflict resolution. Real work is accomplished during these meetings. Case decisions are made, solutions are developed, each team member's expertise is used, and learning occurs.

### ***Creating the Physical Environment***

Creating a physical environment that supports casework teaming will enable these critical benefits:

- Allowing for freer and more frequent discussion of cases
- Providing spontaneous support for a caseworker on a call with a challenging family member
- Strengthening shared team identity, with each team member feeling more connected to the team
- Enabling immediate access to case information in the event of an emergency
- Promoting team cohesion by bringing individuals closer together



Ideally, the caseworkers and supervisor would be able to sit in a cluster, and there would also be a space where two or three workers could meet informally to share information and consult with one another in a way that would not disturb their colleagues in other units. Within such an environment, workers gain a better knowledge of each other's cases as they have opportunities to discuss their work between team meetings. Ongoing worker familiarity with the other team member's cases allows the team members to answer telephone calls and address issues immediately as they occur in the office.

Most teams utilize a Teaming Whiteboard and a Teaming Binder to record notes from weekly meetings and help guide the unit in determining the next steps. This is beneficial when working with families and performing daily activities outside the office, as well as for various other uses, and enables the team members to better manage their workloads. Ideally, there would be a place where the Teaming Whiteboard could be mounted so that locations of staff making case contacts can be easily noted, allowing other staff to piggyback some of their case tasks onto another worker who will be a particular part of the county or at a specific agency. Requests for assistance could be posted as well, so that others would be able to volunteer to complete certain case tasks. A Teaming Binder containing case updates, alerts, and/or staff to do's and that is kept in a central location can be a great help to everyone, allowing team members to more quickly respond to families, foster families, and others. When team members sit in close proximity, these tools are readily available to each team member for review or updating as required.

### ***Team Mission Statement***

The mission statement is the guiding principle for the team, developed by the team. The team's mission is expressed in the form of a concise, written statement that defines the reason(s) for the team's existence, thus providing the team with a benchmark against which the team can measure both its actions and the end results.

Because such brevity suggests simplicity, it is easy to conclude that the process required to create or to rewrite a mission statement is likewise a brief exercise—however, that impression is far from the actual truth. The process of developing a mission statement can be time-consuming. All members of the team share their ideas and their own interpretation of the team's mission. Then the team brainstorms their ideas until the team mission statement has been formulated to everyone's satisfaction and is complete.

The mission statement can begin to craft the team's casework practice in a focused and purposeful way, and it can be used to create the practices and processes that will ultimately guide the team to its destination: the attainment of the team's purpose and

goals. The team's mission is *not what it does*, but *the difference the team makes* in working with and for the children, families, agency, and community that the team serves.

The team mission statement addresses concerns such as these:

- What is our unique contribution to the agency?
- What would be happening if we did not exist?
- To whom do we deliver our services?
- What are the interests/priorities of our family members?
- What are the boundaries (organizational or geographic) within which we operate?
- How would we like to be seen by family members of cases being served?
- How do we want to be thought of and known within the agency?

CDHS trainers facilitate a process whereby each team member initially creates an individual mission statement. These are then reviewed, revised, and ultimately incorporated into a single team mission statement encompassing and unifying everyone's ideas (see Appendix D: Mission Statement Examples). The best mission statements are expressed in plain English, without technical jargon or adornments. An example mission statement is shown below:

The Columbia County Transitional Team provides services to bridge the gap between adolescence and adulthood.

Once the team's mission statement has been formulated, the team will need to determine how they plan to utilize the statement as a guide in their daily tasks, with family members, within the agency, and with others who may be interested. CDHS provides each team with a printed poster board that shows the team's mission statement so that it can be displayed in their teaming area. The team's mission statement is also included in the team's brochure.

It is important to keep in mind that a mission statement is fluid in nature and may change over time and with team transitions. Since a new dynamic may be formed with every change in the team's makeup, periodic review of the team's mission's statement with any new member(s) allows the team to incorporate the new member(s) into the team dynamic, giving them their first voice in the teaming process. At other times the team may change its service provision from one population to another and/or change its case criteria for teamed cases, at which time the mission statement may also need to be revised.

To ensure that the mission statement continues to reflect the team's goals/purpose as the team matures and develops, it is recommended that each team review its mission statement on a regular basis. This is especially true when there are any changes in the membership of the team.

### ***Team Operating Agreement***

An operating agreement (sometimes referred to as “Rules of the Road”) is a living document that outlines the expectations and guidelines for working together as a successful team. It is a mutually agreed upon tool, co-authored by team members, and serves as a contract between team members, including a description of their expected behaviors and the nature of their working relationships.

The operating agreement is truly one of the essential tools for successful teaming but, just as with the mission statement, is somewhat fluid in nature and must be reviewed every time change (such as when a member leaves or a new member joins the team) takes place. Just as with the development of the team's mission statement, it is beneficial for the team to have any new team members directly involved in the process of reviewing the operating agreement, since doing so will help to ensure their understanding of their respective roles and their commitment to the team. Until full cohesion is established, team members should frequently reference the operating agreement, which serves as the means whereby team members can hold themselves and their co-workers accountable for the team's processes, work, responsibilities, and behaviors.

Successful teams strive to create an open atmosphere that encourages free sharing of ideas and allows for sharing leadership roles at different times, depending on what the team needs to accomplish. Attaining this openness may require abandoning individual power and control in order for the sharing of roles to be successful. Team members should carefully monitor any behaviors that may indicate that a member is attacking ideas or potential solutions, along with any behaviors indicating that a member is “checking out” or withdrawing from participating in the team's efforts. The cause of such behaviors should be addressed as soon as the behaviors are noted. From the very beginning of the teaming enterprise, it is essential to be clear about what each member wants, needs, and is willing to do in order to make the team successful.

The team's written operating agreement generally includes these essential elements:

- Behavioral expectations (such as specifying the requirements regarding mutual respect and explaining in detail what respect for team members entails)

- How team members are to interface within the office and with each other
- Conflict resolution guidelines
- The method to be used in the decision making process (Will it be consensus, majority rule, or the supervisor having the final say?)
- Specific guidelines regarding interpersonal communications (Will the team incorporate a “round robin” approach or use the talking stick as a method to allow individuals to take turns in sharing information?)
- A clear agreement regarding the purpose of meetings

CDHS trainers assist teams with the development of their initial operating agreement. Using an appreciative inquiry exercise, each team member has an opportunity to share her or his best team experience and the characteristics that made that team experience most memorable. This information is helpful in determining the way the team would like to operate and in drafting its operating agreement (see Appendix E: Operating Agreement Examples).

### ***Supervisory Roles and Responsibilities***

Supervisors play an integral role in supporting the practice of teaming and shifting the mindset of caseworkers from an individual mindset to a teaming mindset. The supervisor is responsible for ensuring that weekly meetings occur, as well as for providing the team with protected time for monthly trainings with CDHS and conference calls with the OCFS Design Team.

### ***Role of the Teams in Promoting Teaming***

The team members themselves may introduce the teaming process to parents, service providers, and other units within the agency, as well as to school districts, probation staff, and other providers that service the population from which the team’s families are drawn. This can be accomplished using multimedia presentations, brochures, and/or invitations to weekly team meetings.

Each individual team member can also promote the teaming concept in daily conversations with co-workers, with court staff while waiting for a hearing, with family members during permanency hearing meetings and/or during service planning reviews, during home visits, and/or in their personal interactions with the groups and organizations that they belong to outside the agency. Each team member can be a promoter of the teaming concept with both the general public and the families that the team serves.

## ***Steps in Developing an Advisory Board***

When the team embarks upon the process of assembling an advisory board to assist them in their work, the following preliminary steps need to be taken:

1. Team members collaborate in determining who to invite to the meeting for potential advisory board members.
2. Management drafts the initial letter to prospective advisory board members, providing information on the role of teaming in their organization.
3. Team members prepare a presentation for the purpose of educating prospective advisory board members about teaming, including the role of the advisory board. (The presentation includes the three P's of teaming: Purpose, Process, and Payoff.)
4. Management obtains contact information for those individuals who are interested in becoming advisory board members and then sets a date for a follow-up meeting.

## ***Strengths and Needs Assessment***

Conducting a strengths and needs assessment to inventory staff knowledge and skills is an integral part of the development and education of team members. Each individual caseworker, whether new or experienced, brings both strengths and needs to the teaming process. Identifying and acknowledging each member's strengths and needs enables the supervisor and team members to assign primary and secondary workers and tasks to a case, based on their identified strengths and needs.

The strengths and needs assessment is a process facilitated by CDHS trainers over the course of several monthly meetings with the teams and is based on a variety of Common Core concepts (such as engagement skills for family members of different ages, ability to determine a child's safety and risk within his/her environment, and knowledge of child and adult development). This self-assessment of knowledge and skills is used to enhance caseworkers' existing skills and to effectively promote the changes needed to achieve child safety, well-being, and permanency.

Strengths and needs assessment is a parallel process, since caseworkers are trained to look for strengths and needs within the family in order to promote positive change within the child's environment. Through the process of discovering their own strengths and needs, as well as those of the other members of their team, team members are more open to look for the same within the families they serve—and they also become better able to help families change their own needs to strengths (see Appendix F: Strengths and Needs Assessment).

## ***Developing Criteria for Teamed Cases***

Teams provide a variety of services throughout New York State, including Child Protective Services, Preventive/Long-Term Services, Foster Care, Adoption, and/or a blended service version. Not all cases need to be served by both a primary and secondary caseworker. Each team must develop its own case criteria for teamed cases based on the population they are working with, the specific services needed, the experience level(s) of the staff, and the members' ability to successfully perform all case tasks and achieve case goals. During the initial stages of development the team must decide on case criteria for the cases that are to be teamed. Experience has shown that starting with too many cases can be overwhelming—on the other hand, if only a few cases are teamed the team takes a long time to develop the skills and culture of teaming, and a long time to reap the benefits of teaming.

The following are some of the case criteria currently being used by existing teams:

- Complex cases (as evidenced by multiple children, multiple fathers, multiple placements, and/or multiple subsystems)
- Children who need a higher level of care and/or who have multiple needs
- Historical and/or multigenerational cases
- History of multiple placements
- Urgency of case needs

Case criteria is fluid, changing as needed throughout the life of the case and throughout the life of the team. During the weekly meetings, the team can reassess the utility of the current criteria. If the primary and secondary workers feel they no longer need assistance from other members, it may be time to “de-team” a case.

The following is an illustrative example of an agency decision to de-team a case:

- A team has established case criteria based on families with a complex case (as evidenced by multiple children, multiple placements, and multiple subsystems).
- They have been teaming a case with six children, three of whom require a higher level of care due to fetal alcohol syndrome and sensory issues; these children have multiple service providers to include early intervention, mental health counseling, and physical therapy.

- The family is now receiving transportation, homemaking services, and family outreach services. The father is in a drug treatment facility and the mother is a recovering alcoholic attending AA meetings several times per week.
- The primary and secondary workers no longer need to share tasks with other team members due to the involvement of all the service providers and the parent's ability to utilize the necessary resources.
- After reviewing the progress of the family in reaching their goals/outcomes and in considering the number of resources available to the family, the team discusses the family's needs and how those needs are currently being addressed. If it is decided that the family no longer needs the intensity of the team approach, then the case will be de-teamed and another case will be chosen to team.

If the team has been teaming only high-level stress cases and their tasks and activities for non-teamed cases are overdue or not being completed, it may be beneficial to change the criteria at that time, as shown in the following example:

- A team has established case criteria based on families with a complex case (as evidenced by multiple children, multiple placements, and multiple subsystems).
- The team members are sharing tasks on several cases. Each team member is responsible for shared tasks (such as contacting multiple service providers and schools; transporting children to and from appointments; visiting one child at home, another in a foster boarding home, and still another in a group home; and attending court hearings) all of which are very time-consuming.
- The team may decide that, although the cases meet their criteria, the team members have numerous "overdues" on their non-teamed cases as a result.
- The team may decide to change their criteria to only include cases where tasks can be easily divided among the team members so that the cases can be closed in a more timely fashion, thus leaving more time for the primary worker to focus on the complex case.

It is important for the team members to remain flexible and to be willing to change their criteria as needed. Team members should feel comfortable enough to request that the team revisit the case criteria when they feel it is not conducive to the teaming process (see Appendix G: Teaming Case Criteria Examples).





## Chapter 4: Group Supervision

### *What Is Group Supervision?*

Group supervision is a process that was developed and operates to fulfill the need for individual team members to give and receive input and support from other team members regarding the decisions they need to make, the strategies they employ, how they go about accomplishing their work, and ways of dealing with the stress of their job. In order to be able to effectively respond to case needs and emergencies when they arise, team members need to know how to communicate with each other in an effective and efficient manner.

Group supervision time is a unique weekly event protected from outside factors. Since the group supervision process is about the interactions between team members, as well as the team members and the supervisor, every member of the team is expected to be present in order for the process to be optimally effective. Using a solution-focused approach during group supervision sessions, team members need to share their ideas while engaged in a discussion of a family's current situation. This sharing of ideas results in the collaborative development of a workable plan to assist the family in meeting their goals/outcomes and that will keep the children safe. The group supervision process involves sharing ideas, dividing tasks, obtaining direction, and developing timelines for completion of tasks. Sharing in the decision-making process and tasks associated with child welfare work, the team learns what is happening with the families/cases they have chosen to team—even if all team members are not actively involved.

Group supervision provides a wide range of teaching/learning methods for team members. Those individuals with specialized training can share relevant information with the team. Team members who are content experts in areas such as alcohol or drug abuse, juvenile delinquency, early intervention, and/or probation can share their expertise with the group. In addition, training can be provided to educate team members specifically in the areas of concern to the chosen population being teamed. CDHS trainers are available on a periodic basis to provide coaching support and to assist the team in dealing with team process concerns in the most effective manner.

Through processing interventions, along with the team members' feelings about those interventions, the team is provided with an influential learning device that is both relevant and immediate. This process provides learning that leads to actual practice change, which has been shown to occur more rapidly in this environment as the team

members share various points of view and techniques with one another. This becomes a model for effective team decision-making and enables the agency to respond faster and more effectively to changing circumstances.

### ***The Supervisor's Role in Group Supervision***

Group supervision can present challenges to supervisors who have relied primarily on traditional individual supervision. Listed below are some of the changes in the supervision process and the role of the supervisor in group supervision:

1. In group supervision, the supervisor's role changes from being the provider of directives and answers to being the facilitator of group discussion and decision-making.
2. Group supervision provides a forum that equalizes the relationship between supervisors and caseworkers. This enables team members to have more input into the decision-making process, while relieving the team supervisor from the burden associated with the individual responsibility of making all child welfare decisions.
3. Each individual's sharing of information, concerns, ideas, and feelings with the team is a powerful learning tool during the group supervision process. The supervisor's role is to highlight those learning points and encourage staff to generalize what is learned in one case or team process meeting to other applicable situations.
4. In order for sharing to be effective, team members need to actively participate in group supervision. The supervisor's role is to call on all staff to contribute.
5. Team members must be willing to ask for help when they need it and willing to share their own expertise in helping others when required. The supervisor needs to create a safe environment where staff can ask for help and where other staff are called on to provide it.
6. With group supervision, supervisors become the facilitators of the team's learning and the development of family solutions. This is accomplished by involving team members in an active exchange of ideas with regard to specific strategies that might be employed to engage youth and families and help youth and families make progress in achieving their goals.
7. Supervisors transfer some of their own traditional power and responsibility to the group, but at the same time they continue to maintain control through the process of guiding, approving, or challenging the team's proposed solutions.

8. During the group supervision process, supervisors need to be more open to ideas and strategies that they may not always feel comfortable with, and they also need to pay attention to both the team's tasks and the team's decision-making process.
9. Supervisors also need to use techniques that will help the team members look at their respective styles of relating to each other and become effective at provoking discussions on how to work together most effectively. If the team strays from its operating agreement, it is the supervisor's role to remind them to stay on track.

Group supervision is a parallel process, with the team supervisor modeling behaviors during group supervision that team members will later practice with their families. The way to learn it is to do it. The supervisor utilizes group supervision as a tool for learning how they can best facilitate effective team processes. Team members can then take this knowledge into the field when working with their families.

### ***The Caseworker's Role in Group Supervision***

During group supervision the primary or secondary caseworker prepares case-related information about their teamed case to share with team members, including these specific items listed below (see Appendix H: Weekly Group Supervision – Teamed Case Information).

#### **General Background**

- Case name, along with the names, ages, and roles of all family members involved in the case
- Date of the last home visit or contact
- Issue(s) related to each family member, including school, mental health, physical handicap, developmental disability, and alcohol and/or substance abuse issues; types of services being received; and observations as to whether the affected family member is complying
- All service providers involved with the family, as well as any updates from those providers
- Any recent family court activity
- Visitation for any children in foster care, kinship care, or in group/institutional care (including background information as to where, when, and with whom)
- What is working well with this family in relation to the child's safety/risk concerns?
- Provides a solution-focused/strengths-based approach

- Reinforces progress to date
- What are the safety issues/risks that still need to be addressed and/or that the team still needs to discuss:
- Summarizes ongoing safety and risk issues
- Identifies recent risks/concerns

What must occur in order to keep the children safe and to achieve the desired Child Welfare outcomes? What are the next steps?

1. Division of Tasks – Divide tasks so that a single worker is no longer responsible for the entire case, and then specify what is to be done, who will do it, and by what date.
2. Development of Strategies – Exchange ideas in order to collectively develop some targeted strategies for working with the families being served by the team members.
3. Assessment of Impact – Discuss the feelings and concerns of the workers regarding the family members, as well as the feelings and concerns of family members interacting with the team.
4. Identification of Learning Points – Reflect and generalize regarding what was learned from teaming the case in order to extract the key learning points that emerged over the course of the case. Identify what the team members learned while working on the case. (What went well? What could be done differently the next time around?) This step is especially important when de-teaming a case.

### ***Group Facilitation Roles***

Team members are assigned primary and secondary roles on a rotational basis, and tasks are then divided based on the case needs and the strengths and needs of the team members. During the initial stages of team development, CDHS trainers assist in the group supervision process and can provide a worksheet that can be adjusted to meet the needs of each team. Team members will continue to meet, even when the supervisor is not present.

The group supervision process provides an excellent opportunity to encourage and foster the growth of team members. As members rotate and assume various group supervision roles, each individual has the opportunity to develop different leadership skills.

The following are the six group supervision roles that each team member has an opportunity to experience and learn from during the group supervision process:

### **Facilitator**

- Prepares the agenda and sends it to team members prior to meetings
- Compiles a to-do list, including who is to do what and when it will be done
- Ensures that every team member has input into the decision-making process

### **Process Observer**

- Monitors body language of meeting participants to determine their feelings
- Makes sure that everyone is present (not just physically, but also in the moment)

### **Timekeeper**

- Keeps members focused on the task at hand
- Keeps the meeting moving forward in timely manner

### **Recorder**

- Takes meeting notes to be stored in a binder
- Creates the to-do list and enters tasks on the Teaming Whiteboard

### **Reporter**

- Reports on the group's work accurately and concisely
- Summarizes progress and actions taken/to be taken

### **Group Member**

- Participates in the discussion by openly and honestly contributing thoughts and ideas
- Carefully listens to the other members of the group

The team's effectiveness is greatly enhanced by having an ongoing process of assessing the team's development incorporated as part of the group supervision process. Regular attention to the group process and team functioning is beneficial to the team's success (see Appendix I: Group Supervision Facilitation Roles).

## ***Stages of Team Development***

Assessment of the team and its overall development is enhanced through the group supervision process. Over time, the team will transition through various stages of development, each resulting in its own set of feelings and behaviors that the team will

experience. Transitioning through each of the Four Stages of Group Development (Forming, Storming, Norming, and Performing) as defined by Tuckman (1965) is an integral part of team development (see Appendix J: Print and Web-Based Resources). Team development is a fluid process, one that normally transitions back and forth with each change within the group. It is important for team members to remember the four stages, especially during the group supervision process.

Some of the behaviors and/or events typically associated with each stage of group development are described below.

### **Forming Stage**

- Team members experience excitement about being a part of a team and at the same time may feel some anxiety and have lots of questions.
- Initially, some members may be reluctant to be part of a team, may not feel comfortable sharing their cases, and may be uncomfortable sharing in the decision-making process.
- Group cohesion and trust are not yet developed.

### **Storming Stage**

- Team members will likely experience frustration with the team's progress or process, and they may even become angry.
- Members may express concerns about being unable to meet the team's goals.
- Attention is focused on caseload and workload issues and the impact on the quality of the work being done.
- Members may be frustrated about limits that slow their individual or team progress.
- Frustration might be directed towards other members of the team, the team leader, or the team's sponsor, and this frustration may be exhibited in behaviors such as arguments among team members or with other staff, being critical of the team's original mission or goals, or by complaining about the lack of support from management in general.
- Even teams with high workloads will perform without performance decrement; however, morale and quality is significantly less at this stage.
- Conflict resolution becomes necessary.

- The team may be in denial of any conflicts occurring within the team or between team members. (This is the stage of development when CDHS trainers are generally called in to assist the team in moving forward to the next stage.)

### **Norming Stage**

- At this point the team has successfully resolved any conflicts that arose in the storming stage.
- A resolution of the inconsistencies between expectations and the reality of the teaming experience is brought about.
- Team members feel a greater sense of comfort in expressing their real ideas and feelings.
- Team members become more accepting of others on the team, recognizing that the variety of opinions and experiences they bring makes the team stronger and its family interventions better.
- Constructive criticism is both possible and welcomed.
- Members start to bond as a team and take pleasure from the increased group cohesion.
- There is a conscious effort to settle issues and achieve group cohesion.
- Team members start to experience more meaningful communication.
- Social relations that support group cohesion begin to develop outside of the work environment.
- A genuine sense of group cohesion and real trust begin to develop.

### **Performing Stage**

- The team matures and a cooperative sense of responsibility is formed.
- Expectations develop that team members will communicate a need for assistance (rather than wait for someone to offer it) and that assistance will be volunteered when requested and volunteered when a need is recognized.
- Members openly and frequently share insights into personal and group process, and they are aware of their own and each other's strengths and needs.
- Members feel attached to the team as something "greater than the sum of its parts" and feel satisfaction in their team's effectiveness.
- Members feel confident, both in their individual abilities and those of their teammates.

- Members are able to prevent or solve problems in the team's process or in the team's progress.
- A "can do" attitude is visible as there are increased offers to assist one another.
- The role of the team may become more fluid, with members taking on various roles and responsibilities on an as-needed basis.
- Differences among members are appreciated and are used to enhance the team's overall performance.

There are times when a team is unable to see that there is a problem or concern, or the members may be unable to recognize and appreciate the growth they have made as a team. It is during these times that CDHS trainers or an outside consultant may be called upon to ensure that the team continues to look at its progress through team reflections.

During group supervision the team can incorporate regular team reflections with team members. Alternately, the team can include members of the advisory board and/or CDHS trainers in the process. Through the use of reflection, team members can discuss the obstacles that they are facing (or have faced) and solicit ideas for solutions, and they can also recognize their various accomplishments.

During group supervision meetings, team members are also provided with an opportunity to go back and revisit the team's mission statement and operating agreement. At that time they can share their insights and obstacles and call upon each other to problem-solve and identify best case practices, making reflection a truly valuable tool for learning, planning, and problem-solving.



## **Chapter 5: Beginning and Expanding Teaming in the Local Districts**

### ***County-Level Structures***

OCFS oversees the implementation of teaming throughout New York State to assess the quality of teaming support provided by CDHS, to monitor the investment of county efforts in making teaming successful, and to become apprised of teaming lessons learned and the issues that emerge that impact teaming. Each county in New York State has a unique culture, distinct areas of strength, and certain areas where the county may be looking to strengthen its performance. It is important, therefore, to consider current staffing structures, strengths, and needs when determining where and how to implement or expand teaming. (For example, in one teaming county the senior caseworker operates as team leader/facilitator for both of the county's teams, while another county has the B supervisor leading and managing the team and the A supervisor acting as direct support of teaming for the B supervisor.)

Each county determines the structure, responsibilities, and roles of its team(s) within the local district agency. As of June 2010, there are 24 teams in 14 New York State counties, with each teamed county having varying structures and accountability.

### ***Application and Selection Process for Teaming***

The first step in considering becoming involved in teaming is to assess the role that teaming could play in supporting the agency workforce, reducing stress and turnover, strengthening case decision-making, strengthening responsiveness to family members' needs, managing workload, etc. If, after these and any other considerations have been identified and addressed, it is decided that teaming would be beneficial to the agency, it is necessary to submit a formal application/proposal to the OCFS Design Team during its annual solicitation phase.

Applications are designed to address all the following questions:

- How would teaming fit in with overall agency goals and meet agency needs?
- Why does the agency want to participate in teaming?
- What type of unit will participate in the teaming, and why was that unit selected?
- What is the anticipated procedure (recruitment, solicitation of volunteers, or assignment) for selecting team members?

- What resources can be provided for the team in terms of equipment, space, time for training, protected time and space for meetings, and travel allowances?
- Will the agency be able to provide the team with a reduced caseload during team development?
- What types of accommodations will be formulated and put in place for sustaining the team?
- What administrative supports will be put in place to support the team and the team's supervisor?
- What supports will the agency and team likely need from the OCFS Design Team and CDHS trainers?

After the OCFS Design Team has received the application and has thoroughly reviewed the proposal, a conference call will be scheduled to discuss the design team's expectations for the prospective team; the plans and goals for the team; and what the team members, supervisor, and management can expect from OCFS and CDHS. After the conference call, further discussion will take place with the team. Once the design team has made a final decision, applying counties will be notified of the status of their application by telephone and mail.

### ***Mentoring New Teams***

Mentoring is a valuable tool for existing teams, especially those going through personnel/district changes, and with a helpful mentoring relationship the newly formed teams are afforded an excellent opportunity to learn new skills/techniques to improve their teaming process. All teams have something to contribute to the learning of other teams, whether they are experienced or newly formed. Although it is not mandatory to mentor new teams, most Phase 1 teams and some Phase 2 teams have been notably willing to go above and beyond what is normally expected of them to help newly forming teams. The teams interact via teleconferences and the newly formed teams have on occasion visited Phase 1 teams in their districts to observe their group supervision process, with CDHS covering travel and lodging expenses for the new teams to travel to meet with the experienced teams.

### ***Conference Calls***

The OCFS Design Team facilitates quarterly conference calls with teams throughout New York State. The main purpose of these conference calls is to enable teams of similar

structure and with comparable responsibilities to share their successes, needs, and concerns—as well as the lessons they have learned in the field—with members of other teams. These phone conferences provide an excellent opportunity for teams to showcase their successes and to ask for and receive guidance on any of the challenges that they may be facing. The calls are usually characterized by the development of a kind of group consciousness, with veteran teams sharing their own experiences with the teaming process with the new teams facing similar situations. (For example, during one conversation the new teams reported that they were experiencing difficulty staying on track during group supervision. The veteran teams then reported that they had encountered a similar experience at first, but that after several months they were successful in maintaining their focus. This sharing provided the new teams with a sense of normalcy and reassured them regarding their own developmental process.)

## ***Conclusion***

The information and insights contained within this Guidebook were expressly assembled and developed to be used in conjunction with the knowledge, experience, and support of the OCFS Design Team and CDHS Teaming Initiative Project trainers. This Guidebook was not designed to be (and is not intended to serve as) a step-by-step, do-it-yourself handbook that will provide a one-size-fits-all or cookbook approach to teaming. Rather, it was produced to serve the varying needs of multiple constituencies within the child welfare services arena.

Caseworkers and supervisors who have not yet adopted the teaming approach—but who are tired of working in isolation and who would like to experience the advantages of teaming firsthand—will find this Guidebook to be a fine introduction to the teaming approach, one that will serve as a composite overview and realistic starting place before they engage in teaming and as they embark upon the teaming approach in their own agency. In such instances this Guidebook can serve as a kind of roadmap that will help them to find their own way. However, this Guidebook is definitely not intended to serve as a substitute for the more structured and interactive approach available under the direction and guidance of the OCFS Design Team and CDHS trainers. It has been demonstrated that the assistance of an objective and supportive facilitator, trainer, and coach really makes a positive difference in a team being able to start up on the right foot and to continue to sustain its development. On the other hand, if a particular district already has its own resources that can provide the necessary training and coaching as teaming expands throughout the agency, Teaming Project staff will be happy to serve as consulting partners during the district's ongoing teaming endeavors.

Administrators searching for an innovative approach to caseworker retention—as well as those looking for an effective means to achieving child welfare outcomes through use of a strengths-based approach and who are ready to make the change from individual casework practice to a team-based approach—will find that this Guidebook also provides the kinds of specific information that they need in order to make an informed decision regarding use of teaming in their agency on either a limited or agency-wide basis.

This Guidebook includes a diverse range of information and examples garnered over the past years by CDHS Teaming Initiative Project trainers who have worked with OCFS Design Team staff. It also incorporates valuable input from OCFS Regional Office staff as well as from individual team members who have shared the fruits of their teaming endeavors in the form of personal anecdotes and representative examples of materials developed as the teaming approach was adopted and initiated in their agency.

Appendices A–I contains materials referenced and discussed within the Guidebook itself, including representative examples of materials developed by various teams statewide.

Appendix J: Print and Web-Based Resources, includes a list of suggested outside resources that can be consulted for additional information about the teaming approach.

In addition, Appendix K: Glossary of Teaming Terms, provides quick definitions of terminology commonly associated with teaming, briefly summarizing their meaning and implications in teaming.

The beauty of teaming lies in the diversity of teaming. With that principle in mind, it is hoped that both current and future team members, along with supervisors and administrators, will continue to share their experiences and insights with CDHS trainers, OCFS, and their Teaming colleagues across New York State. As teaming continues to expand and proliferate statewide, this Guidebook will be revised and expanded so that it will continue to be the most up-to-date compendium of information about teaming currently available. With that end in mind, any suggestions regarding the scope and content of future editions of this Guidebook are invited and welcomed.

# Appendix A: Teaming Project Planning Guide

## Teaming Project Planning Guide

County: \_\_\_\_\_

Instructions: Review this Planning Guide and decide on specific target dates and responsible parties (estimates are provided for you). Please provide the teaming project coordinator with a copy within one (1) month of the formation of the team.

### Team Development

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
1. Schedule and begin holding team meetings 1–2 times a week in order to complete the tasks and achieve the milestones below.	Within 1 month of Teaming 101	Supervisor	
2. Create Mission Statements and Values Statements for the team, and also provide copies to the project coordinator.	Within 1 month of Teaming 101	Team (facilitated by the supervisor and/or CDHS)	
3. Using your mission and vision statements, clarify the “standards of practice” that the team will implement. Get agreement on the hallmarks of effective practice, and the values that all staff will strive to implement.	Within 45 days of Teaming 101	Team (exercise to be facilitated by CDHS staff)	
4. Complete the Social Styles Profile, share results within the team, and decide how best to use knowledge about individual differences to advance team functioning.	Schedule with CDHS staff within 45 days of Teaming 101	Team (exercise to be facilitated by CDHS staff)	

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
<p>5. Initiate creation of a team-related training/development plan to include teambuilding, group dynamics, supervision coaching, and other areas to be determined.</p>	<p>Within 45 days of Teaming 101</p>	<p>To be facilitated by CDHS staff</p>	
<p>6. Determine case criteria for teamed cases as shown in these examples:</p> <ul style="list-style-type: none"> <li>• Cases with multiple children, services, disabilities</li> <li>• Serious cases</li> </ul>	<p>Within 45 days of Teaming 101</p>	<p>Team (facilitated by the supervisor)</p>	
<p>7. Select a family to begin working with as a team and then conduct these activities:</p> <ul style="list-style-type: none"> <li>• Define respective roles of team members.</li> <li>• Plan how to introduce the teaming concept to the family and any other service providers/stakeholders involved (e.g., school personnel).</li> <li>• After meeting with the family, discuss (as a team) what worked, what didn't work, and what needs to be different.</li> <li>• Plan necessary adjustments for subsequent meetings with the family and other service providers.</li> <li>• Identify any modifications that may be needed with regard to case record access and documentation.</li> </ul>	<p>Within 45 days of Teaming 101</p>	<p>Team (facilitated by the supervisor)</p>	

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
<p>8. Identify types and numbers of cases to team. Together discuss and walk through how the team thinks working with the families as a team will impact how and when the work gets done. Identify any impacts on current procedures and processes and what might need to change (including communication within the team). Identify any gaps in preparation and develop procedures, etc. to fill them as needed.</p>	<p>Within 45 days of Teaming 101</p>	<p>Team (facilitated by the supervisor)</p>	
<p>9. Develop written Operating Agreements to include the following:</p> <ul style="list-style-type: none"> <li>• Behavior guidelines for group discussions</li> <li>• Defined decision-making process (consensus, majority, etc.)</li> <li>• Description of decisions that will/will not be made by the team</li> <li>• A plan for managing conflict (team members bring all conflicts to group for discussion vs. private discussions)</li> <li>• A plan for welcoming new team members, saying goodbye to those who leave the team, and covering cases in the interim</li> </ul>	<p>Provide a copy to the project coordinator within 60 days of Teaming 101.</p>	<p>Team (facilitated by the supervisor)</p>	
<p>10. Develop supplemental resources (common business cards; team brochure/pamphlets for families, service providers, and courts).</p>	<p>Provide copies to the project coordinator within 60 days of Teaming 101.</p>	<p>Team (facilitated by the supervisor)</p>	

**Practice-Related Strengths and Needs**

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
11. Assess staff practice knowledge and skills identified in “Strengths/Needs Assessment Categories” and identify training/support to address any needs that are identified.	Schedule with CDHS staff within 75 days of Teaming 101	To be facilitated by CDHS staff	

**Advisory Committee and Agency Communication**

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
12. Define the role of the Advisory Committee/Board and complete all of the following: <ul style="list-style-type: none"> <li>• Determine the names/positions of essential members.</li> <li>• Recruit members.</li> <li>• Select a chairperson.</li> <li>• Set a date for the first meeting.</li> <li>• Issue invitations.</li> <li>• Provide a copy of the roster to the project coordinator.</li> </ul>	60 days after Teaming 101	Administration (with assistance from the team)	
13. Hold the first meeting of the Advisory Committee/Board; schedule regularly occurring follow-up meetings and provide the schedule to the project coordinator. Document meetings (brief summary) and provide a copy to CDHS staff after each meeting.	75 days after Teaming 101	Chairperson	



TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
14. At the first meeting of Advisory Committee/Board, develop the strategy and vehicles for informing administration, other units in children's services, and external stakeholders of the goals of teaming, the progress being made, and the potential impact on others (e.g. multiple workers handling court appearances, etc.).	75 days after Teaming 101	Advisory Committee/Board	
15. Develop a written description of the Advisory Committee/Board's methods of communication with the team, as well as the committee/board's role in guiding the project, in identifying and resolving issues, in communicating with internal and external stakeholders, and in engaging the rest of the agency in the learning process. Provide a copy of this description to project coordinator.	4 months after Teaming 101	Advisory Committee/Board	

### *Phasing-In of Teaming Cases*

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
16. Revisit types and numbers of cases to team after 90 days and thereafter on a quarterly basis.	Within 60 days after Teaming 101	Team (facilitated by the supervisor)	
17. Identify any modifications that may be needed for case record access and documentation.	Within 3 months after Teaming 101	Team (facilitated by the supervisor)	

TASK	TARGET DATE	RESPONSIBLE PARTY	DATE COMPLETED; COMMENTS ON PROGRESS
18. Begin to divide team meeting time(s) into two parts (one for group supervision and case conferencing and the other for on-going team process and administrative issues).	Within 4 months after Teaming 101	Team (facilitated by the supervisor)	
19. Develop a case assignment process that will enable all team members to work with all other team members over the course of time and that provides for an equitable workload distribution.	Within 5 months after Teaming 101	Supervisor	
20. Begin working with additional families as a team so that each team member is either a primary or secondary worker on a case.	Within 5 months after Teaming 101	Team (facilitated by the supervisor)	
21. Revisit the team Mission and Values Statements; revise as needed.	6 months after Teaming 101	Team (facilitated by the supervisor)	
22. Revisit the team Operating Agreement and revise as needed.	Quarterly, and also whenever there is staff turnover	Team Supervisor	

# **Appendix B: Levels of Team Development**

## **Levels of Team Development Benchmarks for Teams**

### **LEVEL 1 (presumes that all of the following are done)**

- The team completes tasks 1–11 on the Teaming Project Planning Guide.
- The team decides on its teaming first case.
- The team meets at least once per week for group supervision and team development activities.
- Primary and secondary roles on teamed case(s) are assigned.
- Operating agreements are utilized by team.
- The team orients new members to the team and mentors them in teaming process.
- Team members are seated in close proximity to one another.

### **LEVEL 2 (presumes that Level 1 benchmarks have been reached and are maintained)**

- The team completes tasks 12–22 on the Teaming Project Planning Guide.
- Team members experience shared identity as valued members of the group.
- Team members consistently demonstrate collective responsibility for teamed case outcomes and activities.
- Team members regularly engage in informal case discussions about teamed cases, in addition to those held during group supervision meetings.
- Operating agreements are regularly reviewed and refined as necessary.
- A successful process to help all team members acclimate to changes in team membership is implemented, regularly revisited, and periodically revised.
- Team members willingly surface conflicts with one another and are able to successfully resolve them.
- Team members practice rotation of facilitation roles during group supervision.
- Each team member has at least one teamed case.

**LEVEL 3 (presumes that Levels 1 and 2 benchmarks have been reached and are maintained)**

- Team members regularly take initiative to brainstorm approaches to working with non-teamed cases.
- The advisory board is utilized to solve networking and public relations challenges, to share learning from teaming, and to support expansion of teaming in the agency.
- Team members demonstrate skill in multiple roles (timekeeper, process observer, scribe/recorder, facilitator) during group supervision.
- The team seeks feedback from families and service providers regarding the services the team provides.

**LEVEL 4 (presumes that Levels 1, 2, and 3 benchmarks have been reached and are maintained)**

- Team members successfully incorporate new casework approaches learned in training and in group supervision into daily practice.
- The team is proactive in mentoring new teams within their agency.
- The team reflects on and shares lessons learned about teaming with other teams in the pilot team network.
- Formal and informal teaming is integrated into the team's daily practice.

## ***Benchmarks for Supervisors***

### **LEVEL 1 (presumes that all of the following are being done)**

- Schedules weekly group supervision meeting with an agenda and facilitates case presentation/discussion
- Meets weekly with team and facilitates team development activities
- Oversees completion of tasks 1–11 on the Teaming Project Planning Guide
- Facilitates discussion with team members about criteria for cases to team
- Facilitates choice of first case to team
- Assigns primary and secondary roles and tasks on teamed case(s)
- Facilitates group supervision
- Reinforces team members' adherence to Operating Agreements

### **LEVEL 2 (presumes that Level 1 benchmarks have been reached and are maintained)**

- Oversees completion of tasks 12–22 on the Teaming Project Planning Guide
- Facilitates group supervision of more than one case (These discussions involve collaborative decision-making about both the division of case tasks and development of casework strategies for the teamed case.)
- Identifies developmental needs of the team and implements the provision of appropriate training and/or skill building activities
- Fosters a supportive, inclusive team environment
- Identifies conflict between staff and facilitates/models methods of conflict resolution
- Develops structure for rotation of facilitation roles during group supervision and models those skills.
- Initiates/models process for integrating new members and for saying “goodbye” to departing members

**LEVEL 3 (assuming that Levels 1 and 2 benchmarks have been reached and are maintained)**

- During group supervision, includes discussion about the impact of clients on the worker and also generalizes applied learning from a teamed case to other cases
- Coaches/supports team members regarding group supervision facilitation roles.
- Encourages team members to brainstorm approaches to working with non-teamed cases

**LEVEL 4 (assuming that Levels 1, 2, and 3 benchmarks have been reached and are maintained)**

- Works with team to identify best team practice goals
- Facilitates team discussion on lessons learned through teaming, as well as how to share these lessons with other teams, and other units in the agency
- Reaches out to new teams to provide mentoring/support
- Assumes the role of facilitator/coach (rather than directing, due to the team's high level of self-management)
- The unit's workload is managed collectively and the unit's work meets timely, quality practice standards





## **Appendix C: Brochure and Business Card Examples**

### ***Brochures***

**Albany County Phase 2**

**Columbia County Phase 2**

**Columbia County Phase 3**

**Cortland County Phase 3**

**Nassau County Phase 1**

**Rockland County Phase 3**

### ***Business Cards***

**Cortland County Phase 3**

**Nassau County Phase 1**

**St. Lawrence County Phase 3**

**Schenectady County Phase 2**

## Albany County Phase 2

**Our Mission Statement**  
*The Albany County teaming approach is to provide shared responsibility among each team member while utilizing our individual strengths when working with families to protect children, reduce risk and strengthen families*

### YOUR TEAM

*Linda Testa, Sr. CW 447-5574  
Douglas Chambers Sr. CW 447-4906  
Tracy Cusack, CW 447-7538  
Jennifer Gaunt, CW 447-7305  
Jennifer Eastland, CW 447-7411  
Heather Schumacher, CW 447-7542*

### TEAMING

Child Protective Services  
An exciting new approach to help your family succeed and have positive outcomes

*"Change your thoughts and you change your world"*  
-Norman Vincent Peale


### OUR VALUES

- \*Mutual Respect
- \*Honesty
- \*Integrity

Albany County Department for Children, Youth and Families (ACDCYF)  
Michael G. Breslin, County Executive  
Colette V. Poulin, Commissioner  
112 State St., Albany, NY 12207  
Monday through Friday  
8:30 a.m. to 4:30 p.m.  
**518-447-7500**  
[www.albanycounty.com](http://www.albanycounty.com)

Albany County Department for Children, Youth and Families (ACDCYF)

## Albany County Phase 2

<p><b>WHAT IS THE TEAMING APPROACH?</b></p>	<p><b><i>“A unit of caseworkers working together with one family.”</i></b></p>	<p><b>HOW TEAMING BENEFITS YOU AND YOUR FAMILY</b></p>	<p><b>YOUR FAMILY IS AN IMPORTANT PART OF OUR TEAM</b></p>
<p>Teaming involves a unit made up of caseworkers, senior caseworkers and a supervisor, all working together with each individual family to get the Best Results.</p>	<p>This partnership between a family and their team can provide a unique experience for everyone involved.</p>	<p>All families will have a primary and secondary worker on their case.</p>	<p>Together we can:</p>
		<p>You will always have a caseworker available to you.</p>	<p>Have family meetings to identify strengths within your family.</p>
		<p>Each member brings their own unique life experience and expertise to the team</p>	<p>Work with service providers to help your family.</p>
		<p>When your case is being teamed you will not have to explain your situation/ case history if your primary worker is unavailable.</p>	<p>Use a strength based approach to creatively help to solve problems facing your family.</p>
<p>The teaming approach includes the family and is an opportunity for everyone to utilize their strengths and skills to develop different ways to meet the needs of the family, solve problems, create a stronger family unit and ensure safety for the child(ren).</p>	<p>The team works together with your family for better understanding and different ways to solve problems with you.</p>		<p><i>“Coming together is a beginning; keeping together is progress; working together is success.”</i></p>
<p>-Henry Ford</p>			

## Columbia County Phase 2

**Advisory Board**

*The Columbia County Foster Care Team utilizes an independent Advisory Board for:*

- ↓ Communication
- ↓ Problem Solving
- ↓ Training
- ↓ Resources/ Support
- ↓ "Cheerleading"
- ↓ Evaluating

Members of the Advisory Board include:

- ↓ Psychologists
- ↓ Law Guardians
- ↓ DSS Supervisors
- ↓ Community/ Advocacy Agencies
- ↓ Mental Health Agencies

**YOUR COLUMBIA COUNTY FOSTER CARE TEAM**

**Caseworkers**  
Meredith Arto-Winch  
518-828-9411 x188

Georgia Lanier  
518-828-9411 x207

Dana Shatts  
518-828-9411 x182


**Community Care Specialist**  
Cindy Pilch  
518-828-9411 x199

**Senior Caseworker/ Team Facilitator**  
Karen McSweeney  
518-828-9411 x191

**Supervisor**  
Cindy Jennings  
828-9411 x125


Paul W. Mossman  
Commissioner

Michael Williams-Riordon  
Deputy Commissioner



Columbia County  
Department of Social Services  
25 Railroad Avenue  
Hudson, NY 12534

**Columbia County Teaming Initiative**





**Mission Statement:**  
**The Columbia County Foster Care Team strives to improve the quality of relationships with the families we serve by bringing respect, dedication, and diversity of backgrounds in order to provide services and support that are beneficial to all.**

## Columbia County Phase 2

<p><b><u>What is "Teaming?"</u></b></p> <p>Child welfare teams are small groups of people with a shared common mission and approach to working with youth. Caseworkers are each responsible for the team's tasks and progress. They have complementary social work skills and expertise that they willingly share with each other to accomplish the ultimate goal of helping foster care youth develop into healthy, functional citizens with permanent attachments to supportive adults, families and communities.</p>	<p><b><u>What makes the Columbia County Transitional Team unique?</u></b></p> <p>Traditionally, "teaming" has focused solely on child welfare or child protective programs. However, Columbia County has chosen to create a Team to manage cases between the Foster Care Unit and the Adult and Family Services Unit. The Team combines staff from the two units to manage the cases of foster care youth between the ages of 17 to 21 who have a goal of Independent Living or adult residential care.</p>	<p><b><u>Benefits of Teaming</u></b></p> <ul style="list-style-type: none"><li>↳ Collaborative efforts of the team and the community provides a safer, more effective discharge plan</li><li>↳ Seeks to prevent homelessness, domestic violence, substance abuse and law enforcement involvement which can result from an unplanned discharge</li><li>↳ Seeks to provide youth with access to appropriate medical care and necessary community services upon discharge</li><li>↳ Provides life skills necessary for self sufficiency as an adult</li><li>↳ Most importantly, provides connections to a significant adult and/or mentor</li></ul>
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### Columbia County Phase 3

<p><b><u>Advisory Board</u></b></p> <p><i>The Columbia County Transitional Team utilizes an independent Advisory Board for:</i></p> <ul style="list-style-type: none"> <li>↓ Communication</li> <li>↓ Problem Solving</li> <li>↓ Training</li> <li>↓ Resources/ Support</li> <li>↓ "Cheerleading"</li> <li>↓ Evaluating</li> </ul>	<p><u>YOUR COLUMBIA COUNTY TRANSITIONAL TEAM</u></p>	<p><b>Caseworkers</b> Elaine Scull 518-828-9411 x197</p> <p>Dana Shuttis 518-828-9411 x182</p> <p>Millie Sweatt 518-828-9411 x175</p> <p><b>Community Care Specialist</b> Cindy Pilch 518-828-9411 x199</p> <p><b>Senior Caseworker/ Team Facilitator</b> Karen McSweeney 518-828-9411 x191</p>	<p><b><u>Columbia County Teaming Initiative</u></b></p>		<p><b>Members of the Advisory Board include:</b></p> <ul style="list-style-type: none"> <li>↓ Psychologists</li> <li>↓ Law Guardians</li> <li>↓ DSS Supervisors</li> <li>↓ Community/ Advocacy Agencies</li> <li>↓ Mental Health Agencies</li> </ul>	<p><b>Supervisor</b> Cindy Jennings 828-9411 x125</p>	<p><b><u>Mission Statement:</u></b></p>	<p><b>The Columbia County Transitional Team provides services to bridge the gap between adolescence and adulthood</b></p>	<p>Paul W. Mossman Commissioner</p> <p>Michaele Williams-Riordan Deputy Commissioner</p>		<p>Columbia County Department of Social Services 25 Railroad Avenue Hudson, NY 12534</p>
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### Columbia County Phase 3

<p><b><u>What is "Teaming?"</u></b></p> <p>Child welfare teams are small groups of people with a shared common mission and approach to working with youth. Caseworkers are each responsible for the team's tasks and progress. They have complementary social work skills and expertise that they willingly share with each other to accomplish the ultimate goal of helping foster care youth develop into healthy, functional citizens with permanent attachments to supportive adults, families and communities.</p>	<p><b><u>What makes the Columbia County Transitional Team unique?</u></b></p> <p>Traditionally, "teaming" has focused solely on child welfare or child protective programs. However, Columbia County has chosen to create a Team to manage cases between the Foster Care Unit and the Adult and Family Services Unit. The Team combines staff from the two units to manage the cases of foster care youth between the ages of 17 to 21 who have a goal of Independent Living or adult residential care.</p>	<p><b><u>Benefits of Teaming</u></b></p>
		<ul style="list-style-type: none"> <li>→ Collaborative efforts of the team and the community provides a safer, more effective discharge plan</li> <li>→ Seeks to prevent homelessness, domestic violence, substance abuse and law enforcement involvement which can result from an unplanned discharge</li> <li>→ Seeks to provide youth with access to appropriate medical care and necessary community services upon discharge</li> <li>→ Provides life skills necessary for self sufficiency as an adult</li> <li>→ Most importantly, provides connections to a significant adult and/or mentor</li> </ul>

## Cortland County Phase 3

### Why has the ACT Initiative Team come to my home?

Caseworkers from the ACT Initiative have come to your home because you have opened a foster care or preventive case with Cortland County DSS Family & Children's Department. A case has been open to assist you in identifying and meeting your needs to help prevent future DSS or Child Protective Services involvement.

A preventive and/or foster care case can be opened voluntarily or can be mandated by Family Court. Our department receives referrals through a variety of resources. Some families are self-referred while others are referred by doctors or outside agencies. A referral can also be made by Child Protective Services as a result of an investigation that is being conducted.

Our jobs as foster care/preventive Caseworkers is to assist your family in identifying your needs and to create a service plan to meet these needs. A service plan is composed of the needs that have been identified for your family and what the Caseworker and your family will do to work toward meeting those needs. The ACT Initiative can act as a gateway to many supportive services by referring your family to community resources such as Cornell Cooperative Extension, Catholic Charities, PAMP, mental health counseling services, etc. Team members will actively work to assist your family in determining what will work best for you.

### Who are we?

**Tricia Aney**.....428-5484  
Caseworker

**Danielle Hall**.....753-5287  
Caseworker


**Becky VanWagenen**....753-5364  
Caseworker

**Renee Weeks**.....753-5350  
Caseworker

**MaryGail Archer**.....753-5343  
Sr. Caseworker

### ACT Initiative

Advocacy & Caring Team




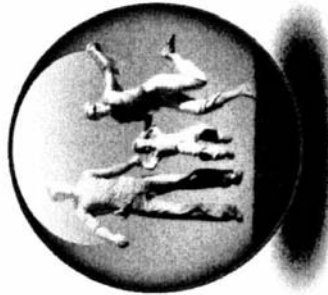

Supporting families to identify and meet their needs

*Children are the world's most valuable resource and its best hope for the future!*

Cortland County Family & Children's 60 Central Ave. Cortland, NY 13045 Phone.....(607) 753-5347 Fax.....(607) 753-5121
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### Cortland County Phase 3

<p><b>What is the ACT Initiative?</b></p>		<p>The goal of Cortland County's ACT Initiative is to assist your family in identifying your needs to ensure the safety and well-being of your family.</p>	<p>This is done using a team approach that includes the family, two or more caseworkers, and other community service providers. By using a teaming approach, the ACT initiative intends to engage families in a strength based process to assist your family in achieving self-sufficiency.</p>	<p><b>"Focus on progress rather than perfection"</b></p>
<p><b>What is our mission?</b></p>	<p><b>"Alone we can do so little... together we can do so much"</b></p>	<p><b>Mission Statement:</b></p>	<p>The Team will employ creative and innovative ways to empower families to identify and meet needs and to promote self sufficiency.</p> <p>The Team will create a support system to reduce stress and promote retention.</p>	
<p><b>What are family meetings?</b></p>		<p>Family Meetings are scheduled with the family, the ACT Initiative, service providers, and anyone the family feels can support them in reaching their goals. The Family Meeting concentrates on identifying the family's strengths and develops strategies to use these strengths to address current issues. It is very important that the family participates with the Team. The family is asked to identify what needs to be done to meet their needs and helps decide who will complete the tasks that are identified as priorities.</p>	<p><b>"The nice thing about team work is... that you always have others on your side"</b></p>	

Nassau County Phase 1

**Teaming touches all of the core practices of DSS:**

**Child Driven** – Permanency, safety and well-being of children, as well as that of the people connected to them, form the center of the work DSS engages in with families and their communities.

**Family Centered** – The family is the primary source for the nurturing and protection of children. Parents should be supported and respected in their efforts to nurture their children.

**Community Focused** – Families are resources to one another and to communities. Every community has assets as well as needs. Work with families is focused on identifying and strengthening community resources.


**Strength Based** – Identifying family strengths will inspire hope. Engaging families respectfully promotes involvement that focuses on and supports strengths. Strength emerges from building partnerships between the family, community and DSS.

**Committed to Cultural Diversity / Cultural Competence** – Families are diverse and have the right to be respected for their economic, ethnic, class, cultural and religious experiences and traditions.

**Committed to Continuous Learning** – Opportunities for continuous learning must be widely afforded to professionals, family and community providers.

NASSAU COUNTY  
DEPARTMENT OF  
SOCIAL SERVICES

*Teaming Initiative*




**Mission Statement:**

Through teaming we will promote an integrated service delivery to families by empowering them to recognize and utilize their strengths, overcome their challenges and promote future healthy, safe, and permanent family functioning.

<b>Teaming Project Staff</b>		
Theresa McGuinness, Supervisor		227-8152
Shilah DesAnges		227-8150
Sheila Harrell		227-8153
Michael McLeod		227-8135
John Pacca		227-8260
Mitza Simeon		227-8148
Xiomara Villacis		227-8126
Deborah White		227-8329
<b>Fax Number</b>		227-7490



THOMAS R. SUOZZI  
COUNTY EXECUTIVE

JOHN E. IMHOFF, Ph.D.  
COMMISSIONER

Nassau County  
Department of Social Services  
60 Charles Lindbergh Boulevard  
Uniondale, New York 11553

#4003 12/07

## Nassau County Phase 1

<p><b>Benefits for Families and Children involved with Teaming:</b></p> <ul style="list-style-type: none"> <li>Families feel more supported by having a team of workers they can contact.</li> <li>Family members who are already overwhelmed by the crises that led to their report, will speak with the teaming workers and will not have to tell their story over and over again.</li> <li>Teaming allows for caseworkers and families to become more involved in recognizing family strengths which can be used to address CPS and family concerns.</li> </ul>	<p><b>Goals of the Nassau County Teaming Initiative</b></p> <ol style="list-style-type: none"> <li>To ensure high quality, integrated service delivery to families with indicated Child Protective Service cases.</li> <li>To maintain effective safety interventions for vulnerable children which will protect them in the present and also promote future healthy family functioning.</li> <li>To support case workers and promote their growth through teamed interventions and group supervision.</li> <li>To create a spirit of cooperation and collaboration between the families and the DSS case workers.</li> </ol>	<p><b>Why does Child Protective Services continue to be involved with my family?</b></p> <ul style="list-style-type: none"> <li>Your family has been referred to the Teaming Unit after an investigation has concluded that the allegations made on behalf of your child(ren) have been substantiated. An assessment has been made that your family is in need of further services in order for your children to be cared for safely.</li> <li>Parenting is rewarding, but it's not always easy. When problems arise in a family, it is often the children who are emotionally or physically affected. Unfortunately, some parents do not know where to turn to get help for their children or themselves.</li> <li>Team caseworkers will visit your home to discuss the help your family may need to keep safe and prevent the problems that have caused you to need help. We will work with your family members to resolve any health or safety issues. We will assist your family in identifying or developing your strengths in hope of preventing the need for CPS assistance in the future.</li> </ul>
<p><b>Benefits for Families and Children involved with Teaming:</b></p> <ul style="list-style-type: none"> <li>Families feel more supported by having a team of workers they can contact.</li> <li>Family members who are already overwhelmed by the crises that led to their report, will speak with the teaming workers and will not have to tell their story over and over again.</li> <li>Teaming allows for caseworkers and families to become more involved in recognizing family strengths which can be used to address CPS and family concerns.</li> </ul>	<p><b>Goals of the Nassau County Teaming Initiative</b></p> <ol style="list-style-type: none"> <li>To ensure high quality, integrated service delivery to families with indicated Child Protective Service cases.</li> <li>To maintain effective safety interventions for vulnerable children which will protect them in the present and also promote future healthy family functioning.</li> <li>To support case workers and promote their growth through teamed interventions and group supervision.</li> <li>To create a spirit of cooperation and collaboration between the families and the DSS case workers.</li> </ol>	<p><b>Why does Child Protective Services continue to be involved with my family?</b></p> <ul style="list-style-type: none"> <li>Your family has been referred to the Teaming Unit after an investigation has concluded that the allegations made on behalf of your child(ren) have been substantiated. An assessment has been made that your family is in need of further services in order for your children to be cared for safely.</li> <li>Parenting is rewarding, but it's not always easy. When problems arise in a family, it is often the children who are emotionally or physically affected. Unfortunately, some parents do not know where to turn to get help for their children or themselves.</li> <li>Team caseworkers will visit your home to discuss the help your family may need to keep safe and prevent the problems that have caused you to need help. We will work with your family members to resolve any health or safety issues. We will assist your family in identifying or developing your strengths in hope of preventing the need for CPS assistance in the future.</li> </ul>
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## Rockland County Phase 3


### Rockland County Children's Services Child Permanency Teaming Initiative

**What Are The Benefits of Teaming ?**

**What Can You Expect ?**

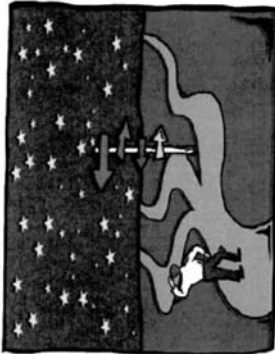
**Who Are We ?**

**Key Points to Remember**



#### An Innovative Approach

The Child Permanency Team's mission is to utilize a team approach that gives at-risk children and their families a broader array of culturally competent expertise and casework planning strategies. Caseworkers work together as a team to empower families to build healthy networks of social supports and more effective coping skills leading to self-sufficiency for parents and permanency for children.




For information about health and human services, please contact:



**Information Rockland-NY Connects**  
845-364-2020  
[www.informationrockland.org](http://www.informationrockland.org)  
[info@co.rockland.ny.us](mailto:info@co.rockland.ny.us)

#### What Are the Benefits of Teaming?

- Families feel more supported by having a team of caseworkers they can contact.
- Family members, who are already overwhelmed by the crises that led to placement, have access to a broader array of casework expertise and experience to meet their individual needs.
- If your assigned caseworkers are not available, another Permanency Team Caseworker who is familiar with your case can be reached.
- The Permanency Team will maintain consistent support toward helping you reach your family's goals even if your assigned caseworkers are no longer available.



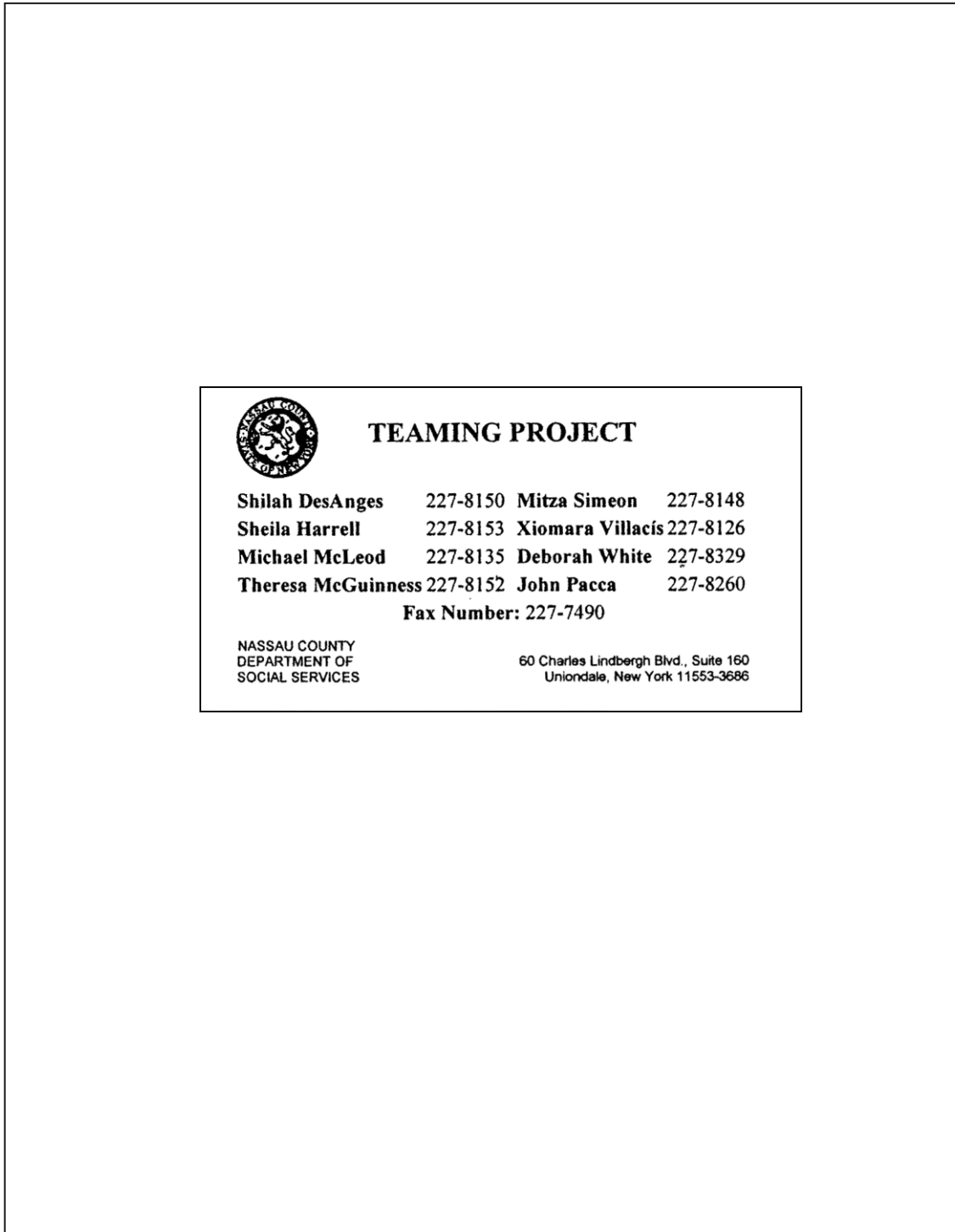
## Rockland County Phase 3

<p><b>What Can You Expect?</b></p> <p>When a referral is made to the Child Permanency Team because your child was removed by the Rockland County Family Court and placed in either foster care or direct custody:</p> <ul style="list-style-type: none"> <li>• Two team members/caseworkers will be assigned to work with your family.</li> <li>• The team members will work with you to identify the safety &amp; risk factors that led to your child's placement.</li> <li>• The team members will then help you to develop a service plan which builds on your family's strengths and minimizes identified safety and risk factors.</li> <li>• The primary goal of the service plan is to achieve a safe strategy for permanency for your child, which must be approved by Family Court.</li> <li>• The team will provide casework counseling and connect you to services in and around your community to help you achieve your goals.</li> </ul> 	<p><b>Who Are We?</b></p> <p><b>Rockland's Child Permanency Team:</b></p> <p><b>Barbara Gavin</b>..... 364-3518 <i>Supervisor</i></p> <p><b>Linda Ortiz</b>..... 364-3521 <i>Senior Caseworker</i></p> <p><b>Jill Stoll</b>..... 364-3527 <i>Senior Caseworker</i></p> <p><b>Susan Diamond</b>..... 364-3018 <i>Caseworker</i></p> <p><b>Martine Gabriel</b>..... 364-3162 <i>Caseworker</i></p> <p><b>Beatrice Prophete</b>..... 364 -3531 <i>Caseworker</i></p>	<p><b>Key Points to Remember...</b></p> <ul style="list-style-type: none"> <li>• Children need a safe and stable home environment, so they have the best chance of developing into healthy and secure adults.</li> <li>• Foster care is only a temporary solution, so it's very important for everyone to start working together and planning right away to ensure the best possible outcomes for your family.</li> <li>• It is the responsibility of both parents to participate in planning with the team once your child enters placement.</li> <li>• The Child Permanency Team Caseworkers will help you develop a safe plan that will satisfy the expectations of the Family Court.</li> <li>• You will have the opportunity to learn and practice skills that can strengthen your family and prevent separations from your children in the future.</li> <li>• Your Caseworkers are here to guide and assist you to achieve your and your family's goals.</li> <li>• If your child remains in placement for 15 out of 22 months, the agency is mandated to petition the court to terminate parental rights unless compelling reasons exist.</li> </ul>
<p><b>Rockland County Department of Social Services Children's Services</b> Sanatorium Road, Bldg. C, Pomona, New York 10970</p>  <p><b>C. Scott Vanderhoef, County Executive</b> <b>Susan Sherwood, Commissioner</b></p>		

**Cortland County Phase 3**



## Nassau County Phase 1



### TEAMING PROJECT

**Shilah DesAnge** 227-8150 **Mitza Simeon** 227-8148  
**Sheila Harrell** 227-8153 **Xiomara Villacís** 227-8126  
**Michael McLeod** 227-8135 **Deborah White** 227-8329  
**Theresa McGuinness** 227-8152 **John Pacca** 227-8260


**Fax Number: 227-7490**

NASSAU COUNTY  
DEPARTMENT OF  
SOCIAL SERVICES

60 Charles Lindbergh Blvd., Suite 160  
Uniondale, New York 11553-3686

### St. Lawrence County Phase 3

Verbera Bair 379-2228  
Erin Besio 379-2705  
Patty Boudreau 379-2736  
Melinda Fonda 379-2344  
Bill Hamilton 379-2715  
Mary Laitray 229-3170  
Dianne Calvani 379-2349

  
ST. LAWRENCE COUNTY  
DEPARTMENT OF SOCIAL SERVICES

**Erin Besio**  
Caseworker

6 Judson Street  
Canton, New York 13617

Phone # (315) 379-2705  
Fax # (315) 379-2728



## Schenectady County Phase 2



106 Erie Blvd.  
Schenectady, NY 12305  
Phone: 388-4736  
Fax: 382-1256

### **Schenectady County Office of Children and Family Services** Family Support Learning Unit

Susanna Stein, Supervisor	388-4353
Lance Harvey, CPS Monitor	388-4212
Linda Harrigan, CW	388-4663
Nadine Scarlett, CW	388-4254
Audrea Norton, CW	388-4629
Brandy Hillard, CW	388-4647
Shari Pucci, CW	388-4620
Teresa Eichlin, CW	388-4609



## **Appendix D: Mission Statement Examples**

**Albany County Department of Social Services**

**Columbia County Department of Social Services**

**Erie County Department of Social Services**

**Jefferson County Department of Social Services**

**Schenectady County Department of Social Services**

**St. Lawrence County Department of Social Services**

## **Albany County Department of Social Services**

### **Phase 2 Mission Statement**

*The Albany County Teaming approach is to provide shared responsibility among each team member while utilizing our individual strengths when working with families to protect children, reduce risk, and strengthen families.*

## **Columbia County Department of Social Services**

### **Phase 3 Mission Statement**

*The Columbia County Transitional Team provides services to bridge the gap between adolescence and adulthood.*

## **Erie County Department of Social Services**

### **Phase 3 Mission Statement**

*The mission of the Erie County Department of Social Services Adoption Team is to provide permanency for children and youth in an expeditious manner, while ensuring that their safety, health, educational and emotional needs are met.*

*All members of the team will contribute a unique personality, subset of experiences and professional approach while working as a cohesive team. The team will be responsive to and respectful of the children and families that we serve while ensuring that their voices are heard in the process.*

## **Jefferson County Department of Social Services**

### **Phase 3 Mission Statement**

*To provide families of Jefferson County access to the collective knowledge and experience of the CPS Team. Team members work jointly with families to identify needs, provide assistance, and support with the goal of creating a safe and healthy family environment for the children.*

## **Schenectady County Department of Social Services**

### **Phase 2 Mission Statement**

*We are a unified, strength-based team that will utilize our collective knowledge, skills and training to facilitate the safety and growth of the families we serve, as well as each other*

## **St. Lawrence County Department of Social Services**

### **Phase 3 Mission Statement**

*Our team works together to keep children safe and healthy by sharing responsibilities, providing services, and supporting families of St. Lawrence County.*



## **Appendix E: Operating Agreement Examples**

***Cortland County Department of Social Services  
Group Supervision Operating Agreement***

***Schenectady County Department of Social Services  
Phase 1 Operating Agreement***

***Schenectady County Department of Social Services  
Phase 2 Operating Agreement***

***Massachusetts Department of Social Services  
Operating Agreement***

## ***Cortland County Department of Social Services***

### **Group Supervision Operating Agreement**

1. Each team member will take a turn creating the agenda, for one month. Prior to each meeting, the team member responsible will create the agenda using updated information on the white board. This will be e-mailed to the rest of the team for comments, changes, or additions.
2. One team member will be assigned to take notes and maintain the notebook where the meeting notes are kept.
3. Each case discussion will start with an update of the case and the previous to-do list for the case. The caseworker will identify any issues that need to be discussed or decisions that need to be made, and a new to-do list will be made with assignments for team members.
4. If a topic runs over the allotted time, the team will decide if it should be tabled, decided on, or the conversation should be continued.
5. If the discussion comes to an impasse and the team is unable to come to a decision or resolution, the team will use the following facilitation techniques to help in the process: listing pros and cons, brainstorming, table the discussion until the next meeting, seek out additional views from Grade B Supervisor or CPS (still working on this idea).
7. During group supervision meetings, team members are responsible to:
  - a. Be on time.
  - b. Listen to all ideas.
  - c. Be respectful to one another.
  - d. Pay attention.
  - e. Not interrupt one another.
  - f. Cultivate an open forum for creativity.
8. Decision making will incorporate the following principles and process:
  - a. All ideas will be listened to and considered.
  - b. Decisions will require consensus.
  - c. Everyone gives opinion.
  - d. Team assesses consensus until the decision is resolved.
  - e. Time for final comments.
  - f. The supervisor can override only if the team's decision is against agency policy and procedures.
  - g. The team's decision is your decision.



## **Schenectady County Department of Social Services**

### **Phase I Operational Guidelines**

1. The team is available to discuss every teaming case on a rotating basis and will be reviewed at least once a month at a team meeting/group supervision. The primary/secondary workers may defer and are responsible for making sure cases are discussed.
2. Case update sheets are to be completed by the primary or secondary workers each time a case is reviewed. These sheets are to be turned in to supervisor and kept in a specific folder by the beginning of the next team meeting. A progress note must be entered into connections documenting review and outcome of the review in a timely manner.
3. All cases entering the unit can be teamed for the first 30 days, unless as the team determines appropriate.
4. Requests for teaming an existing non-teamed case can be considered by the team to support a specific team member and/or family, and to reach specified goals and complete specified tasks.
5. Cases will be considered for teaming after a team discussion of several factors such as the number of cases currently being teamed, current caseload numbers, benefit to the family, and the family's desire to have their case teamed, as outlined in our teaming criteria.
6. Initial introduction with the family will be completed by the primary/secondary workers, and will include a discussion about teaming. Other team members may be substituted for the secondary if not available for the first introduction.
7. The family will meet every team member over time and will receive the numbers of the primary and secondary workers.
8. Team meetings will occur at least weekly, and team members will not schedule any other appointments or activities during this time.
9. Transfer meetings will be open to all team members.
10. Teambuilding events will be scheduled at least quarterly.
11. It is the responsibility of each team member to ask for assistance in both emergency and non-emergencies. It is the responsibility of each team member to respond.
12. Initial discussion to team or discontinue teaming a case should be initiated by primary worker with team consensus.
13. At the first team meeting after a case transfer, the case is to be presented to the team. The team will identify what needs to be done within the first thirty days. It will be recorded and progress reviewed at subsequent team meetings.

## ***Schenectady County Department of Social Services***

### **Phase 2 Operating Agreement**

- Make decisions as a team.
- Communicate in a strength-based manner for both “big T” and “little t” cases.
- Request a “Time Out” before things get out of control and/or present as a threatening situation.
- Be specific about steps taken for the family and what the outcomes have been.
- Prioritize our families’ needs and problems so as not to overwhelm yourself or the team.
- Actively listen and be considerate as evidenced by being respectful, by maintaining eye contact, and watching body language, and responses of the team members. All points of view can be considered.
- Food and coffee every Tuesday (plan on Friday).
- Be honest, respectful, courteous, and willing to listen.
- No personal attacks.
- Bring Agenda to meetings.
- Start and end meetings on time.
- Everyone gets heard.
- Discuss differences respectfully; keep issues within the team.
- Don’t get caught up in the negativity—opt for positivity.
- Format to end positively.
- Prepare a to-do list.
- No phones during meetings.
- Rotate facilitation roles (except for scribe).
- Be flexible and available to help other team members and communicate in strength based manner with “big T” or “little t” cases.

### **Conflict Resolution**

- Identify the problem/conflict/concern.
- Decide how to address concerns (team or individual).
- Assessment and Problem identification
- Use “I” statements.
- Timing: When to resolve conflict.
- Safety/trust: emotional safety.
- Worthwhile (worth your time, risk/reward)
- Consensus or majority vote.
- Deal with conflict as it arises (Go to person privately first; if not resolved, then go to the team)

## **Worcester, Massachusetts Operating Agreement**

### **1. Running Meetings:**

We agree that we will start meetings on time; that everyone needs to make every effort to be on time; that those who come late will need to obtain the missed information after the meeting; that we will stick to the agenda and develop an action plan at the end of the meeting, as appropriate; that we will maintain our schedule of meetings; that we will stick to our timeframe; and that all members will help move the agenda along to complete the tasks on time.

We will know that it has been done right when:

- Our meetings start and end on time.
- We review and summarize outcomes/actions needed.
- All parties are clear about what is discussed and what is expected of them.

When the agreement is not followed:

- All members of the team will help to move the agenda along and stick to it.
- We will confront each other when the agreement is broken.

### **2. Making Key Decisions:**

We have defined “key decisions” as those decisions which involve all of the team members (i.e., likely to affect all of the members). We agree that everyone will have the opportunity to express their opinions and be heard; that everyone needs to weigh in; and that we will attempt to reach consensus in a timely manner and that if we are unable to do so, the supervisor will make the decision.

We will know that it has been done right when:

- The team members know where each other stands.
- We have a clear understanding of the decision.
- We have buy-in for the decision.
- We are ready to implement the decision.

When the agreement is not followed, we will:

- Keep each other on the task.
- Stay focused on the decision at hand.
- Re-state the problem.

### **3. Conflict Between Team Members:**

We agree that we will bring concerns to each others' attention in a timely manner.

We will know that it has been done right when:

- We share and listen to each others' perspectives
- We feel heard and respected.
- We have a better understanding of each other.
- Our relationships become stronger.
- No one feels disrespected or accused.

When the agreement is not followed, we will:

- Point it out to each other.
- Talk about why the agreement was not followed.
- Encourage each other to be direct.



# **Appendix F: Strengths and Needs Assessment Categories**

## ***Strengths/Needs Assessment Categories***

### **1. Engagement Skills**

Families

Adults

Adolescents

Children

Collaterals

### **2. Managing Authority**

### **3. Interpersonal Skills/Core Conditions**

### **4. Assessment Knowledge and Skills**

Safety

Risk

Family Strengths

Family Needs

Underlying Conditions and Contributing Factors

Child Development

Adult Development

Family Functioning

### **5. Decision-Making**

Safety

Risk

Service Planning

Interventions

### **6. Influencing Change**

Understanding and Utilizing the Elements of Change

Working Collaboratively with Families

Utilizing Family Strengths

Teaming with Referral Resources



- 7. Supporting Child Well-Being**
- 8. Reassessment/Evaluation/Case Closure**
- 9. Documentation**



## **Appendix G:**

### ***Teaming Case Criteria Examples***

**Albany County Department of Social Services  
Phase 3 Case Criteria**

**Chemung County Department of Social Service  
Phase 3 Case Criteria**

**St. Lawrence County Department of Social Services  
Phase 3 Case Criteria**

**Schenectady County Department of Social Services Case Criteria  
Phase 1 Teaming Case Criteria**

## ***Albany County Department of Social Services***

### **Phase 3 Case Criteria**

- A case that the team is struggling with what direction to move forward
- Chronic problems, such as major depression and severe mental health
- Multiple service providers
- Counter-transference and transference concerns
- Cases that expend a lot of time

## ***Chemung County Department of Social Services***

### **Phase 3 Case Criteria**

- Clients/service providers that are oppositional
- Complex case as evidenced by multiple children, multiple fathers, multiple placements and multiple subsystems
- Cross-system cases
- Risk factors in case

## ***Erie County Department of Social Services***

### **Phase 3 Case Criteria**

- Child with history of multiple placements
- Placement about to disrupt
- Children with a higher level of care – multiple needs
- Cases that are dragging
- Problematic foster parents/agency staff

## ***St. Lawrence County Department of Social Services***

### **Phase 3 Case Criteria**

- Team decided on teaming easy cases and very difficult, time-consuming cases

## ***Schenectady County Department of Social Services***

### **Phase 1 Teaming Case Criteria**

Decisions about teaming a case will be made by the team after a discussion of the following issues:

1. Is the family in immediate crisis (“Hot Mess”) that would be resolved quicker and more effectively by teaming?
2. Does the family present with a multitude of issues/facets and/or subsystems that could not reasonably be managed by a single caseworker?
3. Would teaming be an appropriate intervention to prevent a caseworker from resigning or having an impulsive breakdown?
4. What is the number of cases currently teamed?
5. What are the current caseload numbers in the unit?



**Appendix H:**  
**Weekly Group Supervision – Teamed Case**  
**Information**

**Weekly Group Supervision – Teamed Case Information**

Date: \_\_\_\_\_ Primary Worker: \_\_\_\_\_

Secondary Worker: \_\_\_\_\_

Case Name (include names, ages, and roles if this is a new, large, or complex family):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of last home visit or contact (specify who was seen and where):

\_\_\_\_\_  
\_\_\_\_\_

Schools attended, and any school issues:

\_\_\_\_\_  
\_\_\_\_\_

Mental health and/or substance abuse issues:

\_\_\_\_\_  
\_\_\_\_\_

Are they receiving services for these? Complying?

\_\_\_\_\_  
\_\_\_\_\_

Date and results of last drug screen (if applicable):

\_\_\_\_\_  
\_\_\_\_\_

Service provider updates:

\_\_\_\_\_  
\_\_\_\_\_

Recent court activity:

\_\_\_\_\_  
\_\_\_\_\_



**Weekly Group Supervision – Teamed Case Information**

(continued)

If foster care case, current visitation plan (where, when, with whom and whether visit is supervised or not):

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What is working well with this family in relation to the child’s safety/risk concerns?

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What are the safety issues/risks that still need to be addressed and/or that the team still needs to discuss?

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Summary of ongoing safety issues/risks:

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What must occur in order to keep the children safe and to achieve the desired Child Welfare outcomes? What are the next steps? (Specify what needs to be done, who will do what, and by what date)

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# **Appendix I: Group Supervision Facilitation Roles**

## **Group Supervision Facilitation Roles**

### ***Group Supervision***

**Tasks** – Divide tasks (such as contacting service providers, conducting home/school visits, setting up transportation, etc.) between team members.

**Strategies** – Brainstorm to develop strategies for working with each individual family and family members.

**Impact on You** – Determine what is the impact of working with this family on the caseworker(s), as well as the impact on family members while working with the caseworker(s)/team members.

**Learning Points** – Reflect on what the team members learned from teaming this case; what skills/knowledge was gained and/or obstacles faced.

## ***Facilitation Roles in Group Supervision***

### **Facilitator**

- Prepares an agenda and sends it out to team members prior to teaming meetings
- Includes a to-do list (including who is doing what and when)

### **Process Observer**

- Watches for body language and attending skills.
- Makes sure that everyone is present (in the moment)
- Ensures that everyone is included in the discussion and that no one team member controls the discussion

### **Timekeeper**

- Using a timer, keeps the conversation progressing in a timely fashion
- Keeps members on the task at hand and avoid ineffective chatter

### **Recorder**

- Acts as scribe, takes accurate and concise notes, and then inserts them in the team's binder
- Makes a list of to-do's and enters each team member's tasks on the teaming white board

### **Reporter**

- Accurately and concisely reports on the group's work

### **Group Member**

- Participates in the discussion by openly and honestly contributing ideas and by listening to other members of the group



# **Appendix J: Print and Web-Based Resources**

## ***Print and Web-Based Resources***

Human Resources at Massachusetts Institute of Technology (MIT). OED Learning Topics. Working on Teams. <http://web.mit.edu/hr/oed/learn/>

Massachusetts Department of Social Services. A Three-Tiered Approach to Developing a Family-Centered Child Welfare Practice.

[www.Mass.gov/Eeohhs2/docs/dss/g\\_pubs\\_threetieredappr.pdf](http://www.Mass.gov/Eeohhs2/docs/dss/g_pubs_threetieredappr.pdf)

Maxwell, John C. 2001. *The 17 Indisputable Laws of Teamwork: Embrace Them and Empower Your Team*. Nashville, Tennessee: Thomas Nelson Publishers.

Tuckman, Bruce. Ph.D. Famous Models Stages of Group Development. [www.chimaeraconsulting.com/tuckman.htm](http://www.chimaeraconsulting.com/tuckman.htm)



# **Appendix K: Glossary of Teaming Terms**

## ***Glossary of Teaming Terms***

**Advisory Board** – a group of individuals who serve as an important resource by offering their individual and collective advocacy and educational support, along with other key services as determined by the specific needs of the teamed case.

**De-teaming** – the process of determining whether a teamed case no longer needs the services of a combined team and, if applicable, the subsequent decision to relinquish control of the case to a single caseworker because the teaming approach is no longer deemed necessary.

**Four Stages of Group Development** – the term first used by American psychologist Bruce Tuckman in 1965 to describe the various indicators (Forming, Storming, Norming, and Performing) that characterize the progressive development of a group of individuals into a competent, cohesive, and effective team.

**Group Supervision** – the process whereby all team members give and receive input and support from other team members regarding the decisions they need to make, the strategies they should employ, and how they will go about accomplishing their work.

**Mission Statement** – a brief, concise, written statement that is developed to define the purpose of an organization, including its reason(s) for existence, goal(s), and unique contribution(s), as well other related elements and which then serves as a benchmark to provide overall direction and guide decision-making for staff.

**New York State Teaming Initiative Project** – the New York State teaming pilot sponsored by the OCFS and including selected county teams, the OCFS design team, and CDHS teaming specialists.

**Operating Agreement** – a living document that serves as a contract between individuals who interact as part of a team and that consists of a list of mutual expectations regarding interactions, including specific guidelines regarding expected behaviors and working relationships.

**Strengths and Needs Assessment** – a tool based on Common Core concepts (such as engagement skills for family members of different ages and the ability to determine a child's safety and risk within the environment) that is utilized by CDHS trainers to inventory staff knowledge and skills, the results of which are then used to provide necessary guidance and appropriate technical assistance.

**Teaming** – an innovative approach to child welfare casework in which individual casework is replaced by team casework, and in which responsibility for case outcomes and progress is reassigned from the individual caseworker to the entire casework team.

**The Three P's** – the term used to designate the important elements of purpose (the what: e.g., what is the purpose of the advisory board), process (the how: e.g., how do we form an advisory board?), and payoff (the benefit: e.g., What are the benefits of having an advisory board?).

