Common Core 3.0

200 Level SDM Assessment Knowledge and Skills Lab

Trainer Guide

CDSS

April 30, 2019

Use the Assessment End of Block Evaluation Materials Dated December 31, 2018

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Acknowledgements

FOR MORE INFORMATION on California's Core Curricula, as well as the latest version of this curriculum, please visit the California Social Work Education Center (CalSWEC) website: http://calswec.berkeley.edu

Introduction

Please read carefully as a first step in preparing to train this curriculum.

IMPORTANT NOTE: Each curriculum within the Common Core series is mandated and standardized for all new child welfare workers in the state of California. It is essential that all trainers who teach any of the Common Core Curricula in California instruct trainees using the standardized Training Content as provided. The training of standardized content also serves as the foundation for conducting standardized testing to evaluate and improve the effectiveness of new worker training statewide.

GENERAL INFORMATION

Common Core curriculum and training for new child welfare workers in California is designed to be generalizable across the state, cover basic child welfare knowledge and skills, and is important for all CWS positions with in an agency.

The Common Core Curricula model is designed to define clearly the content to be covered by the trainer. Each curriculum consists of a *Trainee's Guide* and a *Trainer's Guide*. Except where indicated, the curriculum components outlined below are identical in both the Trainee's and Trainer's Guides. The Trainee's Guide contains the standardized information which is to be conveyed to trainees.

For an overview of the training, it is recommended that trainers first review the Background and Context, Agenda, and Suggested Lesson Plan. After this overview, trainers can proceed to review the Trainer's Tips and Activities section in the Trainer's Guide and the Training Content in the Trainee's Guide in order to become thoroughly familiar with each topic and the suggested training activities. The components of the Trainer's and Trainee's Guides are described under the subheadings listed below.

The curricula are developed with public funds and intended for public use. For information on use and citation of the curricula, please refer to the Guidelines for Citation: https://calswec.berkeley.edu/sites/default/files/citation_guideline_6-2018.pdf

Please note that each individual curriculum within the Common Core Curricula is subject to periodic revision. The curricula posted on the CalSWEC website are the most current versions available. For questions regarding the curricula, contact CalSWEC at calswec_rta_cc@berkeley.edu or call CalSWEC at 510-642-9272.

COMPONENTS OF THE TRAINER'S AND TRAINEE'S GUIDES

Competencies and Learning Objectives
The Competencies and Learning Objectives serve as the basis for the Training Content that is provided to both the trainer and trainees. All the Competencies and Learning Objectives for the curriculum are l i s t e d in a separate tab in both the Trainer's and Trainee's Guides. The Learning Objectives are

subdivided into three categories: Knowledge, Skills, and Values. They are numbered in series beginning with K1 for Knowledge, S1 for Skills, and V1 for Values. The Learning Objectives are also indicated in the suggested Lesson Plan for each segment of the curriculum.

Competencies are defined as broad indicators of essential and best practices. Typically, several *Learning Objectives* support the development of each *Competency*. The *Learning Objectives* are more specific than the *Competencies* and usually provide measurable indicators of learning.

Knowledge Learning Objectives entail the acquisition of new information and often require the ability to recognize or recall that information. *Skill Learning Objectives* involve the application of knowledge and frequently require the demonstration of such application. *Values Learning Objectives* describe attitudes, ethics, and desired goals and outcomes for practice. Generally, *Values Learning Objectives* do not easily   lend themselves to measurement, although values acquisition may sometimes be inferred through other   responses elicited during the training process.

Agenda
The Agenda is a simple, sequential outline indicating the order of events in the training day, including the coverage of broad topic areas, pre-tests and/or post-tests, training activities, lunch, and break times. The Agenda for trainers differs slightly from the Agenda provided to trainees in that the trainer's agenda indicates duration; duration is not indicated on the agenda for trainees.

Suggested Lesson Plan (Trainer's Guide only)
The suggested Lesson Plan in the Trainer's Guide is a mapping of the structure and flow of the training. It presents each topic in the order recommended and indicates the duration of training time for each topic. The suggested Lesson Plan is offered as an aid for organizing the training.

The suggested Lesson Plan is divided into major sections by Day 1, Day 2, and Day 3 of the training, as applicable, and contains three column headings: Topic/Time, Learning Objectives, and Methodology. The Topic/Time column is divided into training Segments. The Learning Objectives column reflects the specific objectives that are covered in each Segment. The Methodology column indicates suggested training activities that may accompany each Segment. As applicable, each activity is numbered sequentially within a segment, with activities for Segment 1 beginning with Activity 1A, Segment 2 beginning with Activity 2A, etc. The numbering schema of Day, Segment, Activity mirrors the labeling of materials in the Training Tips and Activities tab.

Evaluation Protocols
It is necessary to follow the step-by-step instructions detailed in this section concerning pre-tests, post-tests, and skill evaluation (as applicable to a particular curriculum) in order to preserve the integrity and consistency of the training evaluation process. Additionally, trainers should not allow trainees to take away or make copies of any test materials so that test security can be maintained.

Training Tips, Activities, and Transfer of Learning (TOL) Exercises (Trainer's Guide only)

The Training Tips section is the main component of the Trainer's Guide. It contains guidance and tips for the trainer to present the content and to conduct each *Training Activity*. *Training Activities* are labeled and numbered to match the titles, numbering, and lettering in the suggested Lesson Plan. *Training Activities* contain detailed descriptions of the activities as well as step-by-step tips for preparing, presenting, and processing the activities. The description also specifies the Training Content that accompanies the activity, and the time and materials required.

Trainers may prefer to insert corresponding pages of the Training Content at the end of each segment, as directed by placeholder pages that are provided. The style of the page numbering of the Training Tips and Activities tab is purposely altered to distinguish these pages easily from the insert pages of the Training Content. The Training Tips and Activities also reference accompanying PowerPoint slides and provide thumbnails of the slides, generally at the end of each *Training Activity*.

Occasionally, a *Trainer's Supplement* is provided that includes additional information or materials that the trainer needs. The *Trainer's Supplement* follows the *Training Activity* to which it applies.

Training Content (Trainee's Guide only; can be inserted into the Trainer's Guide)

The *Training Content* in the Trainee's Guide contains the standardized text of the curriculum and provides the basis for knowledge testing of the trainees. Training activities are labeled and numbered to match the titles and numbering in the suggested Lesson Plan.

Supplemental Handouts

Supplemental Handouts are clearly titled and appear in both the Trainer's and Trainee's Guides. Supplemental Handouts refer to additional handouts not included in the Training Content tab of the Trainee's Guide. For example, Supplemental Handouts include PowerPoint printouts that accompany in- class presentations or worksheets for training activities. Some documents in the Supplemental Handouts are placed there because their size or format requires that they be printed separately.

References and Bibliography

The Trainer's Guide and Trainee's Guide each contain the same References and Bibliography. The References and Bibliography tab indicates the sources that were reviewed by the curriculum designer(s) to prepare and to write the main, supplemental and background content information, training tips, training activities, and any other information conveyed in the training materials. It also includes additional resources that apply to a particular content area. The References and Bibliography tab is divided into three sections:

- All-County Letters (ACLs) and All-County Information Notices (ACINs) issued by the California Department of Social Services (CDSS);
- Legal References (as applicable); and
- General References and Bibliography

In certain curricula within the Common Core series, the References and Bibliography may be further divided by topic area.

Materials Checklist (Trainer's Guide only)

In order to facilitate the training preparation process, the Materials Checklist provides a complete listing of all the materials needed for the entire training. Multi-media materials include such items as videos, audio recordings, posters, and other audiovisual aids. Materials specific to each individual training activity are also noted in the Training Tips and Activities section of the Trainer's Guide.

Posters (Trainer's Guide only)

Some curricula feature materials in the Trainer's Guide that can be used as posters or wall art. Additionally, several of the handouts from the curriculum *Framework for Child Welfare Practice in California* can also be adapted for use as posters.

Tips for Training this Curriculum

Common Core curriculum and training for new child welfare workers in California is designed to be generalizable across the state, cover basic child welfare knowledge and skills, and is important for all CWS positions with in an agency.

This curriculum is intended to help students apply what they learned in the 100 Level curriculum of the Assessment Block. Level 200 classroom curriculum for the Assessment Block will reinforce knowledge and skills gained in prerequisite classroom training, e-learning modules, and field activities. The classroom curriculum will cover the topics of assessment procedures, critical thinking, child and youth development, child maltreatment identification, and the Structured Decision Making (SDM)® system.

This curriculum is designed to include elements from team-based learning, relying more on the discussion that happens between the teams rather than lecture by the trainer. It will be important for trainers to have a strong foundation in the Assessment Block curriculum to highlight key points and advanced assessment skills as trainees work through a case vignette of a family.

Utilize the Vignettes Matrix (Appendix: page 45) for the summary of similarities and differences between the vignettes. This Matrix is provided as a tool to help facilitate the conversations between participant groups.

TRAINING PREPARATION

It is *required* that the trainer preview the following eLearning and/or classroom trainings:

1. Critical Thinking and Assessment
2. Overview of Assessment Procedures eLearning
3. SDM Assessment Skills Lab
4. Assessing for Key Child Welfare Issues
5. Child Maltreatment Identification eLearning
6. CMI Skills Lab

It is *recommended* that the trainer preview the following eLearning(s) and/or classroom trainings pre-requisites to training the classroom:

1. Child Development Introduction eLearning
2. Key Issues in Child Welfare Practice: Substance Use Disorders [part 1], Intimate Partner Violence [part 2], Behavioral Health [part 3] eLearnings
3. Key Issues in Child Welfare: Social Worker as Practitioner Classroom Skills Lab

It is *suggested* that you orient yourself to all the blocks in preparation for this training in order to make links and dig deeper into skill building:

1. Foundation
2. Engagement
3. Case Planning and Service Delivery
4. Monitoring and Adapting
5. Transition

Contact your Regional Training Academy/UCCF for more information and to register for the eLearnings as well as to access the classroom curriculum. Visit CalSWEC website for more information at: https://calswec.berkeley.edu/programs-and-services/child-welfare-service-training-program/common-core-30

FAMILY-FRIENDLY LANGUAGE

Trainers are the example for modeling this for participants. The hope is that the work is done with families, not on clients. Use words such as parents, young adults, youth, child, family…, rather than clients. We want to model that families involved in child welfare services are not separate from us as social workers, but part of our community. This is the goal of the CA Child Welfare Core Practice Model as well and reflects the behaviors we want to see demonstrated in social workers work with families. For more information on the Californian Child Welfare Core Practice Model, visit the CalSWEC website at http://calswec.berkeley.edu/california-child-welfare-core-practice-model-0.

SAFETY ORGANIZED PRACTICE

Some content in this curriculum was developed by the National Council on Crime and Delinquency (NCCD) and the Northern California Training Academy as part of the Safety Organized Practice Curriculum. Please note, not all California Counties are actively practicing Safety Organized Practice (SOP). However, the framework, principles and concepts are integrated throughout the curriculum as tools and best practices. SOP is a collaborative practice approach that emphasizes the importance of teamwork in child welfare. It aims to build and strengthen partnerships with the child welfare agency and within a family by involving their informal support networks of friends and family members. A central belief of SOP is that all families have strengths. SOP uses strategies and techniques that align with the belief that a child and his or her family are the central focus, and that the partnership exists to find solutions that ensure safety, permanency, and well-being for children. SOP is informed by an integration of practices and approaches including:

- Solution-focused practice[1]
- Signs of Safety[2]
- Structured Decision Making[3]
- Child and Family Engagement[4]
- Risk and Safety Assessment research
- Group Supervision and Interactional Supervision[5]
- Appreciative Inquiry[6]
- Motivational Interviewing[7]
- Consultation and Information Sharing Framework[8]
- Cultural Humility
- Trauma-informed practice

MATERIALS

The SDM Policy and Procedures Manual and training materials used in this curriculum are produced by the Children's Research Center. Please contact the Children's Research Center at 800-306-6223 or at support@sdmdata.org. Because CRC makes regular updates to the materials, please ensure you are using the most recent materials when you present this curriculum.

Evaluation

This curriculum uses a knowledge post-test evaluation to both promote learning and provide evaluative feedback on the curriculum. There must be a high level of standardization in both the content and delivery each time that training is delivered in order to utilize data collected to inform curriculum improvement. Trainers must follow the curriculum as it is written and include all activities that lead to the eventual evaluation segment.

To complete the evaluation activity trainers must follow the instructions found in the evaluation segment of this Guide. When conducting the evaluation activity and debrief please follow the instructions found in the evaluation segment and note that all trainer verbal directions are **bolded**.

Answer Sheets

Prior to beginning the testing make sure that you have enough post-test evaluations and are using an Answer Sheet supported by the tele form software utilized to process Answer Sheets at CalSWEC. In addition, check that you are administering the correct version of the Answer Sheet, i.e., the version noted at the bottom of the front page of this Guide.

If you are not sure whether the test version that you have printed is current, please connect with the Regional Training Academy or University Consortium for Children and Families for which you are training.

If you have administered an old version of the Answer Sheet please make note of this on the cover sheet as a failure to do so could lead to lost testing data, as those answer sheets would have been phased out.

County and Training Site Code Information

Trainees must write their County and Training Site codes on the top of their Answer Sheets. For completion of the County and Training Site codes section of the Answer Sheet, please make sure that you supply the relevant documents to trainees. If you do not have a document with this information it should be made available from the Regional Training Academy or University Consortium for Children and Families.

Please note that evaluation instruments are subject to periodic revision. The relevant evaluation tool posted on the CalSWEC website is the most current version available. For questions regarding evaluation, contact Tenia Davis, teniad@berkeley.edu.

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[1] Berg, I.K., and De Jong, P. (1996). Solution-building conversations: co-constructing a sense of competence with clients. *Families in Society*, pp. 376-391; de Shazer, S. (1985). *Keys to solution in brief therapy.* NY: Norton; Saleebey, D. (Ed.). (1992). *The strengths perspective in social work practice.* NY: Longman.

[2] Turnell, A. (2004). Relationship grounded, safety organized child protection practice: dreamtime or real time option for child welfare? *Protecting Children, 19*(2): 14-25; Turnell, A., & Edwards, S. (1999). *Signs of Safety: A safety and solution oriented approach to child protection casework.* NY: WW Norton; Parker, S. (2010). *Family Safety Circles: Identifying people for their safety network.* Perth, Australia: Aspirations Consultancy.

[3] Children's Research Center. (2008). Structured Decision Making: An evidence-based practice approach to human services. Madison: Author.

[4] Weld, N. (2008). The three houses tool: building safety and positive change. In M. Calder (Ed.) Contemporary risk assessment in safeguarding children. Lyme Regis: Russell House Publishing.

[5] Lohrbach, S. (2008). Group supervision in child protection practice. *Social Work Now*, 40, pp. 19-24.

[6] Cooperrider, D. L. (1990). Positive image, positive action: The affirmative basis of organizing. In S. Srivasta, D.L. Cooperrider and Associates (Eds.). *Appreciative management and leadership: The power of positive thought and action in organization*. San Francisco: Jossey-Bass.

[7] Miller, W.R., & Rollnick, S. (2012). *Motivational Interviewing*, (3rd Ed.). NY: Guilford Press.

[8] Lohrbach, S. (1999). *Child Protection Practice Framework - Consultation and Information Sharing*. Unpublished manuscript; Lohrbach, S., & Sawyer, R. (2003). Family Group Decision Making: a process reflecting partnership based practice. *Protecting Children. 19*(2):12-15.

Agenda

Segment 1:	Welcome and Review of the Agenda	9:00–9:30 am
Segment 2:	Assessment of Skill	9:30–10:00
Break		10:00–10:10
Segment 3:	Safety Decision	10:10 – 10:55
Segment 4:	Case Opening	10:55 – 11:35
Lunch		11:35 am–12:35 pm
Segment 5:	Case Planning	12:35–1:15
Segment 6:	Reunification	1:15–1:55
Break		1:55 – 2:05
Segment 7:	Reunification/Case Closure	2:05–2:45
Segment 8:	Wrap up	2:45–3:00
Segment 9:	End of Block exam	3:00–4:00

Learning Objectives

Assessment Block 200 Level Learning Objectives

Knowledge

K1. The trainee will be able to describe a process to analyze and synthesize information from multiple sources when conducting a child welfare assessment.

K2. The trainee will be able to identify how assessment can be impacted by contributing factors of:
   a. Individual, familial, and historical trauma
   b. Caregiver substance abuse
   c. Mental health issues
   d. Intimate partner violence
   e. Poverty and deprivation

K3. The trainee will be able to identify a process for recognizing and addressing potential bias and understanding child welfare assessment from a cultural humility framework

Skill

S1. The trainee will be able to identify child maltreatment in a vignette.

S2. Using a vignette, the trainee will be able to apply SDM definitions and complete the following tools:
   a. SDM Safety Assessment Tool
   b. SDM Risk Assessment Tool
   c. SDM Family Strengths and Needs Tool

S3. Using a vignette the participant will be able to:
   a. Identify their own reactions and feelings and how to manage them
   b. Examine how feelings and reactions may impact children/families in the assessment process
   c. Identify and have conversation/process [strategy] they can have in a safe setting to address their feelings/reactions
   d. Reflect and integrate into practice via the vignette

Values

V1. The trainee will value obtaining consultation as needed to conduct an effective assessment.

V2. The trainee will value fact checking in child welfare assessment.

V3. The trainee will value being sensitive to factors that affect assessment such as:
   a. Fair, careful, and transparent use of authority
   b. Establishing productive relationships with families
   c. The possible interplay of individual, familial and historical trauma experienced by the family

V4. The trainee will value assessment as an ongoing collaborative process with families, Tribes, and their support networks/family teams.

Lesson Plan

Segment	Methodology and Learning Objectives
Segment 1 **30 min** **9:00–9:30 am** Welcome and Introductions	**Activity 1A** Introduce yourself and take a few minutes for the class to introduce themselves. Provide a brief orientation to the Child Welfare Training System in California and explain the 200 Level curriculum. Review the agenda for the day with the class. **Activity 1B** Facilitate the development of group agreements. Review the Learning Objectives for the course. Explain the logistics of the day. Introduce the class to the materials for the day. Review the Trainee's Guide, especially the worksheets they will be using for each activity. Review the MSLC standards as well as the SDM Policy and Procedures Manual. *PowerPoint slides: 1–7*
Segment 2 **30 min** **9:30–10:00 am** Assessment of Skills	**Activity 2A** Have workers complete the individual assessment of skills related to the Level 100 Assessment Block curriculum. Share the answers to the individual assessment and have workers score their own assessments. Debrief any questions about the answers to the skill assessment. **Activity 2B** Split the class into teams. Ideally teams should have a mix of students from various program areas, such as Investigations, Court, Family Reunification, Adoptions. This will ensure that at various decision making points throughout the day, students with experience from different programs can contribute to the assessment of the Polk/Hernandez family. **Activity 2C** Once the teams have been formed, explain the methodology for the training. Students should understand that each team will represent a type of worker. They will all be working on the referral and case of the same family. However, their outcomes for the family may be different based on the information they gather. Some teams will have all of the information while others may be missing certain information about cultural factors, key assessment issues, and child maltreatment. This can happen during real cases if workers are not aware of each of these key areas of assessment. Each team will also have a supervisor. The role of the supervisor will rotate throughout the day so that each person has an opportunity to practice being the supervisor. Have teams select who will be the first supervisor. The supervisor for each team will truly act as the supervisor for that unit, asking questions, being the voice of SDM, and providing guidance throughout the life of a case with the family.

Segment	Methodology and Learning Objectives
	PowerPoint slides: 8–10 *Learning Objectives: K3, V2, V3, V4*

	10:00–10:10 am **10 min** **BREAK**

Segment	Methodology and Learning Objectives
Segment 3 **45 min** **10:10 am–10:55 am** Safety Decision	**Activity 3A** Provide each team with the Referral and Initial Investigation section of the vignette that applies to their group. This will start the referral for one family. Have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Safety Assessment. Encourage teams to use the Safety Assessment Worksheet and MSLC standards to help them think through their decision making for this family. Remember to encourage the supervisors to act in a supervisor role during the completion of the assessment. **Activity 3B** Bring teams back together for discussion about the vignette. Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette. Have them share their Safety Decision; safe, safe with a plan, or unsafe. Allow teams to discuss why the differences occurred among the teams. Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. Trainers should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor. *PowerPoint slides: 11–12* *Learning Objectives: K1, K2, K3, S1, S2, S3, V1* *SDM Policy and Procedures Manual: 37–48*
Segment 4 **40 min** **10:55 – 11:35** Case Opening	**Activity 4A** Provide each team with the Further Investigation section of the vignette that applies to their group with more information about the referral for the family. Have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Risk Assessment. Encourage teams to use the Risk Assessment Worksheet and MSLC standards to help them think through their decision making for this family. Remember to encourage the supervisors to act in a supervisor role during the completion of the assessment. **Activity 4B** Bring teams back together for discussion about the vignette. Have teams share the cultural factors, key assessment issues, and child

Segment	Methodology and Learning Objectives
	maltreatment issues that were in the vignette. Have them share their Risk Level low, moderate, high, or very high. Ask teams what decision they made about promoting this to a case. Allow teams to discuss why the differences occurred among the teams. Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. Trainers should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor. *PowerPoint slides: 13–14* *Learning Objectives: K1, K2, K3, S1, S2, S3, V1* *SDM Policy and Procedures Manual: 74–82*
	11:35 am–12:35 pm **60 min** **LUNCH**
Segment 5 **40 min 12:35–1:15pm** Case Planning	**Activity 5A** Provide each team with the Case Planning section of the vignette that applies to their group with more information about the case for the family. Have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Family Strengths and Needs Assessment. Encourage teams to use the Family Strengths and Needs Assessment Worksheet and MSLC standards to help them think through their decision making for this family. Remember to encourage the supervisors to act in a supervisor role during the completion of the assessment. **Activity 5B** Bring teams back together for discussion about the vignette. Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette. Have them share their priority needs identified for the family. Allow teams to discuss why the differences occurred among the teams. Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. Trainers should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor. *PowerPoint slides: 15–16* *Learning Objectives: K1, K2, K3, S1, S2, S3, V1, V4* *SDM Policy and Procedures Manual: 95–122*
Segment 6 **40 min** **1:15–1:55 pm**	**Activity 6A** Provide each team with the 6-month review section of the vignette that applies to their group with more information about the ongoing case for the family. Have each team identify the key assessment issues, child

Segment	Methodology and Learning Objectives
Reunification	maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Reunification Reassessment. Encourage teams to use the Reassessment Worksheet and MSLC standards to help them think through their decision making for this family. Remember to encourage the supervisors to act in a supervisor role during the completion of the assessment.

Activity 6B
Bring teams back together for discussion about the vignette. Have t e a m s share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette. Have them share their final risk level for the family. What decision did they make about reunification or case closure? Allow teams to discuss why the differences occurred among the teams. Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. Trainers should also reinforce using the definitions of S D M to help minimize bias in our assessment and ask about the importance of consultation with the supervisor.
PowerPoint slides: 17–18
Learning Objectives: K1, K2, K3, S1, S2, S3, V1
SDM Policy and Procedures Manual: 150–169

	1:55pm–2:05 pm **10 min** **BREAK**
Segment 7 **40 min** **2:05–2:45 pm** Reunification and/or Case Closure	**Activity 7A** Provide each team with the 12-month review section of the vignette that applies to their group with more information about the ongoing case for the family. Have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Risk Reassessment or Reunification Reassessment. The Best Practice (Blue) and Not Culturally Responsive (Orange) groups will complete the Risk Reassessment. The Missing Key Assessment Issues (Green) and Missing Child Maltreatment Issues (Purple) group will complete the Reunification Reassessment. Encourage teams to use the Reassessment Worksheet and MSLC standards to help them think through their decision making for this family. Remember to encourage the supervisors to act in a supervisor role during the completion of the assessment. **Activity 7B** Bring teams back together for discussion about the vignette. Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette. Have them share their final risk level for the family. What decision did they make about reunification or case closure? Allow teams to discuss why the differences occurred among the teams. Trainers should highlight areas of the

Segment	Methodology and Learning Objectives
	discussion that focus on bias, key assessment, or child maltreatment identification. Trainers should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor. *PowerPoint slides: 19–20* *Learning Objectives: K1, K2, K3, S1, S2, S3, V1* *SDM Policy and Procedures Manual:* *Risk Reassessment 134–140* *Reunification Reassessment 150–169*
Segment 8 **15 minutes** **2:45–3:00** Transfer of Learning	**Activity 8A** Wrap up the day with a discussion about the final outcomes of the case. Have participants identify key cultural factors and the role of bias in cases. Help workers understand the importance of accurately identifying key assessment and child maltreatment issues. Encourage staff to focus on the importance of consultation both with their supervisor and with others. Highlight the role that SDM can play in helping to increase consistency and accuracy of our decision making. Walk participants through the activity to help them identify a transfer of learning plan for themselves. Have them work with a partner, preferably someone in their same office, who will hold them accountable to their action plan. Thank participants for their work today. Complete a Plus/Delta as a wrap-up to the training. Pluses are things that worked well about the day, things participants liked, and should continue to be done as part of the training. Deltas are things that could have made the day better, upgrades to the training. *PowerPoint slides: 21–22*
Segment 9 **60 minutes** **3:00–4:00pm** End of Block Evaluation	**End of Block Evaluation** *PowerPoint slides: 23*

Trainer Note:

During the first Safety Assessment, all scenarios end the same, safe with a plan. During the second Safety Assessment, each scenario deviates. The deviation ranges from safe with a plan, to placement in out of home care. As you debrief this activity it will become clear to the participants that the scenarios vary, and some people have more and/or different information than others. Once this becomes evident it is important that the trainer:

- Acknowledge that the outcomes are different based on the information gathered, which is why this activity is so important. It is affirmation that through a rigorous and balanced assessment that the "best practice and outcomes" can be achieved.
- Acknowledge and reaffirm that this is not the work of the people sitting at the table, but the work of another social worker in another county. The trainees should view this through the eyes of the worker who completed this assessment, and through their own lens of "best practice," Because we know that everyone in the room would ask the right questions, and gather the best information.
- Ask participants to stay with us, use only the information in the scenario, and be willing to lean into the training by reporting out on less than stellar work.

Throughout the training day reaffirm the importance of the information gathering to provide the information needed for a rigorous and balanced assessment. That without engagement, cultural humble practice, teaming, knowledge of key issues, and the information gathered outcomes for families can vary. The beauty of SDM is that it is researched based, and if we gather the appropriate information to apply to SDM, read the definitions to the end, our assessments can be balanced, and hopefully outcomes for families will be improved. In addition, our hope is that our biases are reduced.

Segment 1: Welcome and Introductions

Estimated Segment Time:	30 minutes
Trainee Content:	Agenda (Trainee's Guide, page 6)
	Learning Objectives (Trainee's Guide, page 7)
	Training Methodology (Trainee's Guide, page 8)
	Minimum Sufficient Level of Care (Trainee's Guide, page 18)
	Multicultural Guidelines (Trainee's Guide, page 19)
Materials:	Chart pad, markers, and tape (if doing group agreements)
Slides:	1–7

Description of activity
The trainer will conduct an introductory activity including a review of the agenda and introductions.

Before the activity

☐ Prepare chart pad in advance with the CC3.0 group agreements:

   o   Be Collaborative

   o   Ask lots of questions

   o   Be open to trying new things

   o   Be willing to make mistakes

   o   Confidentiality

   o   Be responsible for your own learning

   ☐ Leave space for the group to add their own group agreements or modify the established ones.

During the activity

☐ Welcome the participants to the training and introduce yourself. ☐ Spend some time on logistics related to the training site (parking, bathrooms, etc.) ☐ Remind participants that Common Core curriculum and training for new child welfare workers in California is designed to be generalizable across the state, cover basic child welfare knowledge and skills, and is important for all CWS positions with in an agency.	

	Structured Decision Making Assessment Knowledge and Skills Reinforcement Lab **200 Level Assessment Block** **California Common Core** Training Version 3.1.1	November 1, 2016
☐ Provide an overview of the Agenda for the day (Trainee's Guide, page 5).	**Overview of the Day** • **Welcome and Introductions** • **Group Agreements** • **Learning Objectives** • **Individual Assessment of Skill** • **Safety Decision** • **Case Opening** • **Case Planning** • **Reunification** • **Case Closure** • **Wrap-Up** • **End of Block Evaluations**
☐ Remind participants of the Common Core 3.0 group agreements utilized in the 100 Level classroom. Go over the basic group agreements and use chart pad paper to add agreements or modify the ones provided. Offer the following brief explanations of the group agreements[9]. This activity provides a reminder for the group work social workers will do with child and family teams, so you may wish to make that connection as well. ○ **Collaboration;** We need partnership to have engagement and that works best if we trust each other and agree we are not here to blame or shame. We are here because we share a common concern for the safety and well-being of children. Remind them how this skill will be needed when working with families as they are the experts on their family. Social workers must be able to foster collaboration in order to complete a thorough assessment of the situation. Families need to feel trust before they honestly examine themselves and be able to look at a problem and their part in it. ○ **Ask lots of questions;** Point out that the trainer can't make the training relevant for each person because there are many people in the room with different experiences and different needs. Participants have to make it relevant for themselves by asking lots of questions and deciding how the experience might be helpful or not helpful to them. ○ **Be Open to Trying New Things;** As professional we feel more comfortable and competent sticking with what we know. We don't always like it when new things come along. Sometimes it feels uncomfortable to try new things so we tend to back away from the new thing telling ourselves things like "she doesn't know what she's talking about…she has never worked in our community with the	**Group Agreements**

[9] Shared by trainer Betty Hanna

people we work with…" But to learn something new we have to do through the uncomfortable stage to get to the other side where it feels natural and comfortable. With this group agreement, they are agreeing to try new things even if they feel uncomfortable. o **Make Mistakes;** As professionals we don't like to make mistakes. And when we make mistakes we feel discouraged and beat ourselves up. But, if we are going to learn new things, we have to make mistakes. Even more important than the willingness to make mistakes is the willingness to admit we are wrong even when we don't want to be. Growth requires that we are open to changing our minds based on new information received. We must also be willing to put our own ideas aside to fully hear the views of others. o **Confidentiality;** This is just a reminder that information about families or other trainees shared in the training room should be kept confidential. o **Be responsible for your own learning;** As adult learners we realize you come with knowledge, skills and experience. The intention of this curriculum is that you will have an opportunity to share this via large and small group discussions. Please come prepared to training having taken any prerequisite eLearning or classroom trainings. Set aside this day for your learning, please do not bring work into the classroom, this is distracting to other participants as well as to the trainer/facilitator. This includes being on time, sharing the floor, cell phones off…	
☐ Have the participants review the Learning Objectives for the course (Trainee's Guide, page 6). o Make the connection between the agenda, learning objectives and supporting materials, emphasizing the importance consulting with your supervisor, utilizing available tool, teaming (internally and externally), of conducting a rigorous balances assessment with the family, utilizing the knowledge, skills and experience gained in child welfare practice specifically regarding critical thinking, SDM Assessments, Child Maltreatment Identification, and Assessing for Key Child Welfare issues	

- ☐ Explain, in detail, the training methodology for the day (Trainee's Guide, page 7) for the day:
  - o Participants will be working with the Polk/Hernandez vignette.
  - o Once they have completed the individual assessment of skill, they will be placed into teams. The teams will select a person to act as the "VOICE of SDM". This role will rotate throughout the day.
  - o Highlight for the participants that:
    - ▪ Each team will receive information about the Polk/Hernandez family. Although the generics of the scenario are the same, each team will have different details. Some teams will have all the information about the family, whereas others may be missing cultural factors, child maltreatment issues, and key assessment issues.
    - ▪ It is intentional that each team have different outcomes for the family based on the information provided in their vignette. Tell participants not to worry about the differing outcomes, that is the point and will become apparent in the closing of the day.
  - o Participants will analyze the factors in each case. The "VOICE of SDM" ask additional questions, and provide guidance to the team utilizing the appropriate SDM Worksheet provided for each segment.
  - o Participants will complete each of the SDM tools based on the decision at hand in the scenario. After completing the SDM tools, the teams will share their outcomes in a facilitated large group discussion with one another and talk about the discrepancies in the decision making.
  - o The goal will be to highlight the importance of conducting a rigorous, balanced assessment with the family and identifying the impact of bias and understanding how key assessment and child maltreatment are critical to a full assessment of a family.
- ☐ Introduce the class to the materials for the day.
  - o Review the MSLC standards (Trainee's Guide, page 17).
  - o Review the Multicultural Guidelines (Trainee's Guide, page 18).
  - o Review the SDM Policy and Procedures Manual (1 per table to share.

Training Methodology for the Day
- The Vignette: Polk/Hernandez Family
- You will be put into teams. Team members will rotate the role of the supervisor.
- Each team will receive information throughout the day about the Polk/Hernandez family.
- You will identify the key assessment issues, child maltreatment issues, and cultural factors for this family and use those to make decisions about safety, risk, and case planning.

Transition to the next segment

- ☐ Move on to the next segment, Assessment of Skill of the 100 Level Curriculum.

Segment 2: Assessment of Skills

Segment Time:	30 minutes
Materials:	Individual Assessment Answer Key (Trainer's Guide, pages 38-40)
	Table vignette identification signs:
	• templates for symbols (Appendix, pages 40-44)
	• Or, if using colored paper, have a blank sheet of: blue, green, purple, orange paper to mark each table
Trainee Content:	Activity 2A: Individual Assessment of Skill (Trainee's Guide, pages 9-11)
Slides:	8–10

Description of activity
The trainer will conduct a review of the 100 Level Curriculum for the Assessment Block.

Before the activity

☐ Using the identification signs, identify each table with their assigned vignette, so that you, as the trainer know what team has what vignette. Do not let the participants know what their assignments are.

★ [star] or Blue = Best Practice

■ [square] or Green = Misidentifying Key Assessment Issues

● [circle] or Purple = Missing Child Maltreatment

♦ [diamond] or Orange = Not Culturally Responsive

During the activity

☐ Allow 10 minutes for the trainees to access the quiz on page 9-11 in the Trainee's Guide and work independently to complete it. Once participants have finished the quiz, provide them with the correct answers and have them score their own quiz. Debrief any questions about the answers to the skill assessment.	
☐ Based on the scores from the individual assessment of skills break the class up into **four** teams. Teams should have a mix of students who scored in various ranges on the assessment. Therefore, not all students who had 100% should be in the same group. Groups should be a mix of students who scored lower and higher; and ideally a mix from CWS programs. Once the teams are assigned, ask the teams to discuss any answers they got wrong with one another. The teams should reinforce the learning from the 100 level curriculum with each other. Once the teams have had time to debate, ask the teams which questions raised the most debate in the group. Trainers should be prepared to address	

any issues related to bias, as well as providing an explanation for answers based on what was taught in the 100 Level curriculum. ☐ The teams should reinforce the learning from the 100 Level Curriculum with each other. Once the teams have had time to debate, ask the teams which questions raised the most debate in the group. Trainers should be prepared to address any issues related to bias, as well as providing an explanation for answers based on what was taught in the 100 Level Curriculum. Have the groups debrief at their tables to clear up any controversies.	

☐ Once the teams have been formed, explain the methodology for the training again (Trainee's Guide, page 8).
   o Trainees should understand that each team will represent a different lens a worker may look through (mood, experience, bias) based on the information provided in the vignette. Trainees will all be working on the referral and case of the same family. However, the outcomes for the family may be different based on the information gathered or provided via the differing vignettes. Some teams will have all the information while others may be missing certain information about cultural factors, key assessment issues, and child maltreatment. This can happen during real cases if workers are not conducting balanced rigorous assessments with families
 	
   o Each team will also identify someone to act as the "Voice of SDM" The role of the "Voice for SDM" will rotate throughout the day. Have teams select who will be the first "Voice of SDM". The "Voice of SDM" for each team will utilize the SDM Policy and Procedure Manual to ask questions and provide guidance throughout the life of a case with the family. The person acting as the "Voice Of SDM" will utilizing the appropriate SDM handouts found in the participant guide to help facilitate the discussion and decision making with the team.
 	
     ▪ Note that that SDM reliability is based upon 75% agreement, not 100%. The person acting as the "Voice of SDM" is helping to guide the team to the best decision, not necessarily all team members will be in 100% agreement.
 	
☐ Provide each team with a vignette package. Do not let the participants know what their assignments are:
★ [star] or Blue package
■ [square] or Green package
● [circle] or Purple package
♦ [diamond] or Orange package
	Working a Case
	
	• Your team will begin to receive information about the Polk/Hernandez family.
	• At each step of the case, you will be asked to identify any cultural factors, key assessment issues, and child maltreatment issues in the case and complete the corresponding SDM assessment.
	• Supervisors will take on the role of asking questions, coaching, being the voice of SDM, and providing guidance on the case.

Transition to the next segment

☐ Move on to the next segment, Making a Safety Decision.

Segment 3: Safety Decision

Segment Time:	45 minutes
Materials:	Answer Key for Vignettes: Safety Assessment 　　Best Practice - ★ [star] or Blue (pages, 41-43) 　　Missing Key Assessment Issues - ■ [square] or Green 　　Missing Child Maltreatment Issues - ● [circle] or Purple 　　Not Culturally Responsive - ♦ [diamond] or Orange
Trainee Content:	SDM Policy and Procedures Manual: Safety Assessment (pages 34–54) Supplemental Handouts: Referral and Initial Investigation Sections of Vignette 　　Best Practice - ★ [star] or Blue 　　Missing Key Assessment Issues - ■ [square] or Green 　　Missing Child Maltreatment Issues ● [circle] or Purple 　　Not Culturally Responsive ♦ [diamond] or Orange Supplemental Handout: Safety Assessment tool Safety Assessment Worksheet (Activity 3A) page 12
Slides:	11–12

Description of activity
The trainer will facilitate an activity for workers to complete the Safety Assessment of SDM using a vignette.

During the activity	
☐ Hand out the vignettes to each table group. ☐ Instruct the trainees to read the Referral and Initial Investigation section of the vignette and then stop reading. ☐ Give the teams 10 approximately minutes to read. Walk around the room as they are reading to assess completion. When 80% of the trainees have completed the reading have them begin completing the SDM Safety Assessment. ☐ As they are reading ask trainees to be thinking about key assessment issues, child maltreatment issues, and cultural factors based on the information they received. ☐ Encourage teams to use the Safety Assessment Worksheet, MSLC Standards and Multicultural Guidelines to help them think through their decision making for this family. 　o Remember to encourage the "Voice of SDM" to provide consultation during the completion of the assessment. ☐ Give teams 15 minutes to complete the Safety Assessment. Remind the teams to utilize the "Voice of SDM" and direct participants to use the Safety Assessment Worksheet in the Trainee's Guide (page 12).	**Polk/Hernandez Safety Decision** • Read the beginning of the referral for the Polk/Hernandez family • Use the Safety Assessment Handouts • Complete the SDM Safety Assessment • Voice of SDM – Remember your role

- ☐ Bring teams back together for discussion about the vignette.
  - o Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette.
  - o Have them share their Safety Decision — safe, safe with a plan, or unsafe.
  - o All Teams should have come to the same decision: Safe with a Plan: 1, 2, 3, 5 and 6. If differences, allow teams to discuss why the differences occurred amongst the teams.

NOTE TO TRAINERS: Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. They should also reinforce using the definitions of SDM to help minimize bias in the assessment process and ask about the importance of consultation with the supervisor.

Questions for large group discussion (utilize Vignettes Matrix for comparing information in the vignettes):

- Who did you identify as part of the family's support network?
- Who did ICWA inquiry?
- Who received information about CWS and criminal history?
  - o Answer for trainer: Best Practice and Missing Key Issues vignettes
- What safety threats did you identify?
- Were you able to safety plan with the family? What is the safety plan?
- What are your Danger statements?
- Highlight differences in network members identified, safety threats identified, and ability to safety plan

Polk/Hernandez Safety Decision

- What were the cultural factors, child development, and child maltreatment issues identified by your team?
- What was your safety decision – safe, safe with a plan, or unsafe?
- What do you think contributed to differences in our decision-making on this case?

Transition to the next segment

☐ Move on to the next segment, Case Opening.

Segment 4: Case Opening

Segment Time:	40 minutes
Materials:	Answer Key for Vignettes: Risk Assessment
	Best Practice—★ /Blue
	Missing Key Assessment Issues—■ /Green
	Missing Child Maltreatment Issues—● /Purple
	Not Culturally Responsive—♦ /Orange
Trainee Content:	SDM Policy and Procedures Manual: Risk Assessment (pages 70–85)
	Risk Assessment Worksheet (Activity 4A) (Trainee's Guide, page 13
	Supplemental Handout: Risk Assessment tool
	Supplemental Handout: Further Investigation Section of Vignette
	Best Practice—★ /Blue
	Missing Key Assessment Issues— ■ /Green
	Missing Child Maltreatment Issues—● /Purple
	Not Culturally Responsive—♦ /Orange
Slides:	13–14

Description of activity

The trainer will facilitate an activity for workers to complete the Risk Assessment of SDM using a vignette.

During the activity	

☐ Have the teams read the next section of their vignette: Further Investigation.
☐ Give the teams 10 approximately minutes to read. Walk around the room as they are reading to assess completion. When 80% of the trainees have completed the reading have them begin completing the SDM Risk Assessment.
☐ As they are reading, have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received.
☐ Teams will then complete the SDM Risk Assessment.
 	
☐ Encourage teams to use the Risk Assessment Worksheet, MSLC Standards, and the Multicultural Guidelines to help them think through their decision making for this family.
    ○ Remember to encourage the "Voice of SDM" to provide consultation during the completion of the assessment.
 	
    Give teams 20 minutes to complete the Risk Assessment. Remind the teams to utilize the "Voice of SDM" and direct participants to
	Polk/Hernandez Case Opening Decision
	• Read the next section of the referral for the Polk/Hernandez family
	• Use the Risk Assessment worksheet
	• Complete the SDM Risk Assessment
	• Voice of SDM – Remember your role

use the Risk Assessment Worksheet in the Trainee's Guide (page 12).	
☐ Bring teams back together for discussion about the vignette. 　○ Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette. 　○ Have them share their Risk level; low moderate, high, or very high. Ask teams what decision they made about promoting this to a case. 　○ Allow teams to discuss why the differences occurred amongst the teams. NOTE TO TRAINERS: Trainers should highlight areas of the discussion that focus on bias, key assessment, or child maltreatment identification. They should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor. Questions for large group discussion (utilize Vignettes Matrix for comparing information in the vignettes): • What happened to this family as a result of our risk assessment? • Did you add any new Danger statements? • Would you need to do a Safety Assessment update? 　○ Answer: yes. The Safety Plan was not followed; therefore, changing the safety assessment from safe with a plan to unsafe and children are placed into protective custody. • What differences exist in where the children are placed? • What is the risk level for this family? • Point out that although all of the teams have the same risk level and all decided to promote to a case, we still might get very different outcomes for this family because we have missed other key areas of assessment. • Highlight to the group: if the situation changed from the initial investigation; for example, the safety plan wasn't followed then a new safety assessment needed to be completed with safety decision: Unsafe.	**Polk/Hernandez Case Opening Decision** • What were the cultural factors, key assessment issues, and child maltreatment issues identified by your team? • What was your risk level – low, moderate, high, very high? • What decision did you make about promoting this to a case? • What do you think contributed to differences in our decision-making on this case?

Transition to the next segment

Move on to the next segment, Case Planning.

Segment 5: Case Planning

Segment Time:	40 minutes

Materials	Answer Key for Vignettes: Family Strengths and Needs Assessment
	     Best Practice—★ /Blue
	     Missing Key Assessment Issues—■ /Green
	     Missing Child Maltreatment Issues—● /Purple
	     Not Culturally Responsive—♦ /Orange

Trainee Content:	SDM Policy and Procedures Manual: Family Strengths and Needs Assessment (pages 86–126)
	
	Physical and Cognitive Development Milestones (pate 127–129) of the SDM Policy and Procedure Manual
	
	Family Strengths and Needs Assessment Worksheet (Activity 5A) Trainee's Guide, page 14
	
	Supplemental Handout: Family Strengths and Needs Assessment tool
	
	Supplemental Handout: Case Planning Section of the Vignette
	     Best Practice—★ /Blue
	     Missing Key Assessment Issues—■ /Green
	     Missing Child Maltreatment Issues—● /Purple
	     Not Culturally Responsive—♦ /Orange

Slides:	15–16

Description of activity

The trainer will facilitate an activity for workers to complete the Family Strengths and Needs Assessment of SDM using a vignette.

During the activity	
☐ Have the teams read the next section of their vignette: Case Planning ☐ Give the teams 10 approximately minutes to read. Walk around the room as they are reading to assess completion. When 80% of the trainees have completed the reading have them begin completing the SDM FSNA. ☐ As they are reading, have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. ☐ Teams will then complete the SDM Family Strengths and Needs Assessment. ☐ Encourage teams to use the Family Strengths and Needs Assessment Worksheet, MSLC Standards and Multicultural Guidelines to help them think through their decision making for this family.	**Polk/Hernandez Case Planning** • Read the next section of the case for the Polk/Hernandez family • Use the Family Strengths and Needs Assessment Worksheet • Complete the SDM Family Strengths and Needs Assessment • Voice of SDM – Remember your role

o Remember to encourage the "Voice of SDM" to provide consultation during the completion of the assessment. Give teams 20 minutes to complete the FSNA. Remind the teams to utilize the "Voice of SDM" and direct participants to use the FSNA Worksheet in the Trainee's Guide (page 14).	

☐ Bring teams back together for discussion about the vignette.
  o   Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette.
  o   Have them share their priority needs identified with the family.
  o   Allow teams to discuss why the differences occurred amongst the teams.
  o   Remind teams that they were given different scenarios and it is expected that they will be coming to differing decisions based on the information provided in the vignettes.
 	
NOTE TO TRAINERS: Trainers should highlight areas of the discussion that focus on bias, key assessment issues, or child maltreatment identification. They should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor.
 	
Questions for large group discussion (utilize Vignettes Matrix for comparing information in the vignettes):
•   When was the TDM held with the family? Did the family's network participate?
  o   How might this impact;
    ▪   Teaming
    ▪   Engagement
    ▪   Case planning
    ▪   Placement
•   When facilitating the discussion for the FSNA, did anyone dig deeper and learn more about the cultural context of the family?
  o   Yes, in Best Practice and Missing CMI vignettes
•   What are the priority needs for the parents identified in the case plan?
•   What are the priority needs identified for the children in the case plan?
•   What services will the children receive?
•   What does visitation look like with each parent?
•   Please highlight that most counties in CA would open a voluntary plan with Samantha. No need to include in the FSNA for the purposes of this activity.
	Polk/Hernandez Case Planning
	
	• What were the cultural factors, key assessment issues, and child maltreatment issues identified by your team?
	• What were the priority needs identified for this family?
	• What do you think contributed to differences in our decision-making on this case?

Transition to the next segment

Move on to the next segment, Reunification.

Segment 6: Reunification

Segment Time:	40 minutes

Materials:	Answer Key for Vignettes: Reunification Reassessment
	    Best Practice—★ /Blue
	    Missing Key Assessment Issues—■ /Green
	    Missing Child Maltreatment Issues— ● /Purple Not Culturally Responsive—◆ /Orange

Trainee Content:	SDM Policy and Procedures Manual: Reunification Reassessment (pages 144–172)
	
	Reunification Reassessment Worksheet (Activity 6A) Trainee's Guide, pages 15)
	
	Supplemental Handout: Reunification Reassessment tool
	
	Supplemental Handout: 6 Month Review Section of Vignettes
	    Best Practice—★ /Blue
	    Missing Key Assessment Issues—■ /Green
	    Missing Child Maltreatment Issues—● /Purple
	    Not Culturally Responsive—◆ /Orange

Slides:	17–18

Description of activity
The trainer will facilitate an activity for workers to complete the Reunification Reassessment of SDM using a vignette.

During the activity	

☐ Have the teams read the next section of their vignette: Initial Case Plan
☐ Give the teams 10 approximately minutes to read. Walk around the room as they are reading to assess completion. When 80% of the trainees have completed the reading have them begin completing the SDM FSNA.
☐ As they are reading, have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Reunification Reassessment.
 	
☐ Encourage teams to use the Reassessment Worksheet, MSLC Standards, and Multicultural Guidelines to help them think through their decision making for this family.
    o Remember to encourage the "Voice of SDM" to provide consultation during the completion of the assessment.
 	
    o Give teams 20 minutes to complete the FSNA. Remind the teams to utilize the "Voice of SDM" and direct participants to
	Polk/Hernandez Reunification Decision
	• Read the next section of the case for the Polk/Hernandez family.
	• Use the Reunification Worksheet
	• Complete the SDM Reunification Reassessment
	• Voice of SDM – Remember your role

use the Reunification Reassessment Worksheet in the Trainee's Guide (page 15).	

☐ Bring teams back together for discussion about the vignette.
  o Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette.
  o Have them share their final risk level for the family. What decision did they make about reunification or case closure?
  o Allow teams to discuss why the differences occurred amongst the teams.
  o Remind teams that they were given different scenarios and it is expected that they will be coming to differing decisions based on the information provided in the vignettes.
 	
NOTE TO TRAINERS: Trainers should highlight areas of the discussion that focus on bias, key assessment issues, or child maltreatment identification. Trainers should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor.
 	
Questions for large group discussion (utilize Vignettes Matrix for comparing information in the vignettes):
 	
• What are the outcomes for this family? Do the children reunify?
• How is the family using their network?
• What progress have the parents made?
• What is visitation looking like?
• What was the recommendation on the reunification reassessment?
• Did anyone use any overrides? If so, how did you come to that decision?
• Highlight that an FSNA needs to be done to update the case plan.
	Polk/Hernandez Reunification Decision
	
	• What were the cultural factors, key assessment issues, and child maltreatment issues identified by your team?
	• What is the final risk level?
	• Did you decide to reunify the children?
	• What do you think contributed to differences in our decision-making on this case?

Transition to the next segment

Move on to the next segment, Reunification and Case Closure.

Segment 7: Reunification/Case Closure

Segment Time:	40 minutes

Materials:	Answer Key for Vignettes: Reunification Reassessment or Risk Reassessment for In-Home Cases
	     Best Practice—★ /Blue (Risk Reassessment)
	     Missing Key Assessment Issues—■ /Green (Reunification Reassessment)
	     Missing Child Maltreatment Issues—● /Purple (Reunification Reassessment)
	     Not Culturally Responsive—♦ /Orange (Risk Reassessment)

Trainee Content:	SDM Policy and Procedures Manual: Reunification Reassessment (pages 144–172)
	
	Reunification Reassessment Worksheet (Activity 6B) Trainee's Guide, page 16)
	
	Supplemental Handout:
	
	     Reunification Reassessment tool for: ■ /Green, and ● /Purple table groups
	
	     Risk Reassessment tool for: ★ /Blue, and ♦ /Orange table groups
	
	SDM Policy and Procedures Manual: Risk Reassessment (pages 132–143)
	
	Risk Reassessment Worksheet (Trainee's Guide, pages 16
	
	Supplemental Handout: Risk Reassessment tool
	
	Supplemental Handout: 12 Month Review Section of Vignettes
	     Best Practice—★ /Blue
	     Missing Key Assessment Issues—■ /Green
	     Missing Child Maltreatment Issues—● /Purple Not Culturally Responsive—♦ /Orange

Slides:	19–20

Description of activity

The trainer will facilitate an activity for workers to complete the Reunification or Risk Reassessment of SDM using a vignette.

During the activity

☐ Have the teams read the next section of their vignette: 6 Month Case Plan.
☐ Give the teams 10 approximately minutes to read. Walk around the room as they are reading to assess completion. When 80% of the trainees have completed the reading have them begin completing the SDM FSNA.
    o As they are reading, have each team identify the key assessment issues, child maltreatment issues, and cultural factors based on the information they received. Teams will then complete the SDM Risk Reassessment or Reunification Reassessment.
    o The Best Practice (Blue) and Not Culturally Responsive (Orange) groups will complete the Risk Reassessment.
    o The Missing Key Assessment Issues (Green) and Missing Child Maltreatment Issues (Purple) group will complete the Reunification Reassessment.
☐ Encourage teams to use the Reassessment Worksheet, MSLC Standards, and Multicultural Guidelines to help them think through their decision making for this family.
    o Remember to encourage the "Voice of SDM" to provide consultation during the completion of the assessment.
 	
Give teams 20 minutes to complete the Reunification or Risk Reassessment. Remind the teams to utilize the "Voice of SDM" and direct participants to use the Reunification/Risk Reassessment Worksheet in the Trainee's Guide (page 16).
	Polk/Hernandez Reunification/Case Closure Decision
	• Read the next section of the case for the Polk/Hernandez family.
	• Use the worksheet
	• Complete the SDM Reunification Reassessment or Risk Reassessment
	• Voice of SDM – Remember your role

☐ Bring teams back together for discussion about the vignette.
    o Have teams share the cultural factors, key assessment issues, and child maltreatment issues that were in the vignette.
    o Have them share their final risk level for the family. What decision did they make about reunification or case closure?
    o Allow teams to discuss why the differences occurred amongst the teams.
    o Remind teams that they were given different scenarios and it is expected that they will be coming to differing decisions based on the information provided in the vignettes.
 	
NOTE TO TRAINERS: Trainers should highlight areas of the discussion that focus on bias, key assessment issues, or child maltreatment identification. They should also reinforce using the definitions of SDM to help minimize bias in our assessment and ask about the importance of consultation with the supervisor.
 	
Questions for large group discussion (utilize Vignettes Matrix for comparing information in the vignettes) :
 	
• What are the outcomes for this family?
• Do the children reunify?
• Does the case get closed?
• How is the family using their network?
	Polk/Hernandez Reunification/Case Closure Decision
	• What were the cultural factors, key assessment issues, and child maltreatment issues identified by your team?
	• What is the final risk level?
	• Did you decide to reunify the children or close the case?
	• What do you think contributed to differences in our decision-making on this case?

• What progress have the parents made? • What is visitation looking like? • What was the recommendation on the reunification reassessment? • Did anyone use any overrides? If so, how did you come to that decision? • Highlight that at case closure a safety assessment needs to be completed.	
Transition to the next segment	

Move on to the next segment, wrapping up the day.

Segment 8: Wrap-up

Estimated Segment Time:	15 minutes
Trainee Content:	Your Own Assessment (Trainee's Guide, page 17)
Slides:	21–22

Description of activity

The trainer will facilitate an activity for workers to review what they have learned from the day and make a plan for how to put new skills into practice.

During the activity

- ☐ Wrap up the day with a discussion about the final outcomes of the case.
    - o Have participants identify key cultural factors and the role of bias in cases.
    - o Help workers understand the importance of accurately identifying key assessment and child maltreatment issues.
- ☐ Encourage staff to focus on the importance of consultation both with their supervisor and with others.
- ☐ Highlight the role that SDM can play in helping to increase consistency and accuracy of our decision making.

- ☐ Walk participants through the activity to help them identify a transfer of learning plan for themselves (Trainee's Guide, page 17). Have them work with a partner, preferably someone in their same office, who will hold them accountable to their action plan.

Key Issues in Assessment
- How do you feel about the outcome of our work with the Polk/Hernandez family?
- What did you notice about the role of bias and misidentifying cultural factors?
- What are some of the critical assessment and child maltreatment issues that need to be identified in our cases?
- What role can your supervisor and others play in assisting with consultation?
- How might we use SDM to better guide our decision making on cases?

Your own Assessment
- What is one thing you heard or discussed today that you already do in your practice?
- What is one thing you heard or discussed today that you would like to do more of in your practice? Write it down.
- Find a partner and identify with them one thing you will do tomorrow to begin to enhance your assessment skills.

Transition to the next segment

Move on to the next segment, End of Block Evaluation and Debrief.

Segment 9: End of Block Evaluation and Debrief

Estimated Segment Time:	60 minutes
Trainee Content:	End of Block Evaluation
Slides:	23

Description of activity
The trainer will proxy the end of block evaluation with participants.

Before the activity

Ensure that there are enough copies for all trainees of the respective materials noted below. The documents and all up-to-date evaluation materials are located on the CalSWEC website under the password protected link, "RTA Evaluation – Training Evaluation Materials for Common Core". **Contact** your *respective RTA/UCCF point person to request this information and to ensure you have the most up-to-date evaluation materials.* The materials are subject to change, so check in frequently.

During the activity

☐ **End-of-Block post-evaluation instructions FOR TRAINERS**

To complete the end-of-block post-evaluation activity you should have the following materials:
- Informed Consent Document
- Document with County and Training Site Codes
- Answer Sheet(s)
- End-of-Block Post-Evaluation Tool(s)

Hand out the Informed Consent form, County and Training Site Codes document, and Answer Sheet to Trainees.

Disclaimer: Trainees who do not wish to participate in the research study do not have to submit their test forms (electronic or paper) and there is no penalty for non-participation. To avoid disruption during the evaluation activity for those trainees who wish to participate, the end-of-block post-evaluation can be administered to non-participants as a paper-based learning activity that does not need to be submitted.

Begin Verbal Directions –
We are preparing to initiate the end-of-block post-evaluation. This evaluation is not used to assess your performance, but rather to inform our continued improvement of the curriculum. Please take a few minutes to review the Informed Consent form and to complete your Answer Sheet. If you do not have an Informed Consent form, County and Training Site Codes document, or Answer Sheet, or if you have questions, please raise your hand.

☐ **45 minutes for exam** – Taking the end-of-block evaluation provides data on how the curriculum can be improved.

When trainees have completed their Answer Sheets, provide them with the end-of-block evaluation.

Verbal Directions (Continued) –
We are now ready to begin the end-of-block evaluation. The purpose of this end-of-block post-evaluation is to help us identify areas within the curriculum that can be improved. The end-of-block evaluation is composed of 45 knowledge items which will cover content from eLearning, 100-level and today's 200-level classroom.
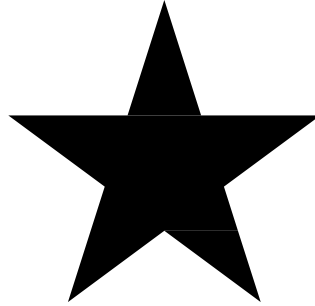
When answering a question please make sure you completely fill in the circle with heavy, dark marks. Any stray marks can affect processing. Are there any questions? If there are no (additional) questions, please begin.

NOTE TO TRAINERS: If you have trainees present who you think qualify for ESL accommodations, please be attentive to their progression throughout the evaluation activity so to provide any assistance that they may need.
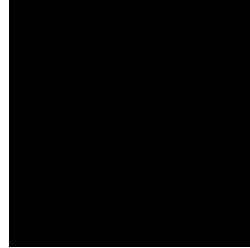
☐ **At the end of 45 minutes (or when all trainees appear to have completed the evaluation)**, walk around and collect the Answer Sheets and end-of-block post-evaluations. Check trainees' Answer Sheets to make sure that they were completed correctly.
☐ Place the Answer Sheets in the provided envelope and complete the Cover Sheet provided for submission to CalSWEC.
☐ Move on to the debrief activity.

☐ **15 minutes for debrief** - Taking an end-of-block post-evaluation is a learning opportunity. Now that trainees have completed the end-of-block evaluation the debrief activity should be initiated to provide an opportunity for trainee reflection. For the debrief activity, **please refer to the Knowledge Post-Evaluation Debrief Protocol document**, at this time.

☐ Chart responses from the debrief activity and share feedback (i.e., notes, pictures of chart pads, etc.) via our Web-Form: (https://app.smartsheet.com/b/form?EQBCT=9552be804ddd480ea8458a8f63d6a0f7). This information will be used to track themes in concerns, issues, or topics raised for future evaluation and curriculum improvement.

☐ Have trainees complete the participant satisfaction survey before leaving.
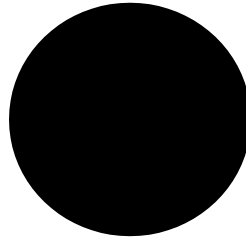
Appendix A: Vignette coding/templates

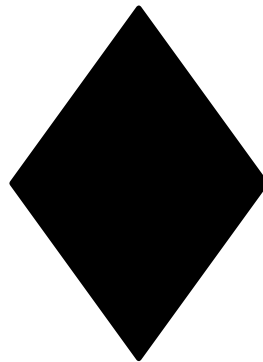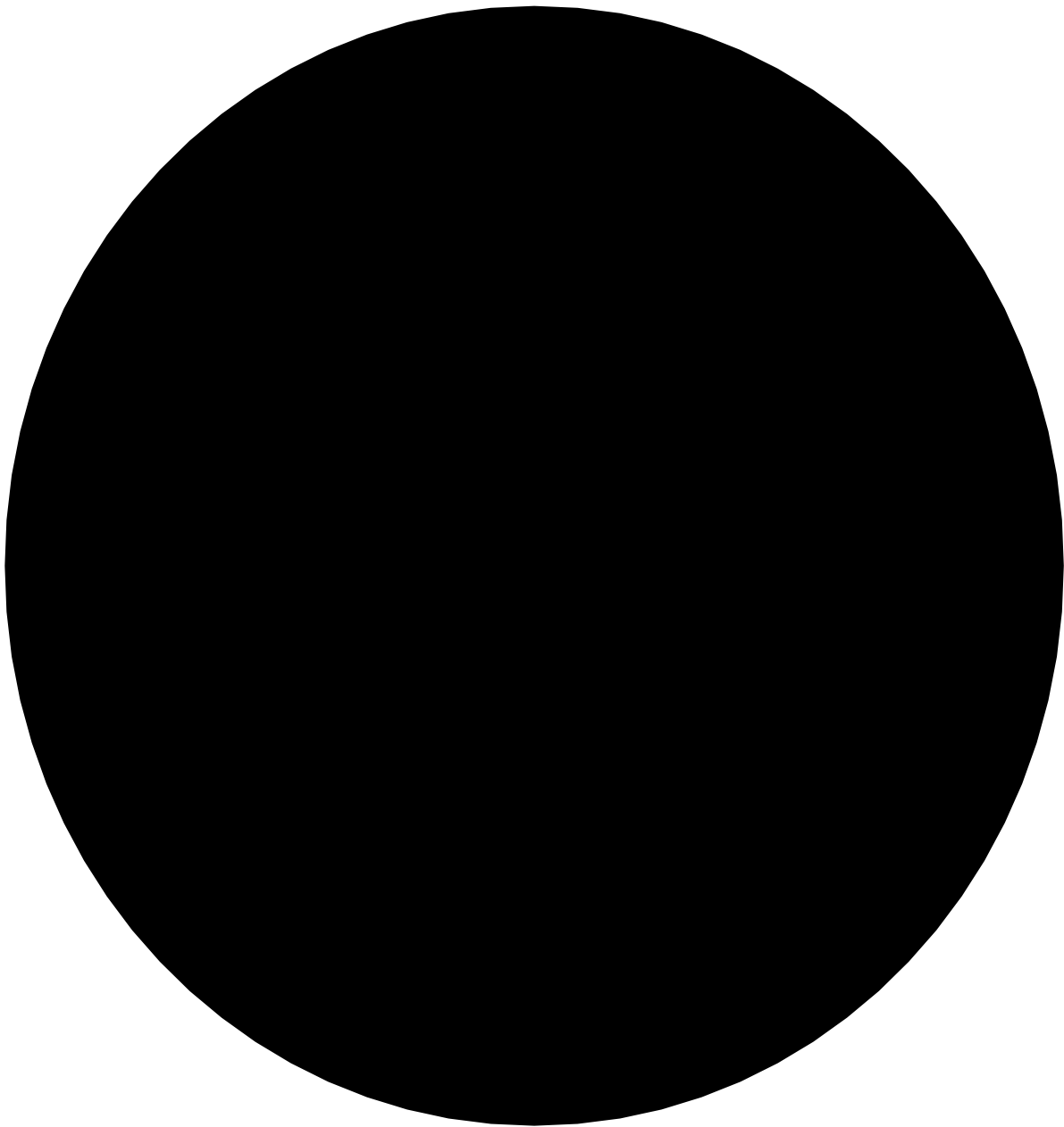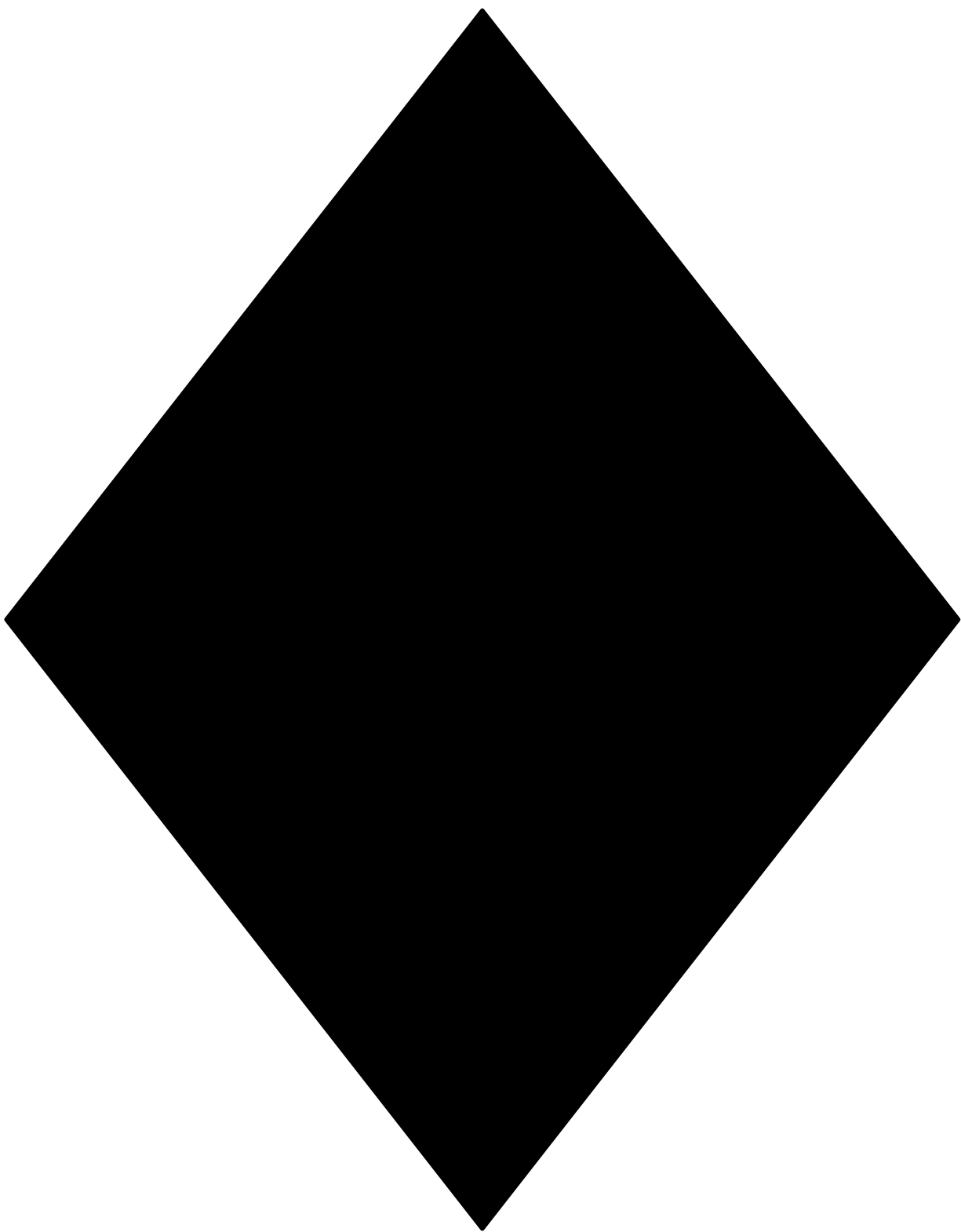|	
Best Practice Vignette	★
Misidentify Key Assessment Issues	■
Missing Child Maltreatment	●
Not Culturally Responsive	◆
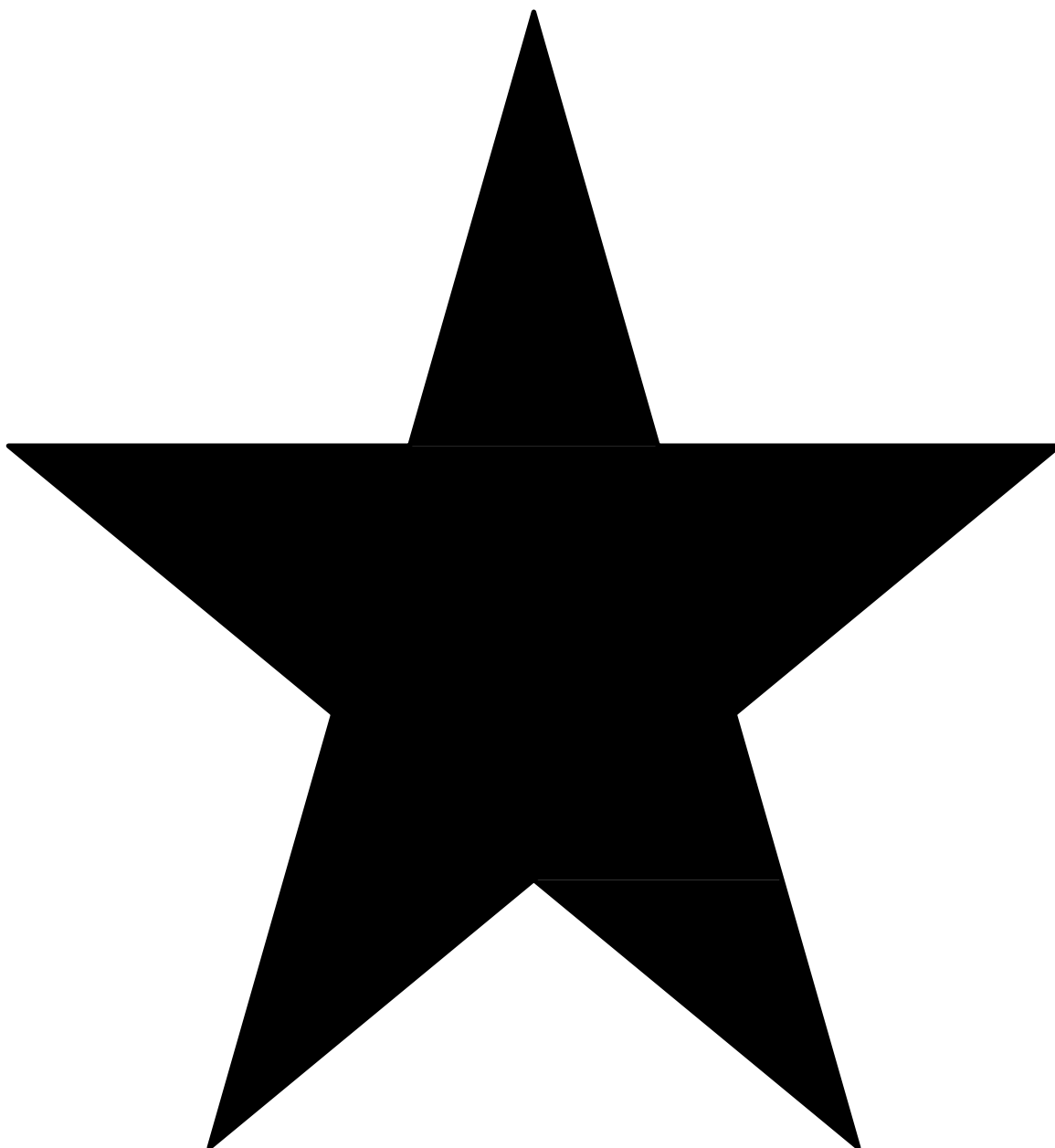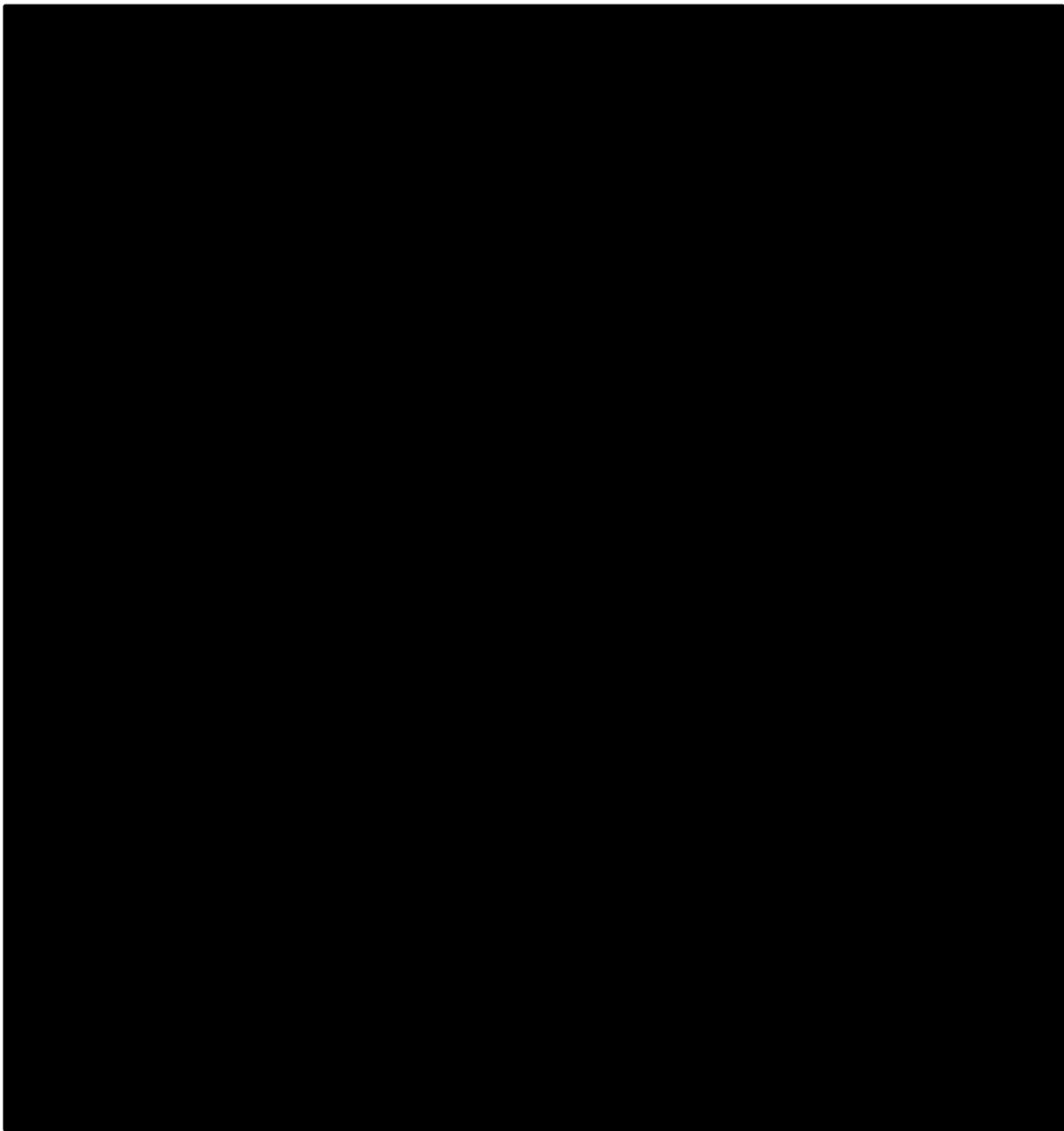
Appendix B: Vignette Matrix

	★ [star] or Blue: **Best Practice**	■ [square] or Green: **Miss Assessment of Key Issues**	● [circle] or Purple: **Miss Child Maltreatment**	♦ [diamond] or Orange: **Not Culturally Responsive**

Initial Investigation	• Checked CWS and criminal history
	• Identified network members including dance instructor, church, neighbors
	• Did ICWA inquiry
	• Did joint response with police
	• **Danger Statement** includes worry about dad's drinking, physical abuse, lack of supervision
	• **Safety goal** (developed with family, network and worker): Parents will work with their network to show everyone the dad will not drink around the children and will not hit the children for discipline. Parents will ensure safe adult is available to care for Willy and Amalia.
	• **Safety Plan**
	1. Dad will live with Leann and will not be alone with Amalia.
	2. Mom will call on safe adult(s) to watch Willy and Amalia if/when needed.
	3. Dad and Mom will tell two other people they are close to about the problems they are facing and ask them to participate in the safety plan.
	4. Aunt Leann and Pastor John will supervise visits between dad and Amalia.
	5. Pastor John is going to help the family apply for some financial assistance for daycare and dance expenses.
	6. The worker will refer the family to PG&E program to lower their gas and electric bill.
	7. Dad agrees to call his previous sponsor, start attending AA meetings.
	8. Mom agrees to attend Al-Anon meetings.
	9. SDM Safety Assessment
	10. Identify physical abuse, lack of supervision, and prior history as safety threats
	11. Identify dad's substance use as a complicating factor
	12. Safety Decision=safe with a plan
		• Checked CWS and criminal history
		• Identified network members including dance instructor, church, neighbors
		• Missed ICWA inquiry
		• Didn't do joint response with police
		• **Danger Statement** doesn't identify worries about dad's drinking and lack of supervision
		• **Safety Goal** (developed with family, network and worker): missing dad will not drink around the children and that parents will ensure safe adult is available to care for Willy and Amalia
		• **Safety plan** only around physical abuse
		  ○ Dad is out of the house
		• **SDM Safety Assessment**
		  ○ Identify physical abuse and prior history as *safety threats*
		    ■ Does not identify lack of supervision
		  ○ Does not identify dad's substance use as a *complicating factor*
		  ○ *Safety Decision*=safe with a plan
			• No CWS or criminal history check
			• Does not identify all network members
			• Did ICWA inquiry
			• **Danger Statement** doesn't identify lack of supervision
			• **Safety goal:** (developed with family, network and worker): missing dad will not drink around the children and that parents will ensure safe adult is available to care for Willy and Amalia
			• **Safety plan:** includes physical abuse and substance use
			  ○ with dad, out of the home
			• **SDM Safety Assessment**
			  ○ Identify only physical as the *safety threat*. Missing lack of supervision and prior history
			  ○ Identify dad's substance use as a *complicating factor*
			  ○ *Safety decision*=safe with a plan
				• Checked CWS and criminal history
				• Does not identify network members: aunt, from church or dance
				• Missed ICWA inquiry
				• **Danger Statement** includes worry about dad's drinking, physical abuse, lack of supervision
				• **Safety Goal:** (only developed with mom, dad and neighbor): Parents will work with their network to show everyone the dad will not drink around the children and will not hit the children for discipline. Parents will ensure safe adult is available to care for Willy and Amalia.
				• **Safety Plan:** with dad, out of the home. Missing the safety network.
				• **SDM Safety Assessment**
				  ○ Identify physical abuse, lack of supervision, and prior history as *safety threats*
				  ○ Identify dad's substance abuse as a *complicating factor*
				  ○ *Safety Decision*=safe with a plan

	★ [star] or Blue: **Best Practice**	■ [square] or Green: **Miss Assessment of Key Issues**	● [circle] or Purple: **Miss Child Maltreatment**	♦ [diamond] or Orange: **Not Culturally Responsive**

Further Investigation	• Re-injury to Amalia after parents do not follow the safety plan
	• Children detained with Pastor John
	• **SDM Risk Assessment** recommended decision:
	  o Very High Risk
	o Promote to a case
		• Amalia injured when left home with Samantha supervising
		• Mom allows dad to come over to care for Willy and Amalia one day when she doesn't have a babysitter
		• Children detained with Pastor John
		• **SDM Risk Assessment** recommended decision:
		  o Very High Risk
		o Promote to a case
			• Worker initially closes the referral
			• Amalia gets hurt again
			• Children detained with Aunt Leann
			• **SDM Risk Assessment** recommended decision:
			  o Very High Risk
			o Promote to a case
				• Mom asks dad to come over to watch the kids while she works
				• Amalia gets hit with a belt by Mr. Polk
				• Children detained in foster care
				• **SDM Risk Assessment** recommended decision:
				  o Very High Risk
				o Promote to a case

	★ [star] or Blue: Best Practice	■ [square] or Green: Miss Assessment of Key Issues	● [circle] or Purple: Miss Child Maltreatment	♦ [diamond] or Orange: Not Culturally Responsive
Case Planning	- TDM held with family and network before the Detention Hearing. - Children placed with Aunt Leann - Uncle Sal to supervise dad's visits - Dad to live with Grandma Beverly - Coach Rebecca will ask for financial assistance for dance - Mom to have unsupervised visits - Identify that Amalia has speech delays and Willy has an IEP for behavior problems **SDM FSNA:** Priority Needs: ○ Parenting Practices (both) ○ Social Supports (mom) ○ Household and Family Relationships (sad) ○ Substance use (dad)	- TDM held after Detention Hearing. - Children placed with Aunt Leann - Mom and dad both have supervised visits - Does not identify Amalia's speech delays **SDM FSNA** ○ Priority needs: parenting skills and social supports ○ Missing Household and family relationships and substance use (dad)	- TDM held - Children placed with Aunt Leann - Mom has unsupervised visits - Amalia's speech delays and Willy IEP identified as needs for the children **SDM FSNA** Priority Needs: ○ Parenting Practices ○ Social support ○ Substance abuse ○ Missing Household and family relationships	- TDM held after Detention Hearing, with limited network that included Mom, dad, Aunt Lean, G'ma Beverly and Jones foster family. - Children placed with Aunt Leann - Mom has unsupervised visits - Do not identify money stressors in the household - Identify Amalia's speech delays and Willy's IEP as needs - Dad's visits occur at the visitation center **SDM FSNA** Priority needs: ○ Substance use (dad) ○ Parenting skills (dad and mom) ○ Social Support (dad and mom) ○ Missing household and family relationships
Six-month review	- Dad has one more relapse but remains in treatment - Dad is improving some during visits with help from Uncle Sal - Mom gets overnights at 4 months **SDM Reunification Reassessment:** Return **children to mom. Mom gets to supervise visits of dad.**	- Amalia does not get assessed for speech delay - Mom had overnight visits and then goes back to unsupervised visits - Dad still struggling with Amalia **SDM Reunification Reassessment:** continue family reunification services	- Dad goes to a visit with mom and spanks Amalia - Mom goes to supervised visits - Identify Dad's drinking - Children remain with Aunt Leann **SDM Reunification Reassessment:** continue family reunification services	- Dad not relating well to Amalia - Mom had overnight visits but left Willy and Amalia home alone - Mom went back to unsupervised visits **SDM Reunification Reassessment:** continue family reunification services

	★ [star] or Blue: **Best Practice**	■ [square] or Green: **Miss Assessment of Key Issues**	● [circle] or Purple: **Miss Child Maltreatment**	♦ [diamond] or Orange: **Not Culturally Responsive**
12-month review	• Dad returns to the home at 9 months • Network continues to check in with the family **SDM Risk Reassessment:** case closed and court terminated jurisdiction	• Mom has unsupervised visits • Mom allows dad to watch the kids and Amalia gets spanked • Mom returns to supervised visits • **SDM Reunification Reassessment:** o Terminate reunification services implement permanent alternative: guardianship with Aunt Leann	• Children returned to mother at 12 months • Father remains out of home • Keep case open 6 more months in order to monitor how children are doing living with mom **SDM Reunification Reassessment:** Return children home. Mom to supervise visits of dad	• Children returned to mom at 9 months • Mom can supervise visits with dad as long as outside of home • Recommend dad come back to the home • FM Services to remain open for 6 more months **SDM Risk Reassessment:** continue services with dad back in the home.

Appendix C: Minimum Sufficient Level of Care

Definition of MSLC
The **minimum sufficient level of care** *is the social standard for the minimum of parent behavior below which a home is inadequate for the care of a child.*

Important Considerations in MSLC
- MSLC is meant <u>as a minimum, not an ideal</u>. The terms "minimum" and "sufficient" are crucial to this concept; the standard is related to the objective of keeping children safe and protected. The terms "minimum" and "sufficient" are used to explicitly differentiate from higher standards.
- MSLC is <u>case specific.</u> A variety of factors must be considered for each child, and there are no fixed criteria for assessing when a home falls below this minimum standard. This decision must be made by informed judgment that evaluates each case individually.
- The MSLC must <u>remain consistent</u> for the duration of the case. Once the MSLC is developed for a given child, it does not change throughout the life of the family's case unless the needs of the child change (e.g., child develops a high risk health condition). When a child is in placement, the decision about reunification must be based on the same MSLC baselines as when the child was removed.

Factors to consider in assessing MSLC
Although the MSLC is unique for each child, there are commonalities in nearly all situations. The factors to consider in establishing what the MSLC is for a particular child include those that relate to:
1. **The child's needs** in the areas of:
   - Physical care (e.g., safety, protection, food, clothing, shelter, medical and dental care)
   - Emotional wellbeing (e.g., attachment between child and caregivers, sense of security)
   - Development (e.g., education, special help for children with disabilities)

Appendix D: Multicultural Guidelines for Communication across Cultures[10]

Try things on	• **Try on** each other's ideas, feelings, and ways of doing things for the purpose of greater understanding. Keep what you like and let go of the rest at the end of each interaction, discussion, session.
It's OK to disagree	• **It's okay to disagree and NOT okay to blame, shame, or attack ourselves or others because** of our differences. One of the necessary ingredients for differences to be expressed and valued is that people let go of the need to be, think, or act the same.
"I" statements work!	• Begin by **talking about your own experience**. It is helpful to make "I" statements when speaking about your experience, rather than saying "you", "we," or "someone." When you intend to refer to others, be specific about them by name or group. This invites and creates space for multiple perspectives to be shared especially when they are different than yours.
Intent and impact matter	• Be aware that **your good intentions may have a negative impact**, especially across racial, gender, or other cultural differences. Be open to hearing the impact of your statement.
Think both/and	• Look for ways **to fit ideas together** and not set up an "either/or" process or a competition between ideas. Look for the existence of many truths from the perspectives of the many cultural backgrounds involved or that you are serving.
Process and Content	• **Notice both process and content** during work sessions. Content is what we say, while process is how and why we say or do something and how the group reacts. Notice who is active and who is not, who is interested and who is not, and ask about it.
Confidentiality	• **Confidentiality** with regard to personal sharing is important. Allow others to tell their own stories. Ask first to see if an individual wants to follow up on the initial conversation. Do not use any information shared negatively toward a progress report or against a supervisor.
It's OK to be uncomfortable	• **Learning from uncomfortable moments** is an important part of this process, so pay attention to your feelings.
Which of these resonates most with you?	

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[10] Adapted from Multicultural Tools created by VISIONS, Inc.; added information by Amy Cipola-Stickles

Appendix E: Answer Key - Individual Assessment of Skill

For each question, circle the answer that best fits the question or scenario given.

1. Which of the following is not one of the steps in the critical thinking process?
   a. Gather information from multiple sources
   b. <mark>Study the latest research on the issue</mark>
   c. Consult with your supervisor
   d. Examine your feelings and biases
   e. Consider alternate explanations

2. What are key factors to consider when looking at the Minimum Sufficient Level of Care?
   a. Needs may be related to danger, risk and may need to be addressed in a case plan.
   b. Harm is about the past
   c. Danger/safety threat is about the imminent threat of serious harm at this moment.
   d. Risk indicates likelihood of future maltreatment.
   e. <mark>All of the above</mark>

3. Which of the following is the definition from the WIC for physical abuse (300 A)?
   a. Serious physical harm caused by parent or guardian's failure to supervise or protect
   b. Serious, diagnosed emotional damage as a result of the conduct of the parent or guardian.
   c. A single act of abuse inflicted by a parent or any person known by the parent which could cause permanent physical disfigurement, disability, or death
   d. The child experienced acts of cruelty by the parent, guardian, or a member of the household
   e. <mark>Serious physical harm inflicted non-accidentally by a parent or guardian</mark>

4. The manifestation of failure to thrive (FTT) can be caused by? Check all that apply.
   a. <mark>Inadequate nutrition to maintain physical growth and development</mark>
   b. A mother's unwillingness to breastfeed
   c. <mark>Medical problems</mark>
   d. <mark>Environmental factors related to abuse and/or neglect.</mark>
   e. Poverty

5. Which SDM assessment informs development of the case plan?
   a. Safety Assessment
   b. Risk Assessment
   c. <mark>Family Strengths and Needs Assessment</mark>
   d. Reunification Reassessment
   e. Risk Reassessment

6. In what way(s) might parental substance use negatively impact a child? Select all that apply.
   a. Children may receive inconsistent, emotional responses and inconsistent care
   b. Children may experience considerable chaos and an unpredictable home life
   c. Children may be near or involved with dangerous living situations
   d. Children may not receive adequate medical or mental health treatment
   e. Children may experience significant benefits such as money or trips

7. Which SDM tool helps guide the decision about case opening?
   a. Safety Assessment
   b. Risk Assessment
   c. Family Strengths and Needs Assessment
   d. Reunification Reassessment
   e. Risk Reassessment

8. Which factors should be considered when assessing the impact of a parent's behavioral health issues on the child? Select all that apply.
   a. Severity of the mental health issue
   b. The parent's capacity to function
   c. Only consider the diagnosis itself, regardless of other factors
   d. Past and current treatment for the mental health issues
   e. The level of support the parent(s) has

9. Which SDM tool guides the decision about case closure?
   a. Safety Assessment
   b. Risk Assessment
   c. Family Strengths and Needs Assessment
   d. Reunification Reassessment
   e. Risk Reassessment

10. Minimum Sufficient Level of Care (MSLC) means?
    a. MSLC considers the child's physical care, emotional well-being and development.
    b. MSLC must remain consistent for the duration of the case
    c. MSLC is family specific, not more or less
    d. MSLC is not an ideal societal goal (IE: middle-class lifestyle)
    e. All of the above

11. Which SDM tool helps determine if the child can safely remain in the home?
    a. Safety Assessment
    b. Risk Assessment
    c. Family Strengths and Needs Assessment
    d. Reunification Reassessment
    e. Risk Reassessment

12. Which of the following is not one of the 5 factors of effective parenting from SDM?
    a. Demonstrates parental role
    b. ==Demonstrates ability to bring food and toys to visits==
    c. Demonstrates knowledge of child's development
    d. Puts child's needs ahead of his/her own
    e. Shows empathy toward the child

13. Which SDM tool helps determine if the child can be safely returned home?
    a. Safety Assessment
    b. Risk Assessment
    c. Family Strengths and Needs Assessment
    d. ==Reunification Reassessment==
    e. Risk Reassessment

14. Social workers making decisions about child maltreatment are influenced by a multitude of factors. Which is not a factor?
    a. Personal Biases
    b. Inability to consider multiple intervening factors
    c. Preconceived ideas
    d. Focus on information that is easiest to obtain
    e. ==Consultation with supervisor==

15. Which of the following may be seen as long-term effects from exposure to intimate partner violence? Select all that apply.
    a. ==Physical health problems==
    b. ==Behavioral problems in adolescence==
    c. ==Developmental delays==
    d. Increased likelihood of divorce
    e. ==Emotional difficulties into adulthood==

16. Social workers making decisions about child maltreatment are influenced by a multitude of factors. Which is not a factor?
    a. Personal Biases
    b. ==Inability to consider multiple intervening factors==
    c. Preconceived ideas
    d. Focus on information that is easiest to obtain
    e. Consultation with supervisor

17. Which of the following may be seen as long-term effects from exposure to intimate partner violence? Select all that apply.
    a. Physical health problems
    b. ==Behavioral problems in adolescence==
    c. ==Developmental delays==
    d. ==Increased likelihood of divorce==

e. Emotional difficulties into adulthood

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VISIONS, Inc. is a nonprofit training and consulting enterprise providing a variety of services that support organizations, communities, and individuals as they continue to clarify their diversity-related goals and engage in a dynamic process of multicultural development. VISIONS, Inc. was established in 1984 as a nonprofit, educational organization. Today it is a 501(c)(3) entity with offices in Roxbury, Massachusetts and Rocky Mount, North Carolina and is supported by a team of consultants around the United States and abroad. www.visions-inc.org

Materials Check List

Chart Paper
Markers
Trainee Guide
PowerPoint
SDM 3.0 Policy and Procedure Manual (5 sets/1 for each table group + 1 for the trainer)
Handouts: SDM 3.0 Tools:

- Safety Assessment **(4 sets/1 for each table group)**
- Risk Assessment **(4 sets/1 for each table group)**
- FSNA Assessment **(4 sets/1 for each table group)**
- Reunification Assessment **(4 sets/1 for each table group + 2 sets/1 for:** ■ [square] or Green = Misidentifying Key Assessment Issues; ● [circle] or Purple = Missing Child Maltreatment)
- Risk Reassessment **(2 sets/1 for:** ★ [star] or Blue = Best Practice; ♦ [diamond] or Orange = Not Culturally Responsive**)**

Table vignette assignment signs for the trainer to identify each table:

- template of each symbol OR
- If using colored paper, have a blank sheet of: blue, green, purple, orange paper

Vignettes:

Best Practice Group (★ [star] or Blue)

- Polk/Hernandez Case Vignette
- Polk/Hernandez Genogram
- Polk/Hernandez Ecomap

Missing Key Assessment Issues Group (■ [square] or Green)

- Polk/Hernandez Case Vignette
- Polk/Hernandez Genogram
- Polk/Hernandez Ecomap

Missing Child Maltreatment Issues Group (● [circle] or Purple)

- Polk/Hernandez Case Vignette
- Polk/Hernandez Genogram
- Polk/Hernandez Ecomap

Missing Cultural Factors Group (♦ [diamond] or Orange)

- Polk/Hernandez Case Vignette
- Polk/Hernandez Genogram
- Polk/Hernandez Ecomap