



Child Welfare Education and
Training Partnership

*Field Mentoring Program
For
New Family Case Worker
Training*

Indiana Department of Child Services

Participant Manual

Acknowledgments

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Course Overview

Course Description

Field Mentoring is designed to increase your leadership skills by mentoring new workers while assessing new worker skills, communicating effectively, managing time, and developing knowledge of diverse personality and learning styles. A commitment to coaching and developing others is necessary to be a Field Mentor.

Course Objectives

- Participants will be able to clearly communicate and distribute the expectations of a Field Mentor.
 - Participants will have the knowledge and understanding of the role of a mentor as it pertains to the Department of Child Services (DCS) and working with new DCS employees.
 - Participants will understand the time requirements of being a Field Mentor including but not limited to managing own workload while also assisting with the new worker's workload.
 - Participants will have increased communication skills, including active listening and the ability to provide constructive feedback.
 - Participants will have the knowledge and understanding of different learning styles as well as knowledge about how to engage and coach people with different learning styles.
 - Participants will be prepared to guide their mentees through the Transfer of Learning Module in the field.
-

Course Overview

Course Agenda **Morning:**
Defining Mentoring
Phases of Mentoring
Tips for Effective Mentoring
History of DCS Field Mentoring
Expectations of Mentors
DCS Expectation of Field Mentors
Benefits and Challenges of Mentoring
Kolb's Learning Style

Lunch

Afternoon:
Types of communication
Active Listening
Constructive Criticism/Feedback
FM Skill Assessment
Transfer of Learning
Time Management
An Ideal Mentor

**Goals for
Attending the
Training**

It will be a worthwhile training if I walk away knowing and doing...

Ground Rules

**What Could Go
Wrong**

Mentoring

Defining Mentoring

Mentoring is a formal or informal relationship, which provides guidance and support to facilitate self-discovery, growth, and learning.

Defining Coaching

Coaching is the assessment, action plan, and reinforcement which provide direction and focus to develop skills and learning. Coaching is a learning technique.

Defining Supervisor

A supervisor oversees or manages the workers and the work that is produced.

What are the differences?

Mentoring	Coaching
Focus on progress	Focus on task
Usually longer term sometimes for life	Usually short term
Intuitive feedback	Explicit Feedback
Develops capabilities	Develops Skills
Driven by mentee/learners	Driven by coach
Helps you to work it out yourself	Shows you where you went wrong

*Adapted from www.coachingnetwork.org.uk

Roles a Mentor Can Assume:

- Teacher
 - Guide
 - Counselor
 - Motivator
 - Sponsor
 - Advisor
 - Role Model
 - Referral Agent
 - Door opener
-

Phases of Mentoring

Mentor Functions

Kathy E. Kram began studying workplace mentoring in the early 1980s. In 1985 she proposed that mentoring present two distinctive mentoring behaviors to mentee: career function and psychosocial functions

Career Functions include: sponsoring their advancement, increasing positive exposure and visibility, coaching, and offering protection and challenging assignments.

Psychosocial Functions include: Promotes personal growth, build on trust, interpersonal bonds in the relationship, provide counseling, and role-modeling.

Phases of the Mentoring Relationship

Kram also identified four key phases of a mentoring relationship:

Initiation: Mentor and mentee are learning each other's personal style and work habits.

Cultivation: Mentee is learning and advancing in his or her career. Mentor is modeling and coaching positive behaviors. Mentee is recognizing potential and experiencing positive performance; resulting in loyalty and sense of well-being.

*Identified in literature as the most crucial stage; it often sets the tone for the relationship.

Separation: Mentee is becoming more independent and less reliant on mentor. Relationship is beginning to experience disconnect due to structure changes in the relationship.

Redefinition: Formal mentor relationship is complete. Mentor and mentee evolve into peer-like friendship or relationship is terminated.

Tips for Effective Mentoring

Building the Relationship

- Take the time to contact your mentee before they arrive with details of their first day (i.e. where to park, where to find you, etc.).
 - Spend time on the first day introducing them to local office management and co-workers.
 - Orientate them to the building and neighborhood.
 - Take the time to clearly explain your expectation and your style.
 - Validate the experience and knowledge the mentee brings with them.
 - Consider yourself a co-learner.
 - Take the time to identify the mentee's learning style.
-

Communicate

- Maintain confidentiality within your mentor relationship. Only discuss the mentee with your supervisor.
 - Allow your mentee time to talk and ask questions.
 - Communicate your expectations.
 - Clearly identify learning opportunities that mentee can experience.
 - Avoid over-loading mentees with information and not allowing them to process the information with you.
 - Verbalize your challenges as well as what you find works best.
 - Learn to become a verbal worker; talk through your thinking processes and tasks, so the mentor can pick up on what/how/why you are doing something.
 - Clearly communicate your work schedule and daily tasks to the mentee, so they understand what their day will look like also.
 - Offer constructive feedback. Put yourself in the mentee's shoes. How would you like to receive the feedback?
-

Tips for Effective Mentoring continued

Managing Your Time

- Multi-task. Utilize travel time to discuss procedures and cases. Allow mentees to process something they just observed.
 - Spend a little extra time explaining things to your mentee as you go. It will save time in the long run.
 - Have your mentee write down questions they have and that you did not have time to answer as they came up. Spend some time during lunch or in the car answering those questions.
 - Plan dates and times to meet, as best as you are able.
 - Allow your mentee to enter data into ICWIS while you do another small task in your office or returning phone calls. Check their work as they go.
 - Give your mentee an assignment or arrange for them to visit a service agency or court when you just need some time to yourself.
-

Leading and Encouraging

- Introduce them to individuals that will be helpful to their work in the future.
 - Supply your mentee with resources that you use, or allow them to create their own as an assignment.
 - Be a positive role model.
 - Allow them to practice their skills. You can then observe and offer feedback.
 - Encourage them to expand their network of resources and support.
-

History of DCS Field Mentoring

The DCS Field Mentor Program has been developed to help reinforce learning with practice in real life situations so that trainees completing their training program and subsequent on the job training can work alongside a designated mentor. This mentor will help prepare the individual trainee to accept a caseload upon graduation.

In 2004 DCS staff sought guidance from Eastern Kentucky University and their program. While working with their consultants, the concept of a mentoring program was introduced. Upon further consultation with the program developer, Dr. Anita Barbee of the University of Kentucky in Louisville, the DCS Field Mentor Program evolved. Many components were considered during this process:

- Review of competencies that had been established for the new worker training and their application to established social work practice.
 - Review of the Kentucky Field Mentor program and its proven success, relative to increased competencies and improved retention.
 - Input from Indiana training and field staff relative to Indiana practice, procedure and policy.
 - Development of specific anchors that could be used in Indiana to measure effective skill development and provide a feedback mechanism.
 - Region 4 was selected as a pilot region, and a 4-day training was implemented for Field Mentors.
 - After assessing the pilot experience, a Field Mentor Protocol was developed along with a one-day training to focus on mentoring skills before receiving their first mentee.
 - In the fall of 2006 the Field Mentor program was fully implemented, and all new workers have been assigned a Field Mentor since implementation.
-

Expectations of Field Mentors

According to Sunil Unny Guptan (2006), often times mentees enter a mentoring relationships with the following expectations of their mentor:

- Time/Accessible
 - Good communicator
 - Empathy and understanding
 - Protector
 - Good listener
 - Professional competency
 - Influential person
 - Knowledge and professional guidance
 - Trust and confidentiality
 - Objectivity
 - Caring and sharing
 - Pleasant and friendly
 - Patience
 - Appreciation
 - Human relations skills
 - Motivator
 - Cooperative
 - Honest and a role model
 - Trust
 - Emotional support
 - Skilled in networking
 - Understand work culture
 - Confidence
-

Expectations for Field Mentors continued

According to the Indiana Department of Child Services, the following are expectations for field mentors:

- Field Mentors will have a strong commitment to best practice, agency policies and procedures.
 - Field Mentors are experienced in child welfare services (both initial and ongoing, if possible).
 - Field Mentors have basic abilities to teach, and has a proven ability to relate well with all types of people.
 - Field Mentors are a Family Case Manager and is considered very competent in their Family Case Manager role, including ICWIS.
 - All selected Field Mentors have satisfactorily completed any training provided for Field Mentors.
 - Field Mentors will work with their mentee throughout the 12 weeks of classroom/transfer of learning/5 weeks on the job training experience either directly or by facilitating contact with other Family Case Managers.
 - Field Mentors will also be available for an additional three months after graduation for consultation in any needed areas (primarily by email and phone).
 - Field Mentors will model superior practice in the various skills identified on the Skills Assessment Scale.
 - Field Mentors will assess trainees on the skills identified on the rating sheets through observation and discuss strengths/needs relating to these skills with the trainee as appropriate. The Field Mentor will complete on comprehensive Skill Assessment Scale at the time of the mentee's graduation.
 - Field Mentors will note any skill areas that need additional assistance and will provide mentoring and guidance specifically related to those needs.
 - Field Mentors will work with the mentee's supervisor to provide additional mentoring and guidance in areas that need improvement.
 - Field Mentors will provide feedback to the trainee on identified needs and strengths on a daily basis.
-

Benefits and Challenges of Mentoring

Benefits for the Mentor:

- Opportunities to test new ideas.
 - Renewed enthusiasm for their roles as an experienced employee.
 - Challenging discussions with people who have fresh perspective and who are not already part of the organizational thinking.
 - Satisfaction from contributing to the mentee's development.
 - Improved ability to share their experience and knowledge.
 - Opportunity to develop leadership skills.
 - Opportunity to reflect upon and articulate their role.
-

Benefits for the Mentee:

- Increased skills and knowledge
 - Improved understanding of their roles in the agency.
 - Insight into the agency culture and unwritten rules or the organization.
 - A supportive environment in which successes and challenges can be evaluated.
 - Networking opportunities.
 - Development of professional confidence.
 - Recognition, satisfaction, and empowerment.
 - A powerful learning tool to help transfer classroom learning.
-

Benefits for the agency:

- Improved delivery of services through more informed and skilled staff.
 - Reduce recruitment and selection costs as a result of higher employee retention.
 - Progress towards diversity and equal opportunity in the workplace.
 - Improved communication between separate areas of the agency.
 - Successful mentee often become mentors and better people managers.
 - Support networks for employees in time of organizational change.
-

Challenges of Mentoring:

- Mentor may experience a lack of time and/or energy.
 - Mentor risks their reputation, especially if the mentee resigns.
 - Mentees often worry if the mentor is good at what they do, if they will be a good teacher/motivator, and if the mentor will keep in mind the goals.
 - Personality compatibility between mentor and mentee.
-

Types of Communication

Expressive

Expressive communication is used to convey information to another party. It is used to give others information about their behaviors, beliefs, and feelings.

Listening

Listening skills obtain information from others. You give the other person your attention, listen for understanding, and let the person know what you think they said.

Skills for Managing & Processing

Identifying information to give or receive.

Non-verbal

Process of communicating through sending and receiving wordless messages. Messages can be sent through gesture, object, and paralanguage.

Active Listening

Five Key Elements for Active Listening

1. Pay attention.

- Look at the speaker directly.
- Put aside distracting thoughts.
- “Listen” to the speaker’s body language
- Avoid being distracted by environmental factors.

2. Show that you are listening.

- Use your body language and gestures to convey your attention.
- Nod occasionally
- Note your posture and make sure it is open and inviting.
- Encourage the speaker to continue with small verbal comments like yes, and uh huh.

3. Provide Feedback

- Reflect what has been said by paraphrasing. “What I’m hearing is...”, and “Sounds like you are saying”
- Ask questions to clarify certain points. “What do you mean when you say...” “Is this what you mean?”
- Summarize the speaker’s comments periodically.

4. Defer judgment

- Allow the speaker to finish.
- Don’t interrupt with counterarguments.

5. Respond Appropriately

- Active listening is a model for respect and understanding.
- Be candid, open, and honest in your responses.
- Treat the other person as you would want to be treated.

*Adapted from <http://www.mindtools.com/CommSkill/ActiveListening.htm>.

Constructive Feedback

Defining Constructive Criticism

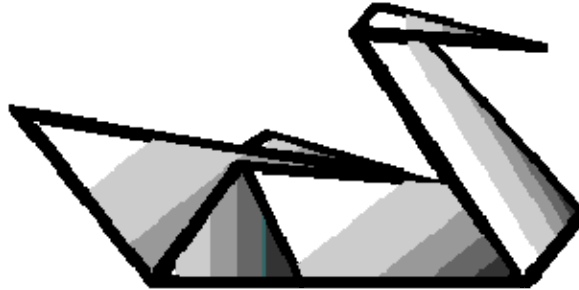
Webster's Millennium Dictionary (v.0.9.7) defines constructive criticism as "criticism or advice that is useful and intended to help or improve something, often with an offer of possible solutions"

Helpful hints to deliver constructive feedback

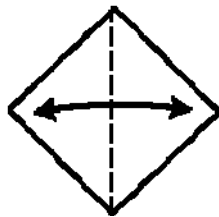
- Utilize the "sandwich technique". "Sandwich" one bad point between two good points.
 - Omit character traits
 - Use appropriate and sensitive language
 - Keep emotions in mind and in check
 - Focus on what can be done, not what isn't being done
 - See the positive as well as the negative
 - Show empathy
 - Utilize reason, not personal preference
 - Allow your mentee to respond
 - Clarity—Be clear about what you want to say.
 - Emphasize the positive
 - Be specific—Avoid general comments and clarify pronouns "it" and "they", etc.
 - Focus on the behavior rather than the person.
 - Refer to behavior that can be changed.
 - Be descriptive rather than evaluative
 - Own the feedback—use "I" statements
 - Generalization — avoid "all", "never", "always", etc.
 - Be very careful with advice—help the person better understand their issue, how it developed, and how they can actions to address the issue.
-

Constructive Feedback continued

http://art-smart.ci.manchester.ct.us/how_to/ori_swan1.html



Step 1: Make A Kite Base



FOLD, then UNFOLD

Tips:

Look at the picture; hold your paper exactly the same way.

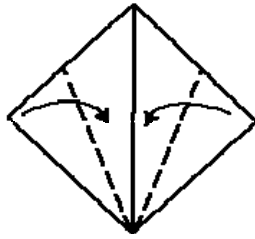
Always look for the **dashed line**...it shows where the next fold happens. Then look at the arrows...they show what movement will happen.

*An arrowhead at **BOTH** ends means FOLD and then UNFOLD.

Think about this for a minute. You are learning a new SYMBOL LANGUAGE!

Constructive Feedback continued

Step 2: Finishing the KITE BASE



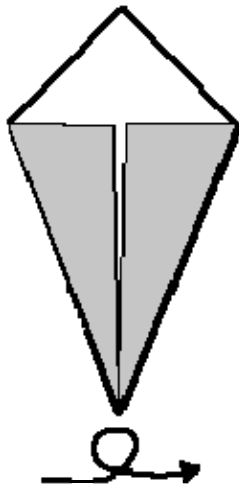
Fold lower edge to CENTER crease.

Tips:

Check the dashed lines. Where do you think they will be on the paper? What do the arrows hint at?

Look at the next picture to see what you are aiming for...

Step 3: Congrats! This is the KITE BASE!

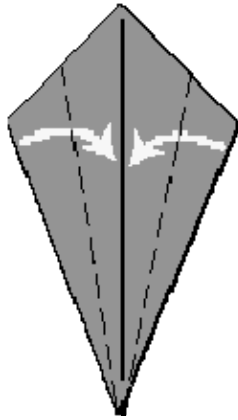


Your paper should look like this. Notice how the illustration tries to tell you that the back of the paper (which is gray) now shows. If you folded your paper really well you won't have a gap between the edges in the middle. **DON'T OVERLAP** those edges!!! (That sometimes will wreck your work by locking stuff together so it rips!) The picture sometimes shows a gap to make it easier to see what is happening.

This goofy little loop arrow means something. Look at the next picture to see if that helps you guess...

Constructive Feedback, Continued

Step 4:



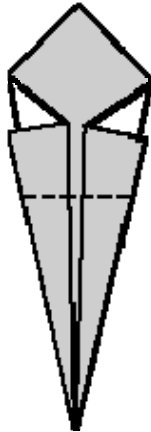
See if you understand the symbols. Fold your paper then go to the next page and see if it matches the picture!

TIPS:

Did you guess the symbol meant the TURN THE PAPER OVER?

What clues should you be looking at now? ..the dashed lines...the arrows...

Step 5:



(OOPS...I forgot the arrow telling you to fold up the bottom's point.)

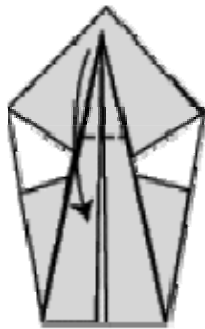
TIPS:

Notice where the dashed line is..and look at the next picture to see where the points end up.

This makes the swan's neck.

Constructive Feedback continued

Step 6:

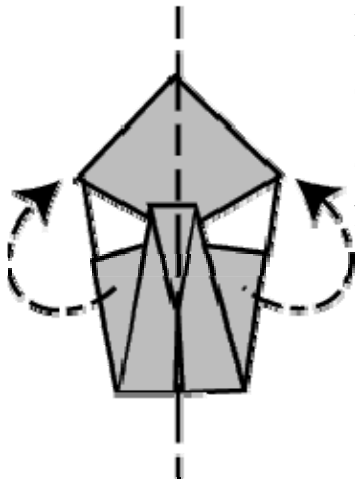


Fold down the head.

TIPS:

How big do you want the head? You can change what the bird looks like by varying the length of the neck or of the head.

Step 7:

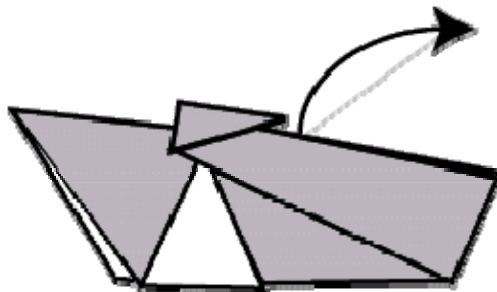


Fold the swan in half along the dashed line.

TIPS:

Think about what the arrows are trying to tell you...

Step 8:



Grab the swan by its little neck and pull the paper up until it looks right at you!

Then squeeze the paper at the base of its neck to crease it.

The last step is to pull its little swan head so it looks forward...you can figure it out so I'm not going to bother to show you a picture.

Congratulations!!!

You have done it!!

Transfer of Learning Curriculum

Cohort training is organized by modules. There are four classroom modules (Modules I-IV) and the Transfer of Learning module (Module V). The Transfer of Learning (TOL) Module activities are designed to reinforce classroom knowledge by building field skills. Field Mentors will guide their mentee through the TOL Module activities.

To help Field Mentors guide their mentees through the TOL activities a Field Mentor TOL curriculum has been developed.

How to use a curriculum package:

- Field Mentor pages are on the left with the grey band in the header. Mentee pages are on the right.
- Mentees will have a Module V participant binder with the TOL activities.

It is important to review the TOL manual with your mentee the first day you meet. There are two required activities that should be completed the first day mentees are in the local office.

Time Management Questionnaire

Score yourself on the following questions:

2 for “always”,

1 for “sometimes”,

0 for “never” and total your score at the end of the questionnaire. Be honest!

I do things in order of priority.

- I accomplish what needs to be done during the day.
 - In the past I have always gotten my work done on time.
 - I feel I use my time effectively.
 - I tackle difficult or unpleasant tasks without wasting time.
 - I force myself to make time for planning.
 - I am spending enough time planning.
 - I prepare a daily or weekly ‘to do’ list.
 - I prioritize my list in order of importance, not urgency (importance is what you want to do; urgent is what you have to do.)
 - I am able to meet deadlines without rushing at the last minute.
 - In the past, I have kept up-to-date on my reports and case notes.
 - I prevent interruptions from distracting me from high priority tasks.
 - I avoid spending too much time on trivial matters.
 - I feel I spend enough time completing paperwork.
 - I plan to relax and be with friends and family in my weekly schedule.
 - I have a weekly schedule on which I record fixed commitments, such as team meetings and trainings.
-

Time Management Questionnaire continued

- I try to do the most important tasks during my most energetic periods of the day.
 - When traveling to and from work and/or visits and waiting for court hearings, I make use my time to complete other work related materials.
 - I regularly reassess my activities in relation to my goals.
 - I have discontinued any wasteful or unprofitable activities or routines.
 - I judge myself by accomplishment of tasks rather than by amount of activity or “busyness”.
 - I decide what needs to be done and am not controlled by events or what other people want me to do.
 - I have a clear idea of what I want to accomplish during the coming 3 months.
 - I am satisfied with the way I use my time.
 - I usually arrive on time for commitments.
-

45-48 points: Congratulations! You are an excellent manager of your own time.

36-44 points: Generally you are a good time manager, but you may find some of the helpful tips, articles, and books to be a great asset to your development.

28-35 points: You are managing your time fairly well, but sometimes feel overwhelmed. It is suggested that you utilize some of the recommended readings to assist you in identifying appropriate time management tools.

23-27 points: Your role as a mentor is likely to be stressful and less than satisfying unless you take steps to begin to manage your time more effectively.

Less than 22 points: Time management continues to be a struggle for you. It is suggested that you talk with your supervisor about developing your own time management personal action plan.

Time Management in the Workplace

Methods to managing your time

List possible methods or tools you can use to manage your time:
Example: Use a calendar

7 Steps Formula for Setting and Achieving Goals

1. Decide exactly what you want.
2. Write it down!
3. Set a deadline on your goal; set sub deadlines if necessary.
4. Make a list of everything you think you will need in order to achieve the goal.
5. Organize a list into a plan. Organize your list by priority and sequence.
6. Take action on your plan immediately
7. Resolve to do something every day that will move you towards reaching your goal.

*Adapted from Brian Tracy's Eat That Frog.

Two goals you would like to establish to improve your time management capabilities

- 1.
- 2.

Ask yourself:

- *Have you been specific?
 - *Have you prioritized?
-

Finding Balance

- Admit there are never enough hours in the week to complete everything, but you will have to learn how to prioritize.
 - Learn to be a verbal worker—explain things to your mentee as you work.
 - Count all of your time to be used and make every attempt to get satisfaction out of every moment.
 - Find something to enjoy in whatever you do.
 - Try to be an optimist and seek out the good in life.
 - Find ways to build on your successes.
 - Stop regretting your failures and learn from your mistakes.
 - Remind yourself, “there is always enough time for the important things.” If it is important, you should be able to make time to do it.
 - Continually look at ways of freeing up your time.
 - Examine your old habits and search for ways to change or eliminate them.
 - Try to use waiting time.
 - Keep paper or a calendar with you to jot down the things you have to do or notes to yourself.
 - Examine and revise your long-term goals on a monthly basis, and be sure to include progress towards those goals on a daily basis.
 - Attempt to plan your day each morning and set priorities for yourself.
 - Try rewarding yourself when you get things done as you had planned, especially the important ones.
 - Do first things first.
 - Have confidence in yourself and in your judgment of priorities and stick to them no matter what.
 - When you catch yourself procrastinating, ask yourself, “What am I avoiding?”
 - Start with the most difficult parts of projects, then either the worst is done or you may find you don’t have to do all of the other small tasks.
 - Catch yourself when you are involved in unproductive projects and stop as soon as you can.
 - Find time to concentrate on high priority items or activities.
 - Concentrate on one thing at a time.
 - Push yourself and be persistent, especially when you know you are doing well.
 - Be sure and set deadlines for yourself whenever possible.
 - Delegate responsibilities whenever possible.
 - Ask for advice when needed.
- *Adapted from A. Lakein. *How to Get Control of Your Time And Your Life*.
-

Time Management Resources

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- Covey, Stephen R. (2004). *The 7 Habits of Highly Effective People*. New York, New York: Free Press.
- Davidson, Jeff. (2002). *The Complete Idiot's Guide To Managing Your Time (3rd edition)*. Indianapolis: Alpha.
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- Hoover, John (2007). *Time Management: Set Priorities to Get The Right Things Done*. Collins Business.
- Lively, Lynn. (1999). *The Procrastinator's Guide To Success*. New York, New York: McGraw-Hill.
- Silber, Lee. (1998). *Time Management For The Creative Person: Right-Brain Strategies for Stopping Procrastination, Getting Control of Your Clock and Calendar, And Freeing Up Your Time And You Life*. New York, New York: Three Rivers Press.
- Tracy, Brian . *Eat The Frog: 21 Great Ways to Stop Procrastinating and Get More Done In Less Time*. <http://www.briantracy.com>.

Effective Time Management

Let's face it. You probably don't have time to read this article ...

By David A. Casavant

In our business, time is of the essence. Everything we do is deadline-driven, and more often than we would like to admit, our workload forces us to be reactive instead of proactive. The Parkinson Principle tells us that our work will expand to fill the available hours in a day; so, if you think you'll ever get ahead of the curve by just working a little harder, guess again.

The goal of this article is not to teach you how to work harder or faster (you're probably already doing that). Instead, the goal is to teach you how to work "smarter." You will learn to focus on the most important tasks. Often, we have difficulty focusing on the activities that bring us closer to our goals. Instead, we drift into a state of "mental sleepwalking." We vigorously attack the tasks that pay the smallest dividends – meetings, e-mail, junk mail, repetitive reports, and unforeseen emergencies tend to fill our time. At the end of the day, we wonder where time actually went.

Space (and time) does not permit us to discuss all areas of time management, so following is a focus on two related time wasters: telephone interruptions and drop-in visitors.

Telephone Interruptions

Think about your typical day. How many times are you interrupted by telephone calls? Ten times? Twenty times?

Whatever the number, the telephone represents perhaps our greatest time waster. When making a call, signal to the recipient that you are busy and have limited time by saying, "Mike, I know you're real busy, so let me ask a quick question ..." or, "Susan, I'm just headed into a two o'clock meeting, but ..." You'll find these two scripts very effective in framing the call as a quick business call and not as a leisurely social call.

How many times have you been on the telephone and, try as you might, you can't find a way to tactfully end the call? Being an effective manager of time does not require you to be anti-social. It does require a measure of assertiveness, though. For instance, when fielding a telephone call from a long-winded colleague, try this: "Mike, before I let you go, let me make sure I understand

exactly what you need ..." or, "John, this problem warrants more discussion, but right now I really need to get back on this report. Can we resume this conversation over lunch?"

Drop-In Visitors

Time management gurus tell us that the average drop-in visit lasts a minimum of 10 minutes. What they don't tell you is that once the visitor leaves, you waste precious minutes regaining your focus on the task at hand. Respect your own priorities and others will, too.

If confronted with a drop-in visitor and you are indeed busy, why not say so? Similar to the telephone interruptions discussed previously, use a tactful script to avoid or reduce the interruption. For instance, "Paul, you caught me at a bad time. Can we talk about this at 2:00?" Or, perhaps, "Julie, I can give you two minutes now or 30 minutes after lunch." Again, the use of prepared scripts proves to be the most effective way to handle interruptions. Think about your favorites; study them, practice them, and soon they will come naturally.

In Conclusion

Obviously, these scripts are not exactly groundbreaking ideas; in fact, they border on common sense. Why don't we use them? Usually, we haven't prepared ahead of time for them and when we are faced with these time wasters, we don't want to sound pushy – so we allow the interruption. These few scripts represent just a sampling of how you can assertively handle

a difficult situation, such as a telephone interruption or a drop-in visitor.

Productivity is not limited to how many widgets you can produce; how many sales you can close; or, in our industry, how much property you can effectively manage. It is much more encompassing and reaches all corners of life. By incorporating just a few of these ideas, you will be well on your way to greater happiness and satisfaction.

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continued

How many times have you been on the telephone and, try as you might, you can't find a way to tactfully end the call?

Top 10 Time Management Blunders

10. Inability to handle drop-in visitors.

(Open door – “always-available” syndrome.) When you allow drop-in visitors to steal your time, you’re not respecting your busy schedule. Determine if the visit is a legitimate, job-related issue. Is it urgent or can it wait? Try these ideas: Remove the chairs from your office or use a script such as, “How much time do you need? I can give you 30 seconds now or 30 minutes after lunch.”



9. Inability to limit telephone time wasters.

The average unplanned telephone call takes 11 minutes. Most of this time is spent in needless over-socializing. Do the math. Suppose you field just six calls per day and each is 11 minutes in length. You’ll spend over an hour on the phone, with most of the time being wasted. Get to the point and finish those calls.



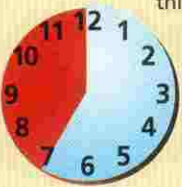
8. Too difficult/not consistent/not customized.

If your time management techniques fall into any of these categories, you’ll lose interest. This phenomenon usually occurs when we invest in electronic gadgets for the sake of having the latest tool. Be consistent. Create a “to-do” list each day, not just when you “have time.”



7. Refusal to delegate.

“Nobody can do the job as well as I can.” Probably true – but this is also the cause of many time management problems (see item No. 6). Decide what tasks are core to your job and focus on those areas. Allow your team to grow by delegating new and challenging tasks to them.



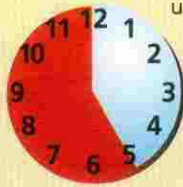
6. Perfectionism.

“Some jobs are worth doing well, while others are just worth doing.” If you give equal time to all tasks, you’re just not being effective. Save your energy and time for the tasks that pay the greatest dividends.



5. Lack of filing system/cluttered desk.

What does your desk look like? Can you find that important document quickly? If these problems affect you, make a change. Try utilizing a vertical file rack on your desk that holds the most frequently accessed documents. Try to color coordinate the files.



For example:

- Green: To read
- Red: Priority project
- Yellow: To file
- Orange: Correspondence
- Blue: Fax cover sheet

4. Inability to say ‘NO.’

Unfortunately, we’ve been conditioned to “Go the extra mile ... think outside the box.” Saying no is often viewed as a character flaw. You owe it to yourself to say “no.” When your schedule cannot absorb another project, say so. Offer to do the project if another project can be delayed. Delegate. If you find this task difficult, ask yourself: “What is the worst that can happen if I say no?”



3. Lack of priorities.

If you treat everything as a priority, then nothing will be. Same with a crisis. Try a simple priority ranking system such as “ABC 123.” “A” would be assigned to those tasks both urgent and important. “B” would be assigned to tasks you would like to complete today, but not urgent. “C” tasks would be least critical, could be deferred, or even delegated. Rank the tasks each day (using a to-do list) and concentrate on the “A” tasks first. No exceptions, unless a more urgent (and important) task comes your way.



2. Trying to do too much.

Concentrate your efforts on the tasks that are core to your job. Don’t take on too much. You’ll effectively make yourself less effective. Never schedule more than 50 percent of your time, and always over-estimate the time something will take.



The No. 1 time waster: Procrastination.

Whether we procrastinate due to fear of failure, a large project, or an unpleasant task, the results are always destructive. Realize procrastination for what it is and vigorously fight it. Always review your priorities and ask, “Is this the most important task I could be doing right now?” If not, change tasks. Consider this procrastination solution: Create a deadline to start the project.



B

Additional Resources

- DCS Field Mentor Protocol
 - Kolb's Inventory (shortened version)
 - Instruction for Skills Assessment
 - New Worker Training Schedule
 - Examples of Field Mentor Review
-



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317-232-4705
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Child Support Hotline: 800-840-8757
Child Abuse and Neglect Hotline: 800-800-5556

Field Mentor Program for New Family Case Managers
Indiana Department of Child Services
Updated July 2008

Description of Program

Effective Staff Development is a critical component to improving outcomes for children and families in Indiana. It is essential that coursework presented in the classroom be practiced in the field with appropriate guidance and supervision. It is equally as important that the process be continually evaluated and enhanced, particularly in the wake of the Indiana Practice Reform Model that has now been initiated in all 18 Regions.

The field mentor program has been developed to help reinforce learning with practice in real life situations so that trainees completing their initial nine week training program and subsequent three week on the job training can work alongside a designated mentor. This mentor will help prepare the individual trainee to accept a caseload upon graduation.

The Feedback Process

The feedback process is coordinated between the trainee, the field mentor, and the trainee's supervisor. Sheets have been developed on established criteria indicating whether the trainee has developed an "unacceptable", "average" or "superior" rating. These sheets are available for use by the Field Mentor during each Transfer of Learning Period during the initial 9 week training program as well as during the 3 week On The Job Training period. The rating system developed is called the "Skills Assessment Scales" (SAS). Prior to working with a trainee, the field mentor and supervisor will receive training on how to complete these rating sheets.

These rating sheets can be used to evaluate daily skills required, as well as reviewing other skills that are applicable to only certain situations. If the new employee does not rate as "average" consistently in specified areas, a remedial program can be developed by the trainee's supervisor in consultation with the training staff to meet the specific needs of that employee. If this process determines that trainees/employees are collectively lacking in a knowledge or skill, the classroom training curriculum will be revised as appropriate to meet the needs of the new workers.



Field Mentor Selection Process

- Person has a strong commitment to best practice, agency policies and procedures
- Person is experienced in child welfare services (both initial and ongoing if possible)
- Person has basic abilities to teach, and has a proven ability to relate well with all types of people
- Person is a Family Case Manager and is considered very competent in their Family Case Manager role, including the Indiana Child Welfare Information System (ICWIS)
- If selected, person must satisfactorily complete any training provided for Field Mentors

It is recommended that Regional Managers ask for anyone interested in this position to notify their supervisors who in turn will notify the County Directors/Regional Manager. The Regional Manager or designee will then make the selection of field mentors in every county based on the number of trainees who will become new workers in that county with each Cohort as well as the selection criteria outlined above. The Regional Manager or designee will provide this list of field mentors to the Staff Development Field Mentor Coordinator matching a field mentor to a trainee one week prior to the first Transfer of Learning Day (TOL) for the trainee. These designated field mentors will then complete training just prior to the trainee's first Transfer of Learning Day.

Goals and Expectations for DCS Field Mentors

Goals

- Teach new workers best practice in the field, in addition to the theory in the classroom
- Workers increase their confidence level in doing casework in the county where they will be working
- Increased productivity because of workers' ability to focus and prioritize
- Reduced turnover because of workers' better understanding of their Family Case Manager role and what to expect
- Benefit from observing the experienced Field Mentor's experience in coping with difficult situations
- Better outcomes for families because of workers' focus and skills

Expectations In Addition To The Qualifications Listed In The Selection Process

- Field mentor will work with trainee throughout the 12 weeks of classroom/transfer of learning/3 weeks on the job training experience either directly or by facilitating contact with other Family Case Managers
- Field mentor will also be available for an additional three months after graduation for consultation in any needed areas (primarily by email and phone)
- Field Mentor will model superior practice in the various skills identified on the rating sheets
- Field Mentor will assess trainees on the skills identified on the rating sheets through observation and discuss strengths/needs relating to these skills with the trainee as appropriate; the Field Mentor will complete one comprehensive Skill Assessment Scale

at the time of the trainee's Graduation. Scales used to provide feedback prior to that time need only address those skills observed/mentored during the specific review period. Additionally, the Trainee's Supervisor should complete a Final Skill Assessment scale three months following graduation based on the skills displayed by the new Family Case Manager during that time period

- The Field Mentor will note any skill areas that need additional assistance and will provide mentoring and guidance specifically related to those needs
- The Field Mentor will work with the Trainee's supervisor to provide additional mentoring and guidance in areas that need improvement
- Each Field Mentor will mentor one trainee at a time (may be modified in some counties based on needs and resources)
- The Field Mentor will provide feedback to the trainee on identified needs and strengths on a daily basis
- The Field Mentor will provide the final comprehensive Skill Assessment Scale to the trainee, the trainee's Supervisor and the Staff Development Field Mentor Coordinator

Evaluation of Field Mentor

- At the end of the six month training period for new trainees (3 months classroom and On the Job Training; 3 months of consultation services), Trainee's Supervisor will complete evaluation on Field Mentor, see appropriate evaluation form.
- This evaluation can be placed in the Field Mentor's fact file for review during the Performance Appraisal process.

Feedback Regarding the Field Mentor By The Trainee

- At the end of the six month mentoring period, the Trainee will complete a Review of the Field Mentor and the Field Mentor Program and submit it to DCS Central Office. Reviews which are outstanding or reviews that indicate there have been challenges will be shared with the appropriate Regional Manager.

Goals and Expectations for DCS Trainee Supervisors

- Supervisors will review the final comprehensive Skill Assessment Scale to identify strengths of the trainee as well as any needs that are noted.
- Supervisors will work with Field Mentor to develop assistance for the Trainee in any area that is below average based on the skill assessment scales.
- If Trainee's Field Mentor is based in another County, Supervisor will coordinate closely with the Field Mentor during the 3 week On The Job Training Period in the Trainee's

- County and assign Trainee to other Family Case Managers within the County to work with and provide feedback to the Field Mentor
- Supervisor will complete an evaluation form for the Field Mentor six months after they begin working with the Trainee and will submit that form to the DCS Staff Development Field Mentor Coordinator
 - Supervisor of the New Family Case Manager will complete a comprehensive Skill Assessment Scale reviewing all scales three months after graduation and submit to Staff Development Field Mentor Coordinator to assist with improvement new worker training

Inventory of Learning Style

On the next page choose the one word in each of the two columns that best applies to you. Choose the word that describes your learning style most frequently. Choose the one that represents you best if you are learning about something that interests you; not what you want to be or what others think you ought to be.

Each word you choose will have a number that represents the word. Write the selected number in the first column. Looking at the example below, the number 4 represents affectionate, while the number 3 represents adventurous. If you are more affectionate you would write the number 4 in the blank box in the first column. Please continue until you have completed all the rows on the next page.

4 (example)	4	Affectionate	3	Adventurous
-------------	---	--------------	---	-------------



Print Your Name _____

	4	Affectionate	3	Adventurous
	1	Steady	3	Dominant
	2	Accurate	3	Competitive
	1	Peaceful	4	Emotional
	2	Systematic	4	Polished
	4	Charming	3	Decisive
	1	Loyal	3	Daring
	2	Consistent	3	Persistent
	1	Good Listener	4	Good Talker
	2	Cautious	4	Outgoing
	2	Logical	1	Gentle
	4	Life of the Party	3	Enjoy Conflict
	1	Even Tempered	3	Eager
	2	Thorough	3	Take Initiative
	1	Demonstrate Patience	4	Help People
	2	Deep Thinker	4	Optimistic
	2	Exacting	1	Attentive
	4	Jovial	3	Bold
	1	Patient	3	Restless
	2	Obliging	3	Assertive
	1	Willing	4	Trusting
	2	Precise	4	Flexible
	2	Careful	1	Considerate
	4	Companionable	3	Brave
	1	Serene	3	Inquisitive
	2	Disciplined	3	Forceful
	1	Good Natured	4	Spirited
	2	Enjoy a Good Book	4	Enjoy Conversation
	2	Predictable	1	Perfectionist

Proceed to the next page and follow the instructions

Let's boil it down to four numbers:

	Record the number of times you wrote the Number 1
	Record the number of times you wrote the Number 2
	Record the number of times you wrote the Number 3
	Record the number of times you wrote the Number 4

From column one above, which of the four numbers (1, 2, 3 or 4) was recorded by you the most times?

What does this mean?

If you recorded the number 1 most often, then you are a Type One Learner or Reflective/Imaginative

If you recorded number 2 most often, then you are a Type Two Learner or Analytic

If you recorded the number 3 most often, then you are a Type Three Learner or Common Sense

If you recorded the number 4 most often, then you are a Type Four Learner or Activist

Please read the next few pages to get a description of each type suggested by literature. This will help you understand how you learn and how you may prefer to instruct others as well!

Learning Style Preferences

All persons engage in all types of learning, most seem to favor or have a preference for a particular learning style. Once you determine your individual learning type, please review the information below:

Imaginative or Type One

Imaginative Learners learn by listening, they are interested in personal meaning. Their learning must have a reason. They need to connect what they learn with personal experience. The Type One learner also needs to connect the information they are receiving to their daily life and how it will be useful. Type One learners will stand back and observe because they like to gather as much information as possible, rather than jumping in. They want to get the big picture. They will include past experiences and other people's perspectives. When brainstorming they prefer to begin alone and then brainstorm with others in the group.

As trainers/instructors they:

- Engage learners
- Promote self-awareness
- Encourage student to be unique
- Utilize discussions
- Provide the learner with feedback

As a learner, they need:

- Brainstorming
- Demonstrations
- Mind maps
- Imagery
- Discussions
- Group Work

Strengths: Loyal, good listener, calm, collection of data

Weaknesses: low profile, possessive, slow to change

Favorite question: Why?

Analytic or Type Two

They tackle problems with rationality and logic. They are usually eager to learn; they are reflective and think their problems through before acting. Analytical learners are interested in the facts. They need the facts to broaden their understanding of concepts and processes. Type Two learners learn well in a lecture only setting. They enjoy working independently. They also enjoy analyzing data and listen to the experts in what ever subject they are studying at the time.

As trainers/instructors they:

- Want their class to know everything that they know
- Must be accurate
- Are knowledgeable of their field
- Give facts and details during lecture
- Encourage learners to use organizational and sequential thinking

As a learner they need:

- Lecture
- Graphs
- Overheads
- Timelines
- Models
- Research

Strengths: precise, diplomatic, logical

Weaknesses: Procrastinates, overly sensitive, too detail oriented, and discourages creativity

Favorite questions: What?

Common Sense or Type Three

Type three learners are primarily interested in how things work. They enjoy hands on application and experience. They work well with most experiential learning activities. Type threes are always looking for new ideas, they will look for practicality. They go straight to the point and are fast paced. They believe in doing it right and quick.

As trainers/instructors they:

- Want students to be productive
- Expect competence
- Give learners the skills that will help them in life.
- Teach through practical application
- Provide hands-on activities

As a learner they need:

- Hand-on activities
- Worksheets
- Case Studies
- Fact-based games
- Competition
- Problem Solving

Strength: confident, ambitious, direct, practical application of ideas

Weaknesses: Impatient, doesn't listen well, inflexible, and self contained

Favorite question: How?

Activist or Type Four

Type four learners go on instinct or intuition. They want to teach themselves and others. Type four learners do well with independent study. They enjoy games, role-plays and anything that makes training interesting and fun. They like to influence other people; they learn best by trial and error. Often a type four learner enjoys change. Normally they are risk-takers. They are often known for doing tasks and thinking about it later. They are open-minded and enthusiastic, they learn best by doing.

As trainers/instructors they:

- Enable self-discovery
- Want learners to think out of the box
- Are dramatic
- Energize their learners
- Attempt to create new forms

As a learner they need:

- Scenarios
- Short stories
- Action Plan
- Fun

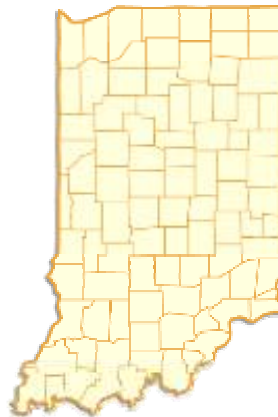
Strengths: People-oriented, flexible, loves to talk, quick reaction, and action

Weaknesses: miss details, unaware of time, lacks caution

Favorite question: if?

State of Indiana

Skill Assessment Scales For The Department of Child Services



Field Mentor Program for New Family Case Managers

Daily Behaviors

1. *Acceptance of Feedback from Trainers/FMs/Supervisor- Evaluates the way family case manager accepts feedback from authority figures and how that feedback is used to further the learning process and improve performance.*
 - (1) **Unacceptable-** Rationalizes mistakes, denies that errors were made, argues, refuses to, or does not attempt to, make corrections. Considers criticism as a personal attack.
 - (4) **Acceptable-** Accepts feedback in a positive manner and applies it to improve performance and further learning
 - (7) **Superior-** Actively solicits feedback in order to further learning and improve performance. Does not argue or blame others for errors.

2. *Attitude towards Child Welfare- Evaluates how family case manager views new career in terms of personal motivation, goals, organization, and acceptance of the responsibilities of the job.*
 - (1) **Unacceptable-** Sees career only as a job, uses job to boost ego, abuses authority, demonstrates little dedication to the principles of the profession
 - (4) **Acceptable-** Demonstrates an active interest in new career and in child welfare responsibilities, demonstrates dedication to the principles of the profession
 - (7) **Superior-** Utilizes off-duty time to further professional knowledge; actively soliciting assistance from others to increase knowledge and improve skills. Demonstrates concern for engaging in best child welfare practice, maintains the high ideals in terms of professional responsibilities and principles of the profession.

3. *Attitude toward the family served by DCS: Evaluates the family case manager's ability to engage and team with families and individuals in an appropriate and efficient manner; working in partnership with the family, involving them in problem solving, recognizing their rights and capacity to be decision makers in realizing an improved quality of life.*

- (1) **Unacceptable** - Abrupt, belligerent, overbearing, arrogant, uncommunicative. Exhibits traits of an Authoritarian: rigid, black and white thinker, racist, hierarchical, power motivated, etc. Dictates plan to the family and does not involve them in problem solving; turns them away with no services or any attempt at referral for services; does not identify any family strengths; displays a condescending attitude toward the family and their concerns; and focuses only on the presenting concern(s) without consideration of other interventions.
- (4) **Acceptable** - Courteous, friendly, empathetic, respectful, genuine and trustworthy. Communicates in a professional, unbiased manner, is service oriented. Makes eye contact with clients. Actively listens to the family while keeping a good rapport; shows respect toward them; generally engages them in problem solving; makes referrals to appropriate community partners and usually explores creative alternatives; considers other standard needs of the family beyond the presenting concern.
- (7) **Superior** - Is very much at ease with the family. Quickly establishes rapport and leaves people with feeling that the FCM was interested in helping them. Is objective in all contacts. Excellent "non-verbal" skills. Encourages the family to assume ownership of problem solving; actively listens to them and responds appropriately; approaches them with respect and honesty at all times; utilizes creativity in exploring all avenues to achieve positive outcomes with the family; exhibits masterful knowledge of available community resources to meet their needs; takes a holistic approach to the assessment of the needs of the family by focusing on their strengths; actively engages them in creating a road map for their future, based upon attainable outcomes.

4. ***Relationship with Cultural Groups other than their own - Evaluates the family case manager's ability to interact with members of groups other than own (ethnic, racial, religious, sexual orientation, social class, etc.), in an appropriate and efficient manner.***

- (1) **Unacceptable** - Is extreme in approach to different groups which could range from outright hostility to being overly sympathetic. Is prejudicial, subjective and biased. Treats members in out-group members differently than members of their own group.

- (4) **Acceptable** - Is at ease with members of other groups. Serves their needs objectively and with concern. Does not feel threatened in their presence.

- (7) **Superior** - Understands the various cultural differences and uses this understanding to competently resolve situations and problems. Is totally objective and communicates in a manner that furthers mutual understanding.

5. *Relationship with other DCS personnel and community partners: Evaluates the family case manager's ability to effectively interact with other co-workers and partners in various positions and in various capacities. Identifying the key partners, involving others in moving the family toward targeted outcomes, engaging team members as full partners.*

- (1) **Unacceptable** - Patronizes or is antagonistic to other DCS and community partners. Gossips. Is insubordinate, argumentative, and sarcastic. Considers self superior. Belittles others.
Is not a team player. Fawns on others. Does not identify key partners (including other DCS and community partners) and/or keep them connected; is reluctant to share information with other partners; and does not acclimate the family to the team approach to problem solving.
- (4) **Acceptable** - Respectful of other DCS personnel and community partners. Accepts role in the organization. Good peer relationships.
Is accepted as a group member. Generally involves the family and DCS and community partners as allies in moving toward targeted outcomes; identifies obvious partners but may fail to identify other *potential* key partners; utilizes conflict resolution methods and problem solving techniques appropriately; makes efforts to acclimate the family to the team approach toward problem solving but does not check for acceptance.
- (7) **Superior** - Is at ease in contact with all other DCS personnel and community partners, including superiors. Understands others' responsibilities. Respects and supports their position. Peer group leader. Actively assists others. Consistently embraces the family and DCS agency and community partners as allies in moving toward targeted outcomes; is highly effective in identifying key partners (including other DCS and community partners) and keeping them connected; and assures that the family is acclimated to the team approach to problems; and utilizes conflict resolution methods and problem solving techniques appropriately.

6. *Focuses on DCS outcomes more than simply programmatic issues.*

- (1) **Unacceptable** – Provides only programmatic services without regard to DCS outcomes; considers providing program services as entire purpose of job; and does not seek to understand what issues brought the client to DCS or what steps are required to achieve targeted outcomes.
- (4) **Acceptable** – Provides programmatic services and generally understands the need for a holistic approach to providing services; regularly partners with client to identify targeted outcomes and plan an approach to achieve those outcomes.
- (7) **Superior** – Understands the need for a holistic, comprehensive approach to providing services which will lead to success in achieving DCS outcomes; consistently involves others in planning and providing/referring for services; and understands long term client goals and the need for partnering.

7. *Can deal effectively with a resistant client by remaining calm, respectful but authoritative, and understanding.*

- (1) **Unacceptable** - Cannot deal effectively with a resistant client by remaining calm, respectful but authoritative, and understanding. Manner and actions tend to make resistant clients more resistant and non-resistant clients become resistant.
- (4) **Acceptable** - Can generally deal effectively with a resistant client by remaining calm, respectful but authoritative, and understanding. Manner and actions tend to make resistant clients less resistant. Actions do not inflame non-resistant clients.
- (7) **Superior** - Deals very effectively with a resistant client by remaining calm, respectful but authoritative, and understanding. Manner and actions make resistant clients cooperative. Actions do not inflame non-resistant clients.

8. ***Engagement: Establishes rapport and creates a safe dialogue environment which welcomes the client and provides genuineness, empathy, respect and professionalism. Employs open-ended questions and probing follow-up questions. Utilizes active listening skills. Welcomes family as an equal member of the team while creating a safe, empowering environment which promotes outcome based results.***

- (1) **Unacceptable** – Cannot establish rapport. Questions client only about programmatic issues; asks only closed-ended questions and rushes through communication; does not utilize active listening techniques; fails to create a safe dialogue environment; sees service to the family as just a job duty; and perpetuates the stereotype of uncaring bureaucratic government agencies. Does not show empathy or respect.
- (4) **Acceptable** – Is able to list a repertoire of tools to establish rapport and does so appropriately, given the context of the situation. Can generally establish rapport with the family. Utilizes a combination of open- and closed-end questions; allows the client(s) to fully express themselves during the interview process. Takes time during the interview to question beyond the scope of the presenting issue and to fully listen to and respond to the family’s concerns; understands and utilizes the dialogue model; generally employs active listening techniques. Sees the family as a partner in the problem solving progress; creates a safe, welcoming environment which encourages participation from the family; suspends judgments while facilitating the family through assessments. Shows empathy and respect.
- (7) **Superior** - Has a repertoire of tools to establish rapport and does so with great skill. Welcomes the client and creates a safe environment from the beginning of the interview; allows the client to fully express concerns, questions, opinions and suggestions; recognizes the family is a full partner in the problem solving progress; encourages participation from the family; takes notes in a non-distracting manner; exhibits respect and honesty; always employs active listening techniques and asks a combination of open- and closed-ended questions; asks probing follow-up questions and restates the client’s points for clarification; understands and utilizes the dialogue model; effectively utilizes “I” statements; suspends judgments while facilitating the family through assessments; takes whatever time is required to fully listen to and respond to the family’s concerns; acknowledges and encourages family’s contributions and celebrates successes with the family. Shows great empathy and respect.

9. ***Accountability: Follows up with all team members ensuring tasks are completed and child and family remain focused on outcomes. Follow through on responsibilities and communications.***
- (1) **Unacceptable** – Feels accountable only for meeting program requirement deadlines; fails to keep client and others informed of case progress and often blames others for lack of progress; does not adhere to timelines standards and acts with no sense of urgency; and makes promises that are unrealistic and offers excuses when promises cannot be kept.
 - (4) **Acceptable** – Accepts accountability for actions; is willing to accept occasional leadership roles on project teams and generally follows through on assigned tasks; attempts to keep expectations realistic; adheres to timelines standards and acts with a sense of urgency when called for; and usually keeps others informed of actions.
 - (7) **Superior** – Fully accepts accountability for actions and consistently follows through on tasks; readily accepts leadership roles on project teams; keeps others fully informed of progress; sets realistic expectations for self and others; always adheres to timelines standards and acts with a sense of urgency when called for; and accepts responsibility for completion of tasks.
10. ***Has a clear understanding and acceptance of the Adoption and Safe Families Act and permanency planning. Is aware of options available for permanency planning and understands the need to continuously have the child’s long-term permanency goals in mind. Plans accordingly. Follows policy and best practice in the selection of permanency plans.***
- (1) **Unacceptable** – Does not have a clear understanding and acceptance of ASFA and permanency planning, is unaware of all of the options available for permanency planning, and does not plan for long-term goals. Does not understand the effects of ASFA on casework. Does not follow policy or good practice in the selection of permanency plans.
 - (4) **Acceptable** – Has a clear understanding and acceptance of ASFA and permanency planning, is aware of all of the options available for permanency planning and does plan for long-term goals. Understands the effects of ASFA on casework. Generally follows policy and good practice in the selection of permanency plans.
 - (7) **Superior** – Has a clear understanding and acceptance of ASFA and permanency planning in all decisions, is aware of all of the options available for permanency planning, and consistently plans for long-term goals. Makes all decisions based on permanency goals. Thoroughly understands the effect of ASFA on casework. Always follows policy and best practices in the selection of permanency plans.

11. *Is able to identify and undertake actions the FCM can take in the field and in the office to protect themselves.*

- (1) **Unacceptable-** Does not know actions FCMs can take in the field and in the office to protect themselves. Does not use these precautions when making home visits or when meeting clients at the office. Puts themselves and others at risk of harm.
- (4) **Acceptable** -Can articulate actions FCMs can take in the field and in the office to protect themselves. Uses these precautions when making home visits or when meeting clients at the office. Rarely puts themselves and others at risk of harm.
- (7) **Superior-** Can articulate actions FCMs can take in the field and in the office to protect themselves. Diligently uses these precautions when making home visits or when meeting clients at the office. Extremely skilled in avoiding conflict and calming clients.

12. *Can identify and demonstrate understanding of appropriate health precautions.*

- (1) **Unacceptable-**Cannot articulate the proper health precautions to avoid contracting communicable diseases. Does not use these precautions when making home visits or when meeting clients at the office. Puts themselves and others at risk.
- (4) **Acceptable** -Can articulate the proper health precautions to avoid contracting communicable diseases. Uses these precautions when making home visits or when meeting clients at the office.
- (7) **Superior-** Extremely knowledgeable in the proper health precautions to avoid contracting communicable diseases. Diligently uses these precautions when making home visits or when meeting clients at the office.

INTAKE AND REFERRAL

13. *Sees the role of Intake and Referral as an educational service and part of public relations and thus, engages callers effectively in order to acquire accurate and informative data as well as to ensure that the caller is treated appropriately.*
- (1) **Unacceptable** – Does not respond politely and with helpful information to all referrals whether they are criterion based or not. Does not see the role of Intake and Referral as educational and part of public relations and thus does act accordingly.
 - (4) **Acceptable** – Does respond politely and with helpful information to all referrals whether they are criterion based or not. Does see the role of Intake and Referral as educational and part of public relations and thus does act accordingly.
 - (7) **Superior** – Is particularly skilled at taking referrals and building positive rapport with callers, especially other professionals. Does respond politely and with helpful information to all referrals whether they are criterion based or not. Does see the role of Intake and Referral as educational and part of public relations and thus does act accordingly.
14. *Assists the reporter in providing clear and concrete information and recalling important information. Asks appropriate questions during a referral thus, has appropriate interviewing skills related to the specific context of intake and gathers other appropriate information in order to make a determination.*
- (1) **Unacceptable** – Asks inappropriate questions or misses critical questions during the phone call that make it impossible to make a determination or a follow-up. Does not research history on the family in question.
 - (4) **Acceptable** – Asks appropriate questions including most critical questions during the phone call that make it possible to make a determination or follow-up visit. Does research history on the family in question and integrates that information into the determination
 - (7) **Superior** – Asks appropriate questions including all critical questions during the phone call that make it possible to make a determination or follow-up visit. Does research history on the family in question and integrate that information into the determination. The details are extensive and the information is extremely helpful to the investigating worker.

15. *Demonstrates knowledge of acceptable criteria for abuse, neglect, and dependency referral, resource linkage, and can refer cases that don't meet legal standards of maltreatment to the appropriate community partners thus has the ability to take in information and analyze it correctly to come up with the appropriate determination and thus the appropriate referral .*

- (1) **Unacceptable** – Does not know the acceptable criteria for abuse and neglect, resource linkage, and makes poor decisions about whether to investigate the case or not. Cannot refer cases that don't meet legal standards of maltreatment to the appropriate community partner.
- (4) **Acceptable** – Generally knows and uses the acceptable criteria for abuse and neglect, resource linkage, and makes accurate decisions about whether to investigate the case or not most of the time. Can refer cases that don't meet legal standards of maltreatment to the appropriate community partner.
- (7) **Superior** – Knows and always uses the acceptable criteria for abuse and neglect, resource linkage, and makes accurate decisions about whether to investigate the case or not all of the time. Can refer cases that don't meet legal standards of maltreatment to the appropriate community partner.

16. *Can document the gathered intake information in the ICWIS system (has knowledge of the appropriate forms to complete in the computer system and documents the information and decision accurately, clearly and in a timely fashion).*

- (1) **Unacceptable** – Cannot document the gathered intake information in the ICWIS system. Cannot navigate through ICWIS screens, does not enter information into the appropriate fields, misses critical fields.
- (4) **Acceptable** – Can document the gathered intake information in the ICWIS system with few errors. Can generally navigate through ICWIS screens without errors, can enter information into the appropriate fields, and rarely misses critical fields.
- (7) **Superior** – Can document the gathered intake information in the ICWIS system with no errors. Can consistently navigate through ICWIS screens without errors, can enter information into the appropriate fields, and never misses critical fields.

17. *Communicates effectively both orally and in writing with the next FCM who has the case in order to ensure a smooth transition of the case for the benefit of the clients involved.*

- (1) **Unacceptable** – Does not communicate at all orally to the next worker about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation are not clear enough for the next worker to understand the case fully in order to react appropriately to the client’s situation.
- (4) **Acceptable** – Does communicate orally to the next worker about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation are clear enough for the next worker to understand the case fully in order to react appropriately to the client’s situation.
- (7) **Superior** – Is particularly skilled at communicating orally to the next worker about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation very clear so that the next worker can understand the case fully in order to react appropriately to the client’s situation.

ASSESSMENT

18. *Demonstrates knowledge of appropriate time frames for initiation of investigation for completion of assessment.*
- (1) **Unacceptable** – Does not know or follow the required time frames for response. Does not recognize imminent danger situations. Does not consult supervisor for advice for prioritizing investigations.
 - (4) **Acceptable** – Knows and uses the required time frames for response most of the time. Can generally recognize imminent danger situations. Consults with supervisor to help prioritize investigations.
 - (7) **Superior** – Knows and uses the required criteria for response all of the time. Always recognizes imminent danger situations. Consults with supervisor to help prioritize investigations.
19. *Has appropriate interviewing skills related to the specific context of an assessment and gathers other appropriate information in order to make a determination.*
- (1) **Unacceptable** – Cannot articulate characteristics of an assessment interview, not skilled in conducting assessments or actual interviews. Is not sensitive during the interview process, does not go to all necessary sources, rarely documents all of the information gathered during an interview.
 - (4) **Acceptable** – Can articulate characteristics of an assessment interview, generally shows skill in conducting assessments and actual interviews, is somewhat sensitive during the interview process, interviews all necessary sources, documents all of the information gathered during an interview.
 - (7) **Superior** – Can articulate characteristics of an assessment interview, shows extremely high levels of skill in conducting an assessment and an actual interview, is sensitive during the interview process, interviews all necessary sources, documents all of the information gathered during an interview. Goes above and beyond the call of duty in depth of interviews and numbers of people interviewed for each case.

20. ***Knows the time, place and recommended sequence of interviewing. Can explain the rationale for a recommended sequence of interviewing.***

- (1) **Unacceptable** – Does not know the time, place, or recommended sequence of interviewing. Cannot explain the rationale for a recommended sequence of interviewing. Does not follow the recommended rules for interviewing which leaves children at risk.
- (4) **Acceptable** – Generally knows the time, place and recommended sequence of interviewing. Can explain the rationale for a recommended sequence of interviewing. Follows the recommended rules for interviewing which helps to ensure the safety of children.
- (7) **Superior** – Consistently knows the time, place, and recommended sequence of interviewing. Can explain the rationale for a recommended sequence of interviewing. Follows the recommended rules for interviewing which helps to ensure the safety of children. Is particularly good at interviewing and getting useful information.

21. ***Demonstrates knowledge of stages, tasks, and milestones of normal child development in physical, cognitive, social and emotional domains/birth through adolescence and can accurately identify dynamics and indicators of child maltreatment.***

- (1) **Unacceptable** – Can't articulate knowledge of child development. Rarely picks up on problems with child development in actual cases, rarely documents problems with child development. Can't articulate dynamics and indicators, including medical indicators of physical abuse or neglect, rarely recognizes them in actual cases and fails to document leaving children at risk. Impaired ability to make an accurate risk assessment or to determine whether abuse is substantiated or not.
- (4) **Acceptable** – Can articulate knowledge of child development, generally picks up on problems in child development in actual cases, documents those problems that they catch. Can generally articulate dynamics and indicators, including medical indicators of physical abuse or neglect, recognizes them most of the time in actual cases, and documents those that are caught in assessment. Generally able to make an accurate risk assessment and determination.
- (7) **Superior** – Can articulate knowledge of child development, quickly picks up on problems in child development in actual cases, documents in each case. Can articulate dynamics and indicators, including medical indicators of physical abuse and neglect, recognizes all of them in actual cases, and documents in the assessment. Able to make an accurate risk assessment and determination. Report gives a great deal of helpful information for the ongoing worker to use.

22. ***Demonstrates knowledge and practice of strengths-based, family-based practice including engagement, teaming, assessment, planning and intervening (in regions that have received this training)***
- (1) **Unacceptable** – Can't articulate Indiana's Practice Model principles including engagement, teaming, assessment, planning and intervening. Can't practice using the model.
 - (4) **Acceptable** – Can generally articulate Indiana's Practice Model principles including engagement, teaming, assessment, planning and intervening. Can generally practice using the model.
 - (7) **Superior** – Can articulate Indiana's Practice Model principles including engagement, teaming, assessment, planning and intervening. Can and does practice using the model.
23. ***Demonstrates knowledge of information needed from medical personnel for child maltreatment. Knows what a physician can and cannot detect. Knows how to take appropriate action when there is a discrepancy between the medical diagnosis and other evidence.***
- (1) **Unacceptable** – Can't articulate what knowledge to get for each problem, rarely gets information in cases/rarely gathers medical reports, doesn't document in own assessment, and doesn't take appropriate action when there is a Discrepancy between the medical diagnosis and other evidence.
 - (4) **Acceptable** – Can generally articulate what knowledge to get for each problem, gets information in cases/gathers medical reports, documents in own assessment, and often takes appropriate action when there is a Discrepancy between the medical diagnosis and other evidence.
 - (7) **Superior** – Can articulate what knowledge to get for each problem, gets information in cases/gathers medical reports and documents in own assessment. Even gathers extra information that would be helpful to the ongoing worker. Always takes appropriate action when there is a discrepancy between the medical diagnosis and other evidence.

DOMESTIC VIOLENCE, SUBSTANCE ABUSE AND MENTAL HEALTH

24. *Applies knowledge of domestic violence, substance abuse and mental health issues in assessments.*
- (1) **Unacceptable** – Doesn't look for evidence of domestic violence, substance abuse or mental health issues. Can't make accurate determinations in response to scenarios or in actual investigations, leaves adults and children at risk.
 - (4) **Acceptable** – Does look for evidence of domestic violence, substance abuse or mental health issues. Can generally make accurate determinations in response to scenarios and in actual investigations. Does not leave children and adults at risk
 - (7) **Superior** – Does look for evidence of domestic violence, substance abuse or mental health issues. Consistently makes accurate determinations in response to scenarios and is exceptional in the ability to make accurate determinations in actual investigations. Does not leave children and adults at risk.
25. *Can accurately identify dynamics and indicators of domestic violence (including physical, psychological, etc.), substance abuse and mental health issues*
- (1) **Unacceptable** – Can't articulate dynamics and indicators, rarely recognizes them in actual cases, and fails to document, leaving children at risk.
 - (4) **Acceptable** – Can articulate dynamics and indicators, recognizes them most of the time in actual cases, and documents those that are caught in assessment. Generally able to make an accurate risk assessment and determination that does not leave children at risk.
 - (7) **Superior** – Can articulate dynamics and indicators, pick all of them up in actual cases, and documents in the assessment. Consistently able to make an accurate risk assessment and determination that does not leave children at risk. Report gives a great deal of helpful information for the ongoing worker to use.
26. *Can identify the effects of domestic violence on the children in the home.*
- (1) **Unacceptable** – Can't articulate the effects of domestic violence on the children in the home and rarely sees the effects of domestic violence on the children in actual cases.
 - (4) **Acceptable** – Can generally articulate the effects of domestic violence on the children in the home and can see the effects of domestic violence on the children in actual cases.
 - (7) **Superior** or Rating of 7 is defined as: Can consistently articulate the effects of domestic violence on the children in the home. Can see the effects of domestic violence on the children in actual cases, and clearly integrates the domestic violence problem within the family plan.

CHILD SEXUAL ABUSE

27. *Can identify child protective services, law enforcement and multi-disciplinary team roles and implementation in a coordinated approach to intervention*

- (1) **Unacceptable** – Can't identify the different roles of CPS, law enforcement and multi-disciplinary teams in intervention in child sex abuse cases and thus does not coordinate well with police officers and other community partners during sex abuse investigations.
- (4) **Acceptable** – Can generally identify the different roles of CPS, law enforcement and multi-disciplinary teams in intervention in child sex abuse cases and generally coordinates adequately with police officers and other community partners during sex abuse investigations.
- (7) **Superior** – Can clearly identify the different roles of CPS, law enforcement and multi-disciplinary teams in intervention in child sex abuse cases and consistently coordinates well with police officers and other community partners during sex abuse investigations.

28. *Can use appropriate child sexual abuse interview protocol and techniques to conduct forensic interviews, including accurate use of interview tools.*

- (1) **Unacceptable** – Does not follow appropriate child sexual abuse interview protocol. Does not use the appropriate interview techniques in child sexual abuse investigations, potentially damaging later attempts to remove the child or prosecute the perpetrator, and does not use interview tools.
- (4) **Acceptable** – Generally follows appropriate child sexual abuse interview protocol and is able to conduct a sufficient interview, using appropriate interview techniques including accurate use of interview tools most of the time.
- (7) **Superior** – Always follows appropriate child sexual abuse interview protocol and is able to conduct an outstanding interview, consistently using interview tools specific to child sexual abuse, with great skill.

29. *Demonstrates knowledge of safety/risk factors in the assessment and why gathering this data is important. Can document findings competently in ICWIS, including:*

- interview results
- observational results
- risk assessment
- assessment for determination

- (1) **Unacceptable** – Cannot document in ICWIS using the assessment with all of the back up materials that are needed when a child is in the home or in case a child must be taken from the home. Does not know the safety factors. Does not include all details of interviews and interview results, observations and observational results, risk assessment results, including medical documentation and final assessment conclusions.
- (4) **Acceptable** – Can generally document in ICWIS using the assessment with all of the back up materials that are needed when a child stays in the home or in case a child must be taken from the home. Generally knows the safety factors but requires some assistance. Does include details of interviews and interview results, observations and observation results, risk assessment results, including medical documentation and final assessment conclusions.
- (7) **Superior** or Rating of 7 is defined as: Exceptional documentation in ICWIS using the assessment with all of the back up materials that are needed when a child stays in the home or in case a child must be taken from the home. Very competent in the use of safety factors. Does include all details of interviews and interview results, observations and observation results, risk assessment results, including, medical documentation and final assessment conclusions.

30. *Demonstrates knowledge of domestic violence safety factors in an assessment and why gathering this data is important. Can document findings competently in ICWIS*

- interview results
- observational results
- assessment for determination

- (1) **Unacceptable** – Cannot document in ICWIS using the assessment and the safety factors that relate to domestic violence effects on adult victims and children with all of the supportive documentation that is needed in case a child must be taken from the home. Does not include all details of interviews and interview results, observations and observational results, medical/criminal justice documentation and final assessment conclusions.
- (4) **Acceptable** – Can generally document in ICWIS using the assessment and the safety factors that domestic violence effects on adult victims and children with all of the backup documentation that is needed in case a child must be taken from the home. Does include details of interviews and interview results, observations and observational results, medical/criminal justice documentation and final assessment conclusions.
- (7) **Superior** – Does an excellent job of documenting in ICWIS using the assessment and the safety factors that relate to domestic violence effects on children and adult victims with all of the documentation materials that are needed in case a child must be taken from the home. Does include all details of interviews and interview results, observations and observational results, risk assessment results, medical/criminal justice documentation and final assessment conclusions.

31. *Demonstrates ability to make accurate findings.*

- (1) **Unacceptable** – Can't make accurate findings in response to scenarios or in actual investigations, leaving some children at risk.
- (4) **Acceptable** – Can generally make accurate findings in response to scenarios and in actual investigations.
- (7) **Superior** – Consistently makes accurate **findings** in response to scenarios and is exceptional in the ability to make accurate determinations of status in actual investigations.

32. *Communicates effectively both orally and in writing with the next FCM who has the case to ensure a smooth transition of the case for the benefit of the clients involved.*

- (1) **Unacceptable** – Does not communicate at all orally to the next FCM about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation are not clear enough for the next FCM to understand the case fully in order to react appropriately to the client’s situation.
- (4) **Acceptable** – Does communicate orally to the next FCM about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation are clear enough for the next FCM to understand the case fully in order to react appropriately to the client’s situation.
- (7) **Superior** – Is particularly skilled at communicating orally to the next FCM about the information that was gathered in order to ensure a smooth transition of the case for the benefit of the clients involved. Writing and documentation very clear so that the next FCM can understand the case fully in order to react appropriately to the client’s situation.

CASE MANAGEMENT

33. *Demonstrates knowledge of appropriate time frames for initiation of case planning, completion of the initial case plan, and updates on the case plan over time.*
- (1) **Unacceptable** – Does not know or follow the required time frames for planning.
 - (4) **Acceptable** – Knows and uses the required time frames for planning most of the time.
 - (7) **Superior** – Knows and uses the required criteria for planning all of the time.
34. *Can gather the appropriate participants for a Child and Family Team Meeting or Case Conference in order to develop, with the family, timely Family/Case Plans.*
- (1) **Unacceptable** – Cannot gather the appropriate participants for a FTM. Does not develop, with the family, timely Family/Case Plans.
 - (4) **Acceptable** – Can generally gather the appropriate participants for a FTM. Generally develops, with the family, timely Family/Case Plans.
 - (7) **Superior** – Always gathers the appropriate participants for a FTM. Develops, with the family and with great detail and insight, Family/Case Plans.
35. *Can write Family/Case Plans that focus on safety factors and risk factors and also include family strengths, family needs, goals, and steps to promote changes in family behavior as well as steps for preventing ongoing domestic violence, substance abuse, mental illness and child abuse/neglect issues.*
- (1) **Unacceptable** – Cannot write Family/Case Plans that focus on safety factors and risk factors and also include family strengths, family needs, goals, and steps to promote changes in family behavior as well as steps for ongoing domestic violence, substance abuse, mental illness and child abuse/neglect issues. Tends to ignore certain pieces of information
 - (4) **Acceptable** – Can generally write Case Plans that focus on safety factors and risk factors and also include family strengths, family needs, and goals, and steps to promote changes in family behavior as well as steps for ongoing domestic violence, substance abuse, mental illness, and child abuse/neglect issues.
 - (7) **Superior** – Always writes Family/Case Plans that focus on safety factors and risk factors and also include family strengths, family needs, and goals, and steps to promote changes in family behavior as well as steps for ongoing domestic violence, substance abuse, mental illness and child abuse/neglect issues.

36. ***Demonstrates ability to conduct and document case management work within the required time frames. Documentation must include the progress or lack of progress for each goal and step on a monthly basis using appropriate Forms.***

- (1) **Unacceptable** – Does not conduct and document ongoing case management work within the best practice time frames. Documentation does not include the progress or lack of progress for each goal and step on a monthly basis. Forms are not kept up to date.
- (4) **Acceptable** – Does conduct and document ongoing case management work within the best practice time frames. Documentation does include the progress or lack of progress for each goal and step on a monthly basis. Forms are kept up to date and reassessments are conducted in a timely basis.
- (7) **Superior** – Does conduct and document ongoing case management work within the best practice time frames. Documentation does include the progress or lack of progress for each goal and step on a monthly basis. Progress is happening because of their engagement with the family, children and collaterals. Forms are kept up to date and reassessments are conducted in a timely basis.

37. ***Demonstrates ability to conduct ongoing case contacts, face to face contacts, contact with collaterals, service provision and case reassessment during routine visits with the family and child. Visits must assess protection and safety of children, establishing provision of services, assessing progress toward goal achievement, participant involvement, etc.***

- (1) **Unacceptable** – Does not conduct case contacts, face to face contacts, and contact with collaterals in a timely fashion or document results of those visits. Does not ensure service provision. Does not conduct case reassessment thoroughly or within time frames. Visits do not document assessment of protection and safety of children, establishment of provision of services, assessment of progress toward goal achievement, participant involvement, etc.
- (4) **Acceptable** – Does conduct case contacts, face to face contacts, and contact with collaterals in a timely fashion and document results of those visits. Does ensure service provision. Does conduct thorough case reassessment within time frames. Visits do document assessment of protection and safety of children, establishment of provision of services, assessment of progress toward goal achievement, participant involvement, etc.
- (7) **Superior** – Does an excellent job of conducting case contacts, face to face contacts, and contact with collaterals in a timely fashion and document results of those visits. Does ensure service provision. Always conducts thorough case reassessment within time frames. Visits do document assessment of protection and safety of children, establishment of provision of services, assessment of progress toward goal achievement, and participant involvement.

38. *Demonstrates knowledge of and collaborative working relationships with resource providers and community partners who are available to assist in the preservation of families.*

- (1) **Unacceptable** – Does not know the resources and community partners available for successful preservation of families. Does not have a collaborative working relationship with resources and community partners who are available to assist in the preservation of families. Does not know the protocol for matching resources with families.
- (4) **Acceptable** – Generally knows the resources and community partners available for successful preservation of families. Has a basic collaborative working relationship with resources and community partners who are available to assist in the preservation of families. Generally knows the protocol for matching resources with families.
- (7) **Superior** – Thorough knowledge of the resources and community partners available for successful preservation of families. Has an excellent collaborative working relationship with resources and community partners who are available to assist in the preservation of families. Always knows the protocol for matching resources with families.

CASE MANAGEMENT- OUT OF HOME CARE

39. *Can gather appropriate participants to develop timely out of home care Family/Case Plans and on-going Assessments which also include objectives for children around such areas as permanency, education, mental health, physical health, attachment, independent living skills and other court orders.*

- (1) **Unacceptable** – Does not gather appropriate participants to develop timely out of home care Family/Case Plans and on-going Assessments which also includes objectives for children around such areas as permanency, education, mental health, physical health, attachment, independent living skills and other court orders.
- (4) **Acceptable** – Generally gathers appropriate participants to collaboratively develop timely out of home care Family/Case Plans and on-going Assessments which also include objectives for children around such areas as permanency, education, mental health, physical health, attachment, independent living skills and other court orders.
- (7) **Superior** – Always gathers appropriate participants to collaboratively develop timely out of home care Family/Case Plans and on-going Assessments which also include an objective for each child around permanency, education, mental health, physical health, attachment, independent living skills and other court orders.

40. *Exhibits knowledge of determining the level of care for children in out of home care, timeframes, and finding appropriate placements to meet their needs.*

- (1) **Unacceptable** – Does not have a functional knowledge of determining the level of care. Does not know the correct forms to be completed to place a child or fails to complete them. Does not know or follow time frames and is unable to follow guidelines for finding an appropriate out of home care placement.
- (4) **Acceptable** – Has a general knowledge of determining level of care. Knows the correct forms to be completed to place a child and completes them in a satisfactory manner. Follows the time frames and generally follows the guidelines for finding an appropriate out of home care placement.
- (7) **Superior** – Has a thorough understanding of determining level of care. Always completes the correct forms for placement in a scrupulous manner and well within the time frames. Is adept at finding an appropriate out of home care placement.

41. *Demonstrates the standards of practice for child and family contacts, including on—site contacts in all levels of care. Ensures frequent visitation with mother, father, and siblings, strives to place siblings together, promotes parent-child attachment and works with fathers.*

- (1) **Unacceptable** – Cannot relate the standards of practice for child and family contacts, including protocol for obtaining on-site contacts in all levels of care. Doesn't ensure frequent visitation with mother, father, and siblings. Doesn't strive to place siblings together. Doesn't promote parent-child attachment or work with fathers.
- (4) **Acceptable** – Can generally relate the standards of practice for child and family contacts, including protocol for obtaining on-site contacts in all levels of care. Generally ensures frequent visitation with mother, father, and siblings. Generally strives to place siblings together. Generally promotes parent-child attachment and work with fathers.
- (7) **Superior** – Can relate the standards of practice for child and Family contacts, including protocol for obtaining on-site contacts in all levels of care, with a high degree of competency. Always ensures frequent visitation with mother, father, and siblings. Always strives to place siblings together. Always promotes parent-child attachment .

42. *Articulates and demonstrates in the field knowledge of attachment and utilizes this knowledge to ensure the child has frequent visits with members of their biological family.*

Attachment is a psychological connection that develops within the first year between the parent and child that makes them significant to each other. Indicators of a secure attachment are child interacts positively with parent, child can play apart from parent, but frequently turns to parent as a “secure base” as they explore the environment, child can play independently, child briefly distressed when parent leaves the room, but easily is calmed down, child is happy to see parent when parent returns. Indicators of insecure attachments are child/parent interactions are often tense, negative or non-existent, child clings to parent or is distant from parent and does not explore environment, either highly dependent or apathetic, highly distressed or highly apathetic when parent leaves the room, not easily calmed when upset or shows little emotion, ambivalent or rejecting when parent returns.

- (1) **Unacceptable** – Cannot articulate or demonstrate in the field knowledge of attachment. Does not ensure that children in out of home care have frequent visits with members of their biological family.
- (4) **Acceptable** – Can articulate and generally demonstrate in the field knowledge of attachment. Knows how to facilitate attachment between children and foster families. Ensures that children in out of home care have frequent visits with their biological parent(s), and ensures visitation with siblings and extended family members (e.g. grandparents, aunts, uncles, cousins).
- (7) **Superior** – Can articulate and always demonstrate in the field knowledge of attachment. Knows how to facilitate attachment between children and foster families. Ensures that children in out of home care have frequent visits with their biological parent(s), and ensures visitation with siblings and extended family members (e.g. grandparents, aunts, uncles, cousins).

43. ***Demonstrates a belief in the importance of placing siblings together and successfully places siblings together in the same home when possible. Tries to identify family members who will take all of the children in a family, and recruits foster care homes that are willing to take sibling groups, especially large sibling groups. Recognizes barriers to sibling group placement and attempts to overcome those barriers.***

- (1) **Unacceptable** – Does not believe in the importance of placing siblings together. Does not seek to or actually achieve the placement of siblings together in most cases. Does not conduct diligent recruitment efforts to find foster families that are willing to take sibling groups, especially large sibling groups.
- (4) **Acceptable** – Does believe in the importance of placing siblings together. Does seek to and actually achieves the placement of siblings together in most cases. Does conduct diligent recruitment efforts to find foster families that are willing to take sibling groups, especially large sibling groups.
- (7) **Superior** – Strongly believes in the importance of placing siblings together. Always seeks to and actually achieves the placement of siblings together in almost all cases. Does conduct timely and effective Family Team Meetings that identify family members who will take all of the children in a family. Does conduct diligent recruitment efforts to find foster families that are willing to take sibling groups, especially large sibling groups.

44. ***Demonstrates value of the importance of preparation of a child for placement and effectively prepares children who are experiencing an initial entry into a foster family or any subsequent foster family or institution and documents such preparation in the out of home case plan.***

- (1) **Unacceptable** – Does not value the importance of preparation of a child for placement nor effectively prepares children who are coming into care for entry into an initial foster family or any subsequent foster family or institution. Does not document any efforts.
- (4) **Acceptable** – Does value the importance of preparing children for placement. Does generally effectively prepare children who are coming into care for entry into an initial foster family or any subsequent foster family or institution. Takes the time to and effectively helps the child understand why their birth family cannot take care of them at this time, and thus the need for substitute care. Helps the child understand where they are going, how the family is a good match for their needs and provides assurances that they will remain in contact with their birth family members in weekly or monthly visitations. Generally documents such preparation in the case plan.
- (7) **Superior** – Strongly values the importance of preparing children for placement. Always effectively prepares children who are coming into care for entry into an initial foster family or any subsequent foster family or institution. Takes the time to and effectively helps the child understand why their birth family cannot take care of them at this time, and thus the need for substitute care. Helps the child understand where they are going, how the family is a good match for their needs and provides assurances that they will remain in contact with their birth family members in weekly or monthly visitations. Always documents such preparation in the case plan.

45. ***Demonstrates a belief in the importance of and effectively prepares foster families to receive children who are coming into care for entry into their homes.***

- (1) **Unacceptable** – Does not believe in the importance of nor effectively prepares foster families to receive children who are coming into care for entry into their homes. Does not share adequate information about the child, including type of maltreatment, mental health or others special needs.
- (4) **Acceptable** – Does believe in the importance of preparing foster families for the placement of children into their homes. Does generally effectively prepare families for children who are coming into their care. Takes the time to and effectively helps the family understand why the child is coming into care, what happened in their birth family, the types of abuse or neglect they suffered, what issues they are coping with and how they are generally coping with the stress of leaving their birth family or a former foster care or institutional placement. Shares information regarding child’s mental health, physical health, school functioning, etc. The child’s placement history is discussed, what worked and what didn’t work in previous placements. Helps the family know how the family is a good match for the child’s needs.
- (7) **Superior** – Strongly believes in the importance of preparing foster families for the placement of children into their homes. Always effectively prepares families for children who are coming into their care. Takes the time to and effectively helps the family understand why the child is coming into care, what happened in their birth family, the types of abuse or neglect they suffered, what issues they are coping with and how they are generally coping with the stress of leaving their birth family or a former foster care or institutional placement. Shares information regarding child’s mental health, physical health, school functioning, etc. The child’s placement history is discussed, what worked and what didn’t work in previous placements. Helps the family know how the family is a good match for the child’s needs.

46. ***Demonstrates an ability to assess foster care appropriateness, striving to place each child in the least restrictive environment and close to the child’s home, according to the safety, special needs, and well-being needs of each child.***

- (1) **Unacceptable** – Does not place children in least restrictive environments, close to the child’s home or according to the child’s needs.
- (4) **Acceptable** – Does generally place children in least restrictive environments, close to the child’s home and according to the child’s needs.
- (7) **Superior** – Consistently places children in least restrictive environments, close to the child’s home and according to the child’s needs.

47. *Demonstrates an ability to enhance the stability of foster care by appropriately matching children with families and providing resources to both the children and the foster family to strengthen their ability to cope with issues that arise and form close relationships with one another.*
- (1) **Unacceptable** – Does not believe in the importance of nor does effectively support foster families. Does not enhance foster care stability by matching children with families nor provides resources to both the children and the foster family to help them cope with problems or form close relationships.
 - (4) **Acceptable** – Does believe in the importance of supporting foster families. Does generally effectively provide resources to both the children and families after placement. Takes the time to assess the needs of the children and foster family members in order to give them the kind of ongoing support they need to effectively cope with the foster child and form a close relationship with the foster child.
 - (7) **Superior** – Strongly believes in the importance of supporting foster families. Effectively provides resources to both the children and families after placement. Takes the time to assess the needs of the children and foster family members in order to give them the kind of ongoing support they need to effectively cope with the foster child and form a close relationship with the foster child.

48. ***Demonstrates an ability to work with teens in care to help them develop independent living skills. Assessments and Family/Case Plans document skills in working with youth and meeting their needs according to the Chaffee Act.***

- (1) **Unacceptable** – Does not demonstrate an ability to work with teens. Does not move their teens in care to successful independence. Assessments and Family/Case Plans lack critical elements. Assessments of youth over the age of 12 in out of home care do not include developmentally and culturally appropriate assessments of stress, cognitive capacity, social behaviors, social support and mental health status. Family/Case Plans and independent living plans do not include developmentally and culturally appropriate service referrals, and interventions to help youth develop coping skills and deal with crises, transition and independent living planning related to education, employment, housing, daily living skills, avoidance of pregnancy, and maintenance of services to aid in coping with mental illness, developmental delays, substance abuse or delinquency. Family/Case Plans and running record notes don't include engaging youth in leadership opportunities, skill building, and planning for their futures. All Family/Case Plans have youth signatures to show involvement.

- (4) **Acceptable** – Does demonstrate an ability to work with teens. Does move their teens in care to successful independence. Assessments and Family/Case Plans generally include critical elements. Assessments of youth over the age of 12 in out of home care include developmentally and culturally appropriate assessments of stress, cognitive capacity, social behaviors, social support and mental health status. Family/Case Plans and independent living plans generally include developmentally and culturally appropriate service referrals, and interventions to help youth develop coping skills and deal with crises, transition and independent living planning related to education, employment, housing, daily living skills, avoidance of pregnancy, and maintenance of services to aid in coping with mental illness, developmental delays, substance abuse or delinquency. Family/Case Plans and running record notes include engaging youth in leadership opportunities, skill building, and planning for their futures. All Family/Case Plans have youth signatures to show involvement.

- (7) **Superior** – Demonstrate an extraordinary ability to work with teens. Has a strong record of moving their teens in care to successful independence. Assessments and Family/Case Plans always include critical elements. Assessments of youth over the age of 12 in out of home care include developmentally and culturally appropriate assessments of stress, cognitive capacity, social behaviors, social support and mental health status. Family/Case Plans and independent living plans always include developmentally and culturally appropriate service referrals, and interventions to help youth develop coping skills and deal with crises, transition and independent living planning related to education, employment, housing, daily living skills, avoidance of pregnancy, and maintenance of services to aid in coping with mental illness, developmental delays, substance abuse or delinquency. Family/Case Plans and running record notes include engaging youth in leadership opportunities, skill building, and planning for their futures. All Family/Case Plans have youth signatures to show involvement.

49. ***Demonstrates knowledge of the law and policy in determining when to recommend a case plan for reunification or an alternative permanency plan.***
- (1) **Unacceptable** – Cannot write Initial Family/Case Plans with the most appropriate goal of reunification or an alternative plan.
 - (4) **Acceptable** – Can generally write Initial Family/Case Plans with the most appropriate goal of reunification or alternative permanency plans.
 - (7) **Superior** – Always writes Initial Family/Case Plans with the most appropriate goal of reunification or appropriate alternative permanency plan.
50. ***Demonstrates ability to complete ICWIS documentation within the required time frames, including incidences that require investigations, ongoing cases, Title IV-E cases, Assessments, Family/Case Plans, and Contacts. Documentation must include the progress or lack of progress for each objective on a monthly basis.***
- (1) **Unacceptable** – Does not complete all ICWIS documentation within the best practice time frames, including incidences that require investigations, ongoing cases, Title IV-E cases, Assessments, Family/Case Plans, and Contacts. Does not document progress or lack of progress for each objective on a monthly basis.
 - (4) **Acceptable** – Does complete ICWIS documentation, including incidences that require investigations, ongoing cases, Title IV-E cases, Assessments, Family/Case Plans, and Contacts. Generally completes the necessary forms within the best practice time frames. Generally documents progress or lack of progress for each objective on a monthly basis.
 - (7) **Superior** – Does complete ICWIS documentation, including incidences that require investigations, ongoing cases, Title IV-E cases, Assessments, Family/Case Plans, and Contacts with no errors. Always completes the necessary forms within the best practice time frames. Always documents progress or lack of progress for each objective on a monthly basis.

COURT/LEGAL ISSUES

51. *Demonstrates knowledge of when to use legal authority and when to consult with a supervisor around legal procedures.*
- (1) **Unacceptable** – Can't articulate when to use legal authority and when to consult with a supervisor around legal procedures.
 - (4) **Acceptable** – Can generally articulate when to use legal authority and when to consult with a supervisor around legal procedures.
 - (7) **Superior** – Is exceptional in articulating when to use legal authority and when to consult with a supervisor around legal procedures.
52. *Demonstrates knowledge of legal documents. Knows when to use each document, what to include in each one and how to fill each out accurately.*
- (1) **Unacceptable** – Can't articulate what goes into each legal document, when to use documents. Rarely completes a document accurately
 - (4) **Acceptable** – Can generally articulate what is necessary for each document, knows when to use each document, and completes documents accurately
 - (7) **Superior** – Can articulate what is necessary for each document, knows when to use each document, and completes documents accurately and with extensive detail that aids in successful case disposition.
53. *Demonstrates knowledge of proper and effective court and testifying preparation, behavior and documentation (including court reports and ICWIS screens).*
- (1) **Unacceptable** – Cannot articulate proper court and testifying preparation, behavior or documentation, rarely prepares for testimony, does not testify well, rarely handles cross-examination well, not appropriately assertive in court.
 - (4) **Acceptable** – Can generally articulate proper court and testifying preparation, behavior and documentation, prepares for testimony, testifies adequately, handles cross-examination adequately and is appropriately assertive in court.
 - (7) **Superior** – Can consistently articulate proper court and testifying preparation, behavior and documentation, thoroughly prepares for testimony, testifies well, handles cross-examination well and is appropriately assertive in court.

54. *Demonstrates ability to cope with judgments of the court that are out of their control.*

- (1) **Unacceptable** – Can't let go of judgments of the court that worker disagrees with and that are out of their control, lets it interfere with other work.
- (4) **Acceptable** – Can let go of judgments of the court (that worker disagrees with) eventually, interferes with work only some of the time, but eventually gets over it.
- (7) **Superior** – Can let go of judgments of the court (that worker disagrees with), doesn't let poor decisions interfere with rest of work.

CASE CLOSURE

55. *Demonstrate knowledge of reasons for case closure and can accurately assess which current cases should be closed.*
- (1) **Unacceptable** – Does not know the reasons for case closure and cannot accurately assess which current cases should be closed.
 - (4) **Acceptable** – Can generally articulate the reasons for case closure and accurately assesses which current cases should be closed.
 - (7) **Superior** – Can articulate the reasons for case closure and is exceptional in accurately assessing which current cases should be closed.
56. *Demonstrates knowledge of the barriers to closing a case.*
- (1) **Unacceptable** – Does not know the barriers to closing a case and thus is likely to keep cases open unnecessarily or close other cases prematurely.
 - (4) **Acceptable** – Generally knows the barriers to closing a case and thus is likely to close cases that need to be closed and not likely to close cases prematurely.
 - (7) **Superior** – Exceptional knowledge of the barriers to closing a case and closes cases appropriately.
57. *Exhibits knowledge of documentation to be used in case closure.*
- (1) **Unacceptable** – Does not know what documentation to use in case closure.
 - (4) **Acceptable** – Knows what documentation to use in case closure and completes only the minimum requirements for approval.
 - (7) **Superior** – Knows what documentation to use in case closure and routinely completes all requirements for approval.

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

Skill Assessment Scale		INDIANA SKILL ASSESSMENT SCALES						Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback
		Unacceptable (1)	Acceptable (4)	Superior (7)					
DAILY ANCHORS									
1. Acceptance of Feedback from Trainers/Field Mentor/Supervisor	1	2	3	4	5	6	7		
2. Attitude towards Child Welfare	1	2	3	4	5	6	7		
3. Attitude toward the families served by DCS	1	2	3	4	5	6	7		
4. Relationship with cultural groups	1	2	3	4	5	6	7		
5. Relationship with other DCS personnel and community partners	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

Skill Assessment Scale	Unacceptable (1)	Acceptable (4)	Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback
INDIANA SKILL ASSESSMENT SCALES (cont.)					
6. Focuses on DCS outcomes	1	2	3	4	5
7. Dealing with resistant clients	1	2	3	4	5
8. Engaging with clients	1	2	3	4	5
9. Accountability, follow through on responsibilities and communications	1	2	3	4	5
10. Understanding and acceptance of ASFA and permanency planning	1	2	3	4	5
11. Remaining safe in the field and office	1	2	3	4	5
12. Understanding appropriate health precautions	1	2	3	4	5

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

INTAKE AND REFERRAL

Skill Assessment Scale	Unacceptable (1)		Acceptable (4)			Superior (7)		Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback
13. Seeing the role of Intake and Referral as service and part of public relations	1	2	3	4	5	6	7		
14. Assisting the reporter in providing clear and concrete information	1	2	3	4	5	6	7		
15. Demonstrating knowledge of acceptable criteria for abuse, neglect, and dependency	1	2	3	4	5	6	7		
16. Documenting the gathered intake information in the ICWIS system	1	2	3	4	5	6	7		
17. Communicating effectively with the next FCM to ensure a smooth transition	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

ASSESSMENT									
Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback		
18. Demonstrating knowledge of appropriate time frames	1	2	3	4	5	6	7		
19. Demonstrating appropriate interviewing skills	1	2	3	4	5	6	7		
20. Knowing the time, place and recommended sequence of interviewing	1	2	3	4	5	6	7		
21. Demonstrating knowledge of stages, tasks, and milestones of normal child development	1	2	3	4	5	6	7		
22. Demonstrating knowledge and practice of strengths-based, family-based practice	1	2	3	4	5	6	7		
23. Demonstrating knowledge of information needed from medical personnel for child maltreatment	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

DOMESTIC VIOLENCE, SUBSTANCE ABUSE AND MENTAL HEALTH								
Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback	
24. Applying knowledge of domestic violence, substance abuse and mental health issues in assessments	1	2	3	4	5	6	7	
25. Accurately identifying dynamics and indicators of domestic violence, substance abuse and mental health issues	1	2	3	4	5	6	7	
26. Identifying the effects of domestic violence on the children in the home	1	2	3	4	5	6	7	

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

CHILD SEXUAL ABUSE

Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)		Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback
27. Identifying child protective services, law enforcement and multi-disciplinary team roles and implementation	1	2	3	4	5	6	7	
28. Using appropriate child sexual abuse interview protocol and techniques to conduct forensic interviews	1	2	3	4	5	6	7	
29. Demonstrating knowledge of safety/risk factors in the assessment and documenting findings competently in ICWIS	1	2	3	4	5	6	7	
30. Demonstrating knowledge of domestic violence safety factors in an assessment and importance of gathering this data	1	2	3	4	5	6	7	
31. Demonstrating the ability to make accurate findings	1	2	3	4	5	6	7	
32. Communicating effectively with the next FCM to ensure a smooth transition	1	2	3	4	5	6	7	

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

CASE MANAGEMENT								
Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback	
33. Demonstrating knowledge of appropriate time frames for initiation, completion and updates of family/case planning	1	2	3	4	5	6	7	
34. Gathering the appropriate participants for a Child and Family Team Meeting or Case Conference	1	2	3	4	5	6	7	
35. Writing Family/Case Plans that focus on safety factors and risk factors and also include family strengths, family needs, goals, and steps to promote changes in family behavior	1	2	3	4	5	6	7	
36. Demonstrating the ability to conduct and document case management work within the required time frames	1	2	3	4	5	6	7	
37. Demonstrating the ability to conduct ongoing case contacts, face to face contacts, contact with collaterals, service provision and case reassessment during routine visits with the family and child	1	2	3	4	5	6	7	
38. Demonstrating knowledge of and collaborative working relationships with resource providers and community partners	1	2	3	4	5	6	7	

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

CASE MANAGEMENT AND OUT OF HOME CARE									
Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback		
39. Gathering appropriate participants to co-construct timely out of home care Case Plans and on-going Assessments	1	2	3	4	5	6	7		
40. Exhibiting knowledge of determining the level of care for children in out of home care, timeframes and finding appropriate placements	1	2	3	4	5	6	7		
41. Demonstrating the standards of practice for child and family contacts	1	2	3	4	5	6	7		
42. Articulating and demonstrating knowledge of attachment	1	2	3	4	5	6	7		
43. Demonstrating a belief in the importance of placing siblings together and successfully places siblings together in the same home when possible	1	2	3	4	5	6	7		
44. Demonstrating the value of the importance of preparation of a child for placement and effectively preparing children	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

CASE MANAGEMENT AND OUT OF HOME CARE

Skill Assessment Scale	Unacceptable (1)	Acceptable (4)	Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback				
45. Demonstrating a belief in the importance of and effectively preparing foster families	1	2	3	4	5	6	7		
46. Demonstrating an ability to assess foster care appropriateness, striving to place each child in the least restrictive environment and close to the child's home	1	2	3	4	5	6	7		
47. Demonstrating an ability to enhance the stability of foster care by appropriately matching children with families	1	2	3	4	5	6	7		
48. Demonstrating an ability to work with teens in care to help them develop independent living skills	1	2	3	4	5	6	7		
49. Demonstrating knowledge of the law and policy in determining when to recommend a case plan for reunification or an alternative permanency plan	1	2	3	4	5	6	7		
50. Demonstrating ability to complete ICWIS documentation within the required time frames	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

COURT/LEGAL ISSUES

Skill Assessment Scale	Unacceptable (1)		Acceptable (4)			Superior (7)		Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback
51. Demonstrating knowledge of when to use legal authority and when to consult with a supervisor around legal procedures	1	2	3	4	5	6	7		
52. Demonstrating knowledge of legal documents	1	2	3	4	5	6	7		
53. Demonstrating knowledge of proper and effective court and testifying preparation, behavior and documentation	1	2	3	4	5	6	7		
54. Demonstrating ability to cope with judgments of the court	1	2	3	4	5	6	7		

Case Manager: _____ ID: _____ County: _____ Reviewer: _____ Date: _____

CASE CLOSURE									
Skill Assessment Scale	Unacceptable (1)		Acceptable (4)		Superior (7)	Information Obtained Thru Interview or Observation (I or O)	Comments/Feedback		
55. Demonstrating knowledge of reasons for case closure	1	2	3	4	5	6	7		
56. Demonstrating knowledge of the barriers to closure	1	2	3	4	5	6	7		
57. Exhibiting knowledge of documentation to be used in case closure	1	2	3	4	5	6	7		

New Worker Training – Effective January 5, 2009

Total 60 days – 12 weeks

35 Classroom

15 County Based Transfer of Learning Days

10 County Based On the Job Reinforcement Days

Module I: Orientation & Foundations of Practice: 11 days – 7 Class & 4 County

- 1 Day – Orientation in Central Office-HR presentation (ID, Finger Printing, Swearing-in, info on location of training, parking, etc.) 1
- 2 Days – Getting to Know DCS, (introduction to agency mission and values, agency structure, intro to child welfare practice, intro to teaming concepts) 2 & 3
- 1 Day – Tablet Distribution and Set-up/Policy Documents (Use of Tablets and how to find and utilize Policy Manual on-line) 4
- **1 Day – Transfer of Learning / Orientation in County Office (Intro. to field office staff, shadow experienced worker, discuss A-4, Travel Claim, community , etc.) 5**
- 2 Days – Culture & Diversity (specifically includes the impact of culture and diversity on the process of case planning, defining culture, working with others, recognizing cultural differences and dealing with biases, information specific to culture of poverty) 6 & 7
- 1 Day – Legal Overview 8
- **3 Days – Transfer of Learning in County Office 9, 10, & 11**

Module II: Intake and Investigation: 20 Days - 14 Classroom & 6 County

- 2 Days – Engagement (process of Change, working with resistance, Johari's window, core condition and skills, solution focused questions, challenge model, functional strengths, cycle of need, Simmons family sculpt, application of identifying strengths and needs of Simmons family) 12 & 13
- 2 Days – Teaming (Setting up the Simmons family team meeting; preparation of parents, identification of team members by parents, discussion of formal and informal supports, preparation interview with a team member) 14 & 15
- 3 Days – Assessment (continue using Simmons Family as a practice case for application of skills) 16, 17, & 18
- 2 Days – Worker Safety (preparing for the visit and investigation, law enforcement presentation regarding drug issues, car seat use) 19 & 20
- **4 Days – Transfer of Learning 21, 22, 23, & 24**
- 5 Days – Family Centered CPS Part I & II and ICWIS Intake & Assessment (overview of abuse & neglect, screening, continue using Simmons family, planning the interview, techniques of interviewing, in-class practice of assessment, continue using Simmons family, ICWIS intake, investigation, assessment, Simmons family used in labs) 25, 26, 27, 28, & 29
- **2 Days – Transfer of Learning 30 & 31**

Module III: Case Planning: 13 Days – 8 Classroom and 5 County

- 3 Days – Planning & Intervening (includes information on domestic violence, mental health, the impact of childhood trauma, substance abuse and reviewing reports from other disciplines such as mental health and law enforcement.) 32, 33, & 34
- 3 Days – Case Planning and Family-Centered Casework (includes, policy, best practice, engagement of family in team process, understanding positive intentions/link with cycle of need, identification of functional strengths and needs, links back to the change process and resistance from engagement class) 35, 36, & 37
- 2 Days – Legal 38 & 39
- **5 Days – Transfer of Learning and Skill Reinforcement in the Field 40, 41, 42, 43, & 44**

Module IV: Placement and Permanency: 16 Days – 6 Classroom & 10 County

- 3 Days – Effects of Abuse/Neglect on Child Development & Separation, Child Placement & Permanency combined (includes child develop and the adverse effects of abuse and neglect on placement/care, early brain development included includes policy, best practice and adoption information). 45, 46, & 47
- 1 Day – Permanency 48
- 1 Day – Time management & prioritization 49
- **10 Days – Transfer of Learning / On the job skill reinforcement 50, 51, 52, 53, 54, 55, 56, 57, 58, & 59**
- 1 Day – Graduation ½ Day Cohort summary work & ½ Day Graduation Ceremony 60



REVIEW OF FIELD MENTOR BY TRAINEE

State Form 53206 (R / 3-07) / CW 3513
DEPARTMENT OF CHILD SERVICES

Name of Field Mentor		Date (month, day, year)	
Name(s) of trainee(s)	County	Cohort number	

TASK	MET EXPECTATIONS	DID NOT MEET EXPECTATIONS
Provided assistance and direction to me during transfer of learning days and the three week on the job training period; was available by email and phone for the three months following graduation to answer questions.		
Reviewed skill assessment scale sheets with me after each module and after each week of on the job training and helped me develop a plan for any areas that needed additional development.		
Provided feedback to me regularly regarding tasks I was working on, which assisted me in further developing my skills.		
The best practice content as presented in the classroom matches the practice of the mentor in the field.		

Things I found helpful in working with my Field Mentor *(attach additional sheet, if necessary)*

Suggestions I have for improving the Field Mentor Program *(attach additional sheet, if necessary)*

Please forward completed form to:

Administrative Assistant, Staff Development
402 West Washington Street, Room W392, MS 47
Indianapolis, IN 46204
Fax: (317) 234-4497



EVALUATION OF FIELD MENTOR BY SUPERVISOR OF TRAINEE

State Form 53205 (1-07) / CW 3512
DEPARTMENT OF CHILD SERVICES

Name of Field Mentor	Date (month, day, year)
Name(s) of trainee(s)	County

TASK	MET EXPECTATIONS	DID NOT MEET EXPECTATIONS
Worked with trainee during 12 weeks and was available for 3 months of follow-up consultation.		
Completed weekly sheets on identified skills and provided feedback to trainee on strengths and needs.		
Provided additional assistance to trainee on any identified needs.		
Provided feedback to trainee's supervisor regularly and worked with that supervisor to provide additional mentoring and guidance in any areas that needed improvement.		
Provided rating sheets to the Staff Development Field Mentor Coordinator weekly.		
Overall performance of field mentor		

Signature of trainee supervisor	Date (month, day, year)
Name of trainee supervisor	

Please forward completed form to: Administrative Assistant, Staff Development
402 West Washington Street, Room W392
Indianapolis, IN 46204
Fax: (317) 234-4497