

REFORMING THE CHILD PROTECTION SYSTEM

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Reforming The Child Protection System

Reforming What System?

Before we can get down to the complex task of reforming the child protection system, deciding exactly what is to be reformed is a necessary step. First and perhaps foremost, there is no child protection system. To call what exists a system implies a significant degree of integration and interdependence among the various elements comprising child protection. There are components and focal areas that might appropriately be thought of as systems. These include individual local agencies or local branches of state departments, specific programs within state or regional units, or programs or service units that work together in a somewhat integrated way. What is usually referred to as the child protection system is more appropriately described as an aggregation in the sense of many separate but more or less related things being grouped together, mostly for convenient reference. Our first challenge is, then, to figure out how we are going to go about reforming an aggregation.

In most states, child protection is aggregated under the auspices and administration of a state-level department responsible for the safety of abused and neglected children in the state. The responsibility is, in turn, delegated to various local and regional units and entities that function fairly independently from each other. In some states, there is a state-level department that provides auspices and supervision for local, county-level departments or agencies that are, in turn, responsible for the administration of programs and services and for the safety of abused and neglected children in the individual counties. Additionally, there are other child protection components responsible for specific child populations such as the children of individuals serving in the military and Native-American children living on federally designated reservations. Collectively, these components and their numerous sub-components are what is called the child protection system.

It is unarguably true many children are not protected and kept safe within this aggregation. It is equally true thousands of children are kept safe and are not further victimized by abusing and neglectful people within their environments. The challenge is to increase the proportion of children who are kept safe without jeopardizing the safety of those children who are successfully being kept out of harm's way. Achieving this outcome is at the essence of any efforts focusing on reforming child protection.

What Is The Point Of Reforming Child Protection?

As I suggested above, the child protection system is little more than a convenient myth. What we refer to as a system is merely an aggregation of more or less disparate elements or entities with related purposes or functions. The single factor causing the aggregation to be considered as a whole is the desire to keep abused and neglected children out of harm's way. If we think of this outcome as child protection's mission, our focus shifts from whether the system is broken to whether children are being kept safe.

With this shifted focus in mind, the questions needing asked and answered change. Instead of asking if the system is broken and whose fault is that, we must ask if children are being kept safe and, if not, why. Answering the first part of this question is easy. Yes, most children are being kept safe but many are not. Knowing why many children are not kept from harm's way and determining what to do to correct that deficit is the challenge.

Children have needs, problems, and vulnerabilities that jeopardize their well-being. Unlike adults, though, children do not have the knowledge, skills, abilities, and resources to proactively manage this jeopardy. They cannot personally assure their needs are met, their problems are appropriately resolved, and they are adequately protected from the myriad of conditions and circumstances to which they are vulnerable. Public child protection agencies provide services and resources to meet the individual needs of children and to resolve their unique problems. Those agencies are intended to compensate for the special vulnerabilities of children by standing as a guardian in harm's way.

Fundamentally, parents are each child's first and most important resource. They meet their children's needs, help with their problems, and keep them safe. Child protection agencies are intended to supplement and increase the ability of parents to manage their children's age-related jeopardy. For children, their parents are their primary guardians. Child protection agencies are secondary and have only a supporting role.

For most parents, their guardianship is adequate and very successful. Their children's needs are met, their problems are resolved, and they avoid the harms and dangers to which they are vulnerable. It takes competent parents to protect a child and for most children, the strength is there for them.

Unfortunately, the strength is not there for many other children. The reasons are varied and complex but in every case, the parents have failed to meet their children's needs, to resolve their problems, to keep them safe. They have not succeeded in meeting their obligations to their children.

We now see why many children are not kept safe. Their parents are failing in their responsibility to keep their children from harm's way. Additionally, if a child protection agency is aware of the possible parent failure and does not prevent further harm to the child, the agency fails in its secondary guardianship responsibility. This perspective lets us more clearly define the challenge. The outcome of child protection reform is to increase the frequency with which child protection agencies become aware of potentially significant parent failure. Given that increased awareness, the challenge is to increase the extent to which the agencies are able to successfully predict recurrence of parent failure and effectively prevent that recurrence. The standard is assuring safety and continuing well being for each child, each time. Although the standard is met for most children for whom child protection agencies become responsible, it is not met for many others. Why and what to do about it is both the challenge and point to reforming child protection.

Can We Accept Business As Usual?

Can child protection be reformed using the same paradigm through which it came to be as it is today? Let's briefly think about the processes and forces that have culminated in child protection as we know it. People, groups, and organizations have, for decades, been concerned about the well being of children in general and abused and neglected children in particular. Although there have been many initiatives through various private and charitable entities, the primary thrust for protection of abused and neglected children has been through public, governmental action. Contemporary child protection is, for the most part, a product of state and federal legislation. The legislation has assuredly been prompted by non-governmental sources such as the print and broadcast media, professional organizations concerned about children, religious and other charitable organizations, and private citizens. Nonetheless, the events that most specifically resulted in the complex aggregation of programs and services we refer to as child protection have been legislative.

Over time, the legislative activities have followed two separate and not necessarily compatible tracks. The primary track has developed public policy related to the protection of abused and neglected children. Involved here have been the establishment of funding sources and associated programs and services intended to keep vulnerable children from harm's way and to assure their safety and well being. This effort does not reflect a comprehensive, integrated strategy at the federal, state, or local levels. Rather, it reflects a sincere effort to ameliorate identified conditions, circumstances, and situations known to be associated with the maltreatment of children along with establishing resources thought to increase the likelihood children will grow and progress safely and successfully.

It is important to see the development of public policy and the provision of supporting resources have not been continuously evolving processes building systematically on themselves. Policy and resource development have instead happened unevenly and asynchronously over many years. Further, this uneven, asynchronous development has varied significantly from jurisdiction to jurisdiction, from locality to locality. The result is a complex and frequently confusing aggregation of programs and services, lines of responsibility and authority, rules and procedures, organizational structures and funding at the federal, state, and local levels. The resulting legislative montage has coherence only in so far as its elements and components are collectively more or less related to child protection. This characterization is not a criticism. It is rather merely an expected outcome of an extended political and legislative process. It is government making its best effort to care about and for vulnerable children.

Child protection works for most abused and neglected children most of the time. Unfortunately, it frequently does not work for many children. They are not kept safe and their well being is not assured. This reality prompts a secondary legislative track. Legislators and government officials attempt to correct perceived weaknesses and inadequacies in the child protection montage through additional legislation and rule making. They use the same process used to create the montage as they attempt to correct its deficits and incapacities. As was true for the primary development process, the secondary corrective process is uneven and asynchronous, varying from jurisdiction to jurisdiction, from locality to locality. More significantly, it is nearly exclusively reactive. The corrective activity is mostly prompted by tragic events such as the serious injury or death of a child. These reactive efforts sometimes improve outcomes for children but usually do not. Instead they

most typically do little more than add additional rules and restrictions to the work of child protection and increase the complexity and difficulty in managing child protection activities.

Real child protection reform requires a reconsideration of the montage itself and a Concurrent reconsideration of the processes we use to affect change in how we go about assuring safety and well being for abused and neglected children. The legislative, rule-making process demonstratively does not work. We hope it does but the next tragedy involving a child repeatedly makes it clear it does not. Reforming child protection requires an alternative paradigm, a better alternative to business as usual in child protection.

From Rules To Outcomes To Standards

Reforming child protection must fundamentally change the paradigm informing the legislative and administrative processes responsible for assuring safety and well being for abused and neglected children. As suggested earlier, those processes have generally followed two tracks. First, they have focused on establishing programs and services for maltreated children and have appropriated resources to support those initiatives. Second, they have focused on correcting perceived deficits and inadequacies in child protection through prescribing additional and generally more restrictive activities and procedures that must be followed by people working in child protection. The procedures create the aggregation of elements and components comprising child protection and then introduce additional rules and restrictions to “fix” child protection when that which was created does not work. This cycle then continues, iteration after iteration. Although the intentions are good, the results are less than acceptable.

Underlying the above processes, there is a basic shortcoming. The aggregate nature of child protection is both confused and confusing. There is no clear picture of what child protection should look like and how it should function were programs and services adequately and competently serving the needs and interests of maltreated children. Since there is no clear vision of where we are going, there are few if any firm markers or standards for determining whether we are getting there.

The Federal Child and Family Services Review process is an important effort to change the child protection paradigm. It does shift focus from emphasis on rules and procedures to predetermined outcomes for children and families. The specific targets incorporated in these outcomes are a major step in the right direction. The shift from emphasis on rules and procedures to emphasizing outcomes for children and families is positive. It is important to note, as positive as the shift to outcomes is, no jurisdiction has thus far achieved the designated outcomes for its children and families. Further, state and local data systems are typically not designed to measure whether the outcomes are being met. Additionally, there is minimal effort focused on training child protection workers on the outcomes and how to achieve the outcomes for the children and families for whom they are responsible.

The shift toward outcome driven practice in child protection is agonizingly slow and very spotty in terms of its adoption as the central practice paradigm. There is little to no significant discussion about the importance of outcome driven practice and no consensus about what those outcomes should be. Other than the federal emphasis on outcomes as discussed above, it seems unlikely there

is any significant discussion or consensus in most child protection jurisdictions. Until we commit to outcome driven practice in all jurisdictions, child protection will continue to be rule and procedure driven and the outcomes we get will remain unacceptably inadequate.

The needed shift to outcome driven practice would be but an interim step in fully reforming child protection. The paradigm shift must be from rules to outcomes to standards driven practice. For example, rule driven practice might say a full investigation must be initiated within 24-hours of receiving a report of a possible child maltreatment situation. Outcome driven practice might say the percent of initiated investigations of reports of possible maltreatment of children within 24-hours of the initial report shall increase from 92% to 95%. Standard driven practice might say no children are further harmed in the interim between the initial report of possible maltreatment and the initiation of the investigation. Rule driven practice might say foster parents shall receive thirty-six hours of training before having any children placed with them. Outcome driven practice might say foster parents shall demonstrate (perhaps through testing) they have specific knowledge and information related to foster care. Standard driven practice might say children in foster care shall experience no harm in the foster home, shall succeed in school, and shall not become involved in problematic behavior or situations in the community. With standard driven practice, the worker and his or her agency are held accountable for meeting the standard for every child, every time.

From the foregoing, it is clear we have hardly begun the complex task of reforming child protection. Not until practice is fully standard driven will maltreated children experience the level of practice they deserve and must have.

Standards Driven, Best Practice Based Child Protection?

Reforming child protection is typically understood as taking needed action to improve and enhance child protection practice at the national or state level or within an area such as a military or tribal jurisdiction. Child protection within this context is perceived as a conceptual whole, as a singular structure. From that perspective, for example, we talk about the national or state child protection system and work to improve and enhance “the system.” It also lets us say things like, “The system is broken,” and then recommend ways to “fix” the broken system.

As pointed out above, there is no child protection system, although there are local agencies and some programs appropriately viewed as systems within the larger child protection aggregation. Reform efforts thus focus on selected aspects of the aggregation with the goal of introducing new elements, adding resources to existing elements, correcting malfunctioning elements, or improving the functioning of specific elements. Through legislative and administrative action, new programs or services may be added, existing programs or services may be expanded or reduced, and the rules and procedures associated with specific programs or services may be modified.

Earlier, I argued child protection practice must become standards driven. The paradigm underlying child protection must first shift from emphasis on rules and on legislative and administrative prescription to an understanding of the outcomes expected for children and families. In turn, emphasis must further shift to consensus based standards serving as clear markers for practice appropriateness and effectiveness. The best interest of children does not substantially vary from

time to time, from place to place, from situation to situation. There are standards that apply to all children, to each child. Until we identify those standards as they apply to child protection, we will continue to rationalize inadequate practice and justify insufficient intervention with and on behalf of children.

In addition to being standards driven, the new child protection paradigm must be best practice based. The best interest of children is not merely a matter of opinion. There are evidence based approaches and processes objectively better than other approaches and processes as well as approaches and processes that clearly do not support and further the best interests of children. Child protection practice must move beyond the current procedural approach to a level of continuous invention where better and more effective approaches and processes are developed for assuring the safety and well being of children. Those alternative approaches must in turn be carefully tested and empirically verified. It is possible to determine what constitutes best practice and we must follow the path to that understanding.

Committing to standards driven child protection that is based on best practice approaches and procedures requires a concomitant re-conceptualization of child protection reform. Simply relying on introducing new elements, adding resources to existing elements, correcting malfunctioning elements, or improving the functioning of specific elements is not sufficient. We must literally reform child protection. The aggregate nature of child protection represents a form that effectively precludes a coherent, comprehensive approach to change and invites some version of the current pick-and-choose process we use. The need is for a standards driven, best practice based model representing an ideal, comprehensive child protection system. This model would then serve as the vision for future development, including legislative and administrative action. Instead of efforts to “fix” child protection, our work would focus on continuously approaching the known ideal. To the extent we clearly know where we are going and how child protection will look when we get there, we increase the likelihood of achieving safety and well being for each abused and neglected child, each time we intervene. We will be better assured we truly are doing the right things right, the first time, on time, every time, one child at a time.

A Call For Guiding Principles

In the previous two sections, I proposed “standards” and “best practice” as key elements in the new child protection paradigm. Traditionally, child protection practice has been rule driven. These rules are both specific and prescriptive. This is what we may think of as an “input” model for practice. Good practice is following the rules.

Rules driven practice has started the transition to outcomes driven practice, an “output” model. Although focus on outcomes is a major step toward practice excellence, the transition will not be complete until there are clear standards in place to judge practice efficacy. Standards driven practice moves beyond rules and outcomes, beyond relative measures of success to absolute standards by which practice is judged.

In the new child protection paradigm, a similar expectation holds for all child protection activities. Traditionally, those activities have been procedure driven. Proscribed procedures are followed in

delimited practice areas. For example, complex procedures are followed when conducting an investigation of a report of abuse or neglect or when “studying” a family as a potential foster care resource. Good practice is carefully and completely following the relevant procedures.

There has been some transition to continuous invention in some areas to enable workers to adjust their activities to accommodate and adjust to the individual needs and situations of children and families. Intervention becomes more flexible and less procedural, relying more on the skill and expertise of the worker to do what he (or she) thinks is most appropriate at the time. The “alternative response” (also called “differential response”) model for managing reports of abuse and neglect is a positive example of this transition. As positive as this development is, the transition will not be complete until we have evidence based, best practices for each area of child protection. Relying exclusively on the skill and judgment of individual workers is not adequate. The well being of children requires more and better evidence of what actually is and is not effective for which children in which situations.

There is, I think, a missing step in the current transition of the child protection paradigm. Child protection is clearly re-forming with much more emphasis on outcomes for children and families. There is also more emphasis on continuous invention of new and better approaches to keeping children from harm’s way and enabling families to better manage their responsibilities to their children. Although there is a long way to go to reach the level of standards driven, best practice based child protection, it is beginning to be visible on the child protection horizon. Even so, there is an absence of what we might call “guiding principles” for child protection.

For example, there is currently an initiative being pursued by the National Governors Association to reduce the number of children in foster care - by 50%. This is certainly an outcome driven initiative and represents an important example of continuous invention intended to improve the lives of abused and neglected children. Missing, though, is a clear statement of the guiding principles followed when forming the initiative. Why is reducing the number of children in foster care a good idea and how do we know there are twice as many children in foster care as should be there? I am not questioning the initiative but rather simply asking what guiding principles inform the decision to pursue the initiative. More generally, then, what guiding principles inform or should inform child protection practice?

An example of a guiding principle might be any intervention on behalf of a child will increase safety, permanence, and ongoing well being for the child. This is based on the standard that says children will only live in safe, stable environments that are familiar and nurturing and that meet their needs and support their ongoing well being. A second guiding principle here is timely permanence is always of the essence when intervening on behalf of children.

These may not be the correct guiding principles but if they are, foster care clearly violates both principles. Foster care is typically neither familiar nor permanent. Following the principles, no children should be in foster care and those who are should have that situation corrected immediately, if at all possible. Foster care placements should be reduced by 100%. A 50% reduction is, then, but a good start in the right direction. Our guiding principles tell us so. If child protection is to be re-formed, what are the guiding principles that should inform the reformation?

All child protection practice should be standards driven and best practice based is a good candidate for inclusion in any list of the top ten guiding principles informing child protection reform.

Toward Reliance On Professional Judgment

I have been focusing on the new and evolving child protection paradigm. If the new paradigm is to serve the best interests of abused and neglected children, it must be standards driven and best practice based, reflecting carefully conceived and well considered guiding principles that appropriately inform child protection practice. The evolving paradigm is transitioning from reliance on rules and procedures to emphasis on outcomes and continuous invention of innovative and creative strategies for and approaches to our work with children and families.

The need is to continue that transition to incorporate consensus based standards and verified best practices directing all child protection interventions. The paradigm additionally needs to transition from reliance on bureaucratic structures to worker empowerment and in turn to dependence on professional judgment and expertise. Let's consider each of these three transitional elements.

Bureaucratic structures: I am sure we are all familiar with the traditional bureaucracy model for organizations and for organizing programs and services. The typical structure is vertically organized, with power, authority, direction, and planning emanating from the top of the familiar pyramid and spreading outward and down. The requirements and directives are passed down in the form of procedures and rules to be faithfully followed at each descending level. As the laws, policies, and directives descend, additional, specific procedures and rules are added in order to more exactly prescribe the actions and behavior expected of people at each lower level. Their individual performance is then evaluated in terms of how completely they know and follow the array of procedures and rules associated with their positions in the bureaucracy. At the level of service to people, the structure is procedure and rules driven.

An underlying problem here is child protection is not a bureaucracy in any traditional sense. One has to focus fairly locally to find any single structure that functions in a traditional bureaucratic manner. What we find instead is a loosely organized aggregation of public and private entities, programs, and services functioning collectively and more or less coherently to protect abused and neglected children. The existing procedures and rules are understood and followed unevenly and inconsistently. The people delivering the prescribed services reflect wide variability in terms of qualifications and approach, and the actions and behavior expected when the laws and policies at the top of the presumed bureaucratic structure began their descent toward implementation have only a general relationship to what actually happens in the field.

Empowerment: It likely comes as no surprise to those in the field who are doing the difficult work of child protection to have me point out empowerment is not a new idea. Child protection workers have been largely empowered to do as they think best for many years. Certainly they mostly conform their actions and behavior to the myriad of procedures and rules associated with their positions. They are good bureaucratic participants. At the same time, though, the strategies, approaches, choices, and decisions they make for and about children and families on a daily basis

are mostly a function of their own counsel. This includes how they choose to apply specific procedures and rules within specific situations and circumstances.

The shift to an outcomes orientation for judging the effectiveness of their actions and behavior is, in part, an acknowledgement of existing worker empowerment. Reliance on compliance with procedures and rules has clearly not been adequate. Workers have also used continuous invention for a very long time. Although they may usually do what they do in the same ways they have in the past, new situations and unexpected challenges require creativity and innovation. Workers invent new and better ways to accomplish what they are committed to accomplishing with children and families. They proceed on an empowered basis simply because they do not have a prescribed path that will get their clients where they need to go. Within the bureaucratic mind-set, we proceed as if this were not the case but it is.

Professional judgment: Within the new child protection paradigm, reliance on outcomes shifts to acceptance of consensus based standards whereby practice is judged to succeed or fail. In this paradigm, simply doing better is not acceptable. Child protection workers are expected to succeed. Similarly, inventing strategies and approaches by individual workers is not adequate practice. Making it up as we go along is unacceptable. Although in the current practice environment, continuous invention is necessary, in the new child protection paradigm, workers will be able to rely on best practice methods and approaches known to conform to accepted standards.

The professional judgments of child protection workers will be fully informed by child protection's underlying guiding principles and reliant on generally accepted standards and known best practice. At that practice level, bureaucratically generated laws and policies, procedures and rules will be largely unnecessary and mostly counterproductive. Child protection will then be the responsibility of extensively educated, highly trained professionals who practice based on clear guiding principles informing consensus based standards and known best practice. The people assuring safety, permanence, and ongoing well being for abused and neglected children will be as qualified as those who safeguard our health or fly the plains that transport us around the world. The knowledge, judgment, and expertise required are no less for those who we hold responsible for our children.

Toward Safety, Permanence, And Ongoing Success

Thus far, I have focused on the new child protection paradigm and its gradual emergence. A key to understanding the emerging paradigm is holding a clear vision of child protection once the new paradigm has fully emerged. In that new reality, child protection will be standards driven, based on known best practices, and fully informed by generally accepted guiding principles defining safety, permanence, and ongoing well being for abused and neglected children.

It is important to point out the new child protection paradigm does not replace earlier paradigms. Rather, it will emerge from the earlier paradigms and incorporate their features into the new reality. For example, there will still be rules and procedures within a bureaucratically organized context. However, the rules and procedures will no longer represent the "instruction book" for practice. They will, rather, simply serve as the supporting structure for practice.

Practice itself will be outcomes driven and geared toward reliance on continuous invention and the empowerment of workers. When the new child protection paradigm fully emerges, outcomes will have transitioned to consensus based standards, continuous invention to known best practices, and empowerment to evidence delimited professional judgment. At that point, workers and child protection practices will be governed by generally accepted guiding principles and practice will be regulated by competent professional oversight.

With the above serving as the foundation of the new child protection paradigm, our understanding of what is meant by “child protection” changes. In the traditional paradigm, “child protection” primarily refers to “safety” for abused and neglected children. The point of child protection is to keep children from harm’s way. In the emerging paradigm, safety is insufficient. Workers must additionally secure permanence for abused and neglected children.

Within the context of safety, children need stable, lasting relationships and connections with adults who can and will maintain those relationships and connections throughout the child’s life. Contemporary child protection has significantly transitioned to incorporate this type of permanence for children. This is seen through an increasing emphasis on supporting and working with birth parents, placing children with relatives when they cannot remain with birth parents, and pursuing adoption when appropriate relatives are not forthcoming. The transition toward incorporating safety with permanence is also seen in the trend reducing reliance on residential and foster care for children, acknowledging that neither represents permanence.

In the new child protection paradigm, the transition from safety to permanence is understood as but a partial response to the needs and best interest of abused and neglected children. Assuredly, children must be kept safe and must have permanence secured for them. Beyond that, though, their ongoing success must be secured as well. This certainly includes their successful physical growth and development including but not limited to their physical health. It also includes their emotional growth and development, their moral growth and development, their social adjustment and growth, and their educational and intellectual growth and success.

The ongoing success of children is complex and multidimensional. Nonetheless, in the new child protection paradigm, the ongoing success of abused and neglected children will stand as a practice pillar no less than do safety and permanence. A commitment to achieving safety, permanence, and ongoing success for each child each time will represent a cardinal guiding principle for all child protection practice.

Shifting Toward Success Centered Practice

To this point, I have discussed the transition of the child protection paradigm from rules to outcomes to standards, from procedures to continuous invention to best practice, from bureaucracy to empowerment to professional judgment, from protection to permanence to ongoing success for every abused and neglected child. As we know, these transitions have to be based on clearly articulated guiding principles that inform the transitions and serve as guideposts for evaluating their legitimacy. Here, I want to introduce the concept of “centeredness” as a key characteristic of the new child protection paradigm.

In the traditional child protection paradigm, practice is staff centered. Child protection is understood and evaluated nearly exclusively in terms of the behavior and actions of child protection workers. Workers are expected to understand and conform their behavior to a very complex collection of rules and associated procedures. A worker's performance is judged by the extent to which he (or she) exhibits the prescribed behavior. If a serious, negative event occurs, the obvious response is more and better rules, along with more and better training. (Note foster parents are also included here.)

In the transitional paradigm, we see a shift from staff centeredness to a client centered perspective. Do identifiable events occur with and for clients within designated time frames? There are "outcomes" arrays by which child protection is evaluated. These arrays are based on what should and should not happen and on whether the preferred outcomes were or were not achieved. The outcomes arrays, however, are not understood as superseding the staff centered, rules based, traditional paradigm. Rather, they are simply added to the expectation mix for child protection workers. If there is a serious, negative incident, along with increasing the specificity of associated rules, there is a concurrent increase in the specificity of expected outcomes. Child protection workers and programs are accountable for both following the extensive rules and for achieving the prescribed outcomes.

In the new child protection paradigm, the perspective changes. Child protection practice is success centered. The central issue is whether the worker or program achieves safety, permanence, and ongoing success for each child for whom responsibility has been accepted. If so, (and assuming practice reflects generally accepted standards, best practice expectations, sound professional judgment, and adherence to agreed on guiding principles) the specific behavior and actions of workers are not at issue. If safety, permanence, and ongoing success for any child are not achieved, the worker and the program have failed that child. At that point, focus is specifically on the child's worker and on the specific program.

In the new child protection paradigm, we do not modify the rules and outcome expectations for all workers to respond to an issue clearly associated with an identifiable worker or program. Instead, corrective, peer-guided intervention is directed specifically toward the people and program that failed the child. If we learn better ways to avoid the negative outcome or better ways to serve children and families through the intervention, this new knowledge is freely shared among child protection professionals.

There are many issues in child protection that appear to represent "systemic" or aggregate issues and we tend to address them with sweeping change. The changes typically revert to the traditional and transitional approaches. We develop new and usually expanded rules and more prescriptive outcomes. Unfortunately, this avoids stopping to carefully consider why we do what we do and what we ought to be doing. We work with children or at least should be working with children one at a time to achieve safety, permanence, and ongoing success for each child, each time. The best protocol for specific children varies from child to child and cannot be legislated or ordered by administrative rule. It must be individually determined and rest on standards, best practice, and professional judgment, fully informed by generally accepted guiding principles. All child

protection practice must be success centered and fully committed to doing the right things right, the first time, on time, every time, one child at a time, no exceptions, no excuses.

The Transition to Community Integration

Above, I introduced the notion of “centeredness.” As we saw there, the child protection paradigm transitions from the traditional staff centered approach to incorporate a client centered approach at the intermediate transitional level. The paradigm then transitions to the advanced level where child protection is fully success centered. At this level, child protection is neither staff nor client driven. It is instead driven by a continuous focus on the shared success of the client and child protection workers as they strive to keep the child safe while achieving permanence and ongoing success for the child.

In the continuing emergence of the new child protection paradigm, centeredness is an increasingly important feature. Just as the paradigm transitions from staff to client to success centeredness, it similarly transitions from program centered to family centered to community integrated. At the program centered, traditional level, services and resources are delimited by the specific program to which the child is attached or for which the family is eligible. The client receives those services or resources the program provides. At the intermediate level, services and resources are family driven. The family receives those services and resources the family believes to be in its best interest.

In the new, emerging child protection paradigm, centeredness shifts to the community. The community becomes a place where children and families can fully participate in assuring that their needs are met, their vulnerabilities are managed, their problems are resolved. It is a place where young children are safe and nurtured and older children are at home, in school, and out of trouble. It is a place where both families and children succeed. When they do not succeed, the services and resources are there in the particular mix most appropriate for each child and each family.

Revisiting the same transition, think about a particular program associated with child protection. That program offers defined services to identifiable clients. The program is at the center of the helping circle and clients move into and out of the helping circle. We find this arrangement at the traditional level of practice. Next, think about a family. When it receives focus, is at the center of the helping circle, it may receive services and resources from several programs, depending on the family’s specific needs and interests. Various programs and associated staff move into and out of the helping circle. Now consider an arrangement where the community is itself the helping circle. The services, resources, and supplemental guidance children and families need from time to time are equally available to and accessible by all members of the community.

If a child or family need special or supplemental services or resources (either self-identified or community-identified), the needed array materializes. Think of it as a meta program, uniquely designed to respond to the individual interests and circumstances of the particular child or family. The development of one-stop services centers are a long step toward realizing this new reality. Families know about and easily access the services mall where they can get the exact help they need. When managed well, each customer has a personal shopper (case manager) who makes sure each client gets exactly what he (or she) needs.

If the exact services or resources are not immediately available, the personal shopper locates them at another mall and has them brought to the customer. "If we do not have exactly what you need, we will find it for you." At this level, child protection has fully transitioned from program centered practice, past family centered practice, to actual community integration. Each member of the community either has or can access the exact services and resources he (or she) needs to succeed.

A Unique Support Network For Each Child

Thus far, I have explored the transition of the child protection paradigm from its traditional foundation. At the traditional level, child protection is rules and procedure driven, emphasizing its reliance on a perceived, well established bureaucratic reality intended to govern and regulate its functioning. From this spurious perspective, child protection is nearly exclusively focused on safety for abused and neglected children, on keeping children from harm's way. This important goal is then pursued through child protection practice that is staff and program centered, providing prescribed services arrays intended to increase child safety. Children receive those predetermined services and resources believed by the bureaucracy to best serve their interests. Child protection operates locally within an identifiable agency and that agency is itself at the center of the helping circle into which children are brought for protective services.

At the intermediate level of the transitioning paradigm, focus shifts from the agency to the community. Within that broader context, child protection is judged in terms of pre-determined outcomes in addition to rules and procedures compliance. There is increased reliance on the continuous inventiveness of workers who function with expanded empowerment and flexibility. Services delivery is less programmatic and staff dependent. Permanence is added to safety as a core goal and the child's family becomes the primary locus of interest. Child protection is additionally judged in terms of the adequacy of community supports and resources and the effectiveness of interagency cooperation and collaboration.

At the advanced level, the paradigm shifts to reliance on standards, best practice approaches, and the professional judgments of child protection workers. The ongoing success of the child stands as a third practice pillar, along with safety and permanence. This emphasis on success expands to incorporate the family and its integration into the community and its array of services and resources for all families and children within the community. At this level, each child and, in turn, each family develops an individualized support network including resources, services, and opportunities flowing from public, private, community, family, and neighborhood sources that continuously adjust and accommodate to the immediate situations and circumstances of each child and family. Establishing, supporting, and maintaining this support network is the ongoing focus of legislative and administrative efforts to assure the safety, permanence, and ongoing success of each child, including those who have been abused or neglected.

From the support network perspective, Children who have experienced abuse and neglect should not be viewed differently than children who experience other situations or circumstances that jeopardize their safety, permanence, and ongoing success. Included here are children who are not succeeding in school, children who are not succeeding in the community due to behavior and

adjustment issues, children who are not succeeding due to illness or physical disability, children who are not succeeding due to psychological or developmental issues, and on and on. Significant numbers of our children experience critical life jeopardy for multiple and complex reasons. To treat those who have been abused or neglected as a different class of people is wrong. Further, to treat their families as a different class of people is similarly wrong. Our approach should not vary based on the nature of the specific jeopardy. We should be sure the child is receiving the supports and services he (or she) needs to succeed.

This starts with the child's immediate family, with his parents. Our intervention then expands out to include the extended family, the child's neighborhood and local community, and so on. The intervention moves out far enough but only as far as necessary to assure the child's success. We build the exact support network needed by the specific child to best serve him and his interests. How to do this can be neither legislatively nor administratively mandated. Rather, it simply emphasizes the need for identified standards and best practice methods reliant on sound professional judgment and informed by consensus based guiding principles for work with children in general and with abused and neglected children in particular. Re-forming child protection must proceed with an understanding of those guiding principles as we shift our perspective to incorporate a clear vision of child protection practice from the perspective of the unique support network essential for the ongoing success of the children for whom we are responsible.

Closed Structures And Fuzzy Boundaries

From the perspective of the traditional paradigm, child protection is a closed structure. Consider, for example, the desire to recognize and appropriately respond to suspected instances of child maltreatment. The structure is first limited to a particular population of children, e.g., all children in a limited area such as a state, service district, or county. Within that area, anyone such as a neighbor or concerned citizen may volunteer as an observer or "reporter." Additionally, some residents of the area such as teachers, child care workers, doctors, police, and others who regularly interact with children and parents are designated as mandated reporters.

The above results in what we may think of as the report pool. Included in the pool are instances of suspected maltreatment ranging from more to less serious, from more to less potentially harmful. Think of this range as falling along the horizontal axis of a graph from more serious toward the left and less serious toward the right. Now consider what proportion of actual instances of maltreatment is captured into the report pool. Although we do not know with certainty, we may assume most - but not all - instances of severe maltreatment are reported into the pool. It is equally reasonable to assume the proportion of reported instances compared to actual instances goes down as the severity decreases. This results in a reporting line starting high on the left of the graph where severity is high and gradually descending as severity decreases. The reporting pool is limited to those instances of suspected maltreatment falling under the reporting line. Please keep this graphical representation in mind as the discussion proceeds.

Visualize the reporting pool with its descending line starting higher on the left and descending to the lower right. Note the line represents the proportion of reported, suspected instances of maltreatment. Now consider the number of children affected by maltreatment. Based on data from

the reporting pool and on the above noted assumptions, the number of affected children increases as the severity of suspected maltreatment decreases. As we move to the right in the graph, the number of children increases. There are a low number of maltreated children toward the left and increasingly more as the focus moves to the right.

Visualize the increase in the number of maltreated children as an increase in density. It is like the dots in a digital picture. Here, the dots are very scattered toward the left, becoming increasingly dense as one's perspective moves toward the right. There are only a few, widely separated dots at the extreme left and the view toward the extreme right is nearly solid. The same concept could be represented by a shift from nearly white on the left to nearly black on the right. Based on this conceptual framework, it is reasonable to assume at least as many, if not more, maltreated children fall above the reporting line as are captured within the reporting pool.

Now introduce the establishment of public policy and legislative action as they relate to maltreated children. As a matter of public policy, more severe instances of child maltreatment are clearly seen as contrary to the public interest. At the same time, less severe instances of child maltreatment are seen as not warranting governmental intervention. Using the graph introduced above, public interest includes only a portion of the reporting pool. At some point on the horizontal axis, insert a vertical line, with abuse and neglect toward the left of the line and all other maltreatment toward the right. The portion of child maltreatment under the reporting line and to the left of the vertical line just drawn represents child abuse and neglect and is the focus of public child protection activity.

As we can easily see, most child maltreatment falls outside of the abuse and neglect parameters. Further, the division between abuse and neglect on the one hand and all other maltreatment on the other hand is more correctly understood as a range as apposed to a clear boundary. The definitions of abuse and neglect are clear at the extremes; but as the incident shifts closer to "all other maltreatment," the boundary becomes fuzzy and open to judgment and interpretation by child protection workers. Whether a specific instance of maltreatment is classified as abuse or neglect may vary significantly from worker to worker, from place to place, and from time to time.

We may conclude from the above the reporting pool itself is a relatively closed structure excluding most maltreated children. Additionally, this closed structure has relatively fuzzy boundaries. The fuzziness exists between which incidents are referred into the reporting pool and which are not and which are classified as possible abuse and neglect and which are not. These fuzzy boundaries are, then, the primary focus for further legislative activity and public policy debate.

Toward An Open Structure Paradigm For Child Protection

Above, I described how the universe of abused and neglected children is limited to only a portion of maltreated children within any particular jurisdiction. Child protection is a closed structure including many maltreated children while excluding most others. This exclusion results from the report pool including only those maltreated children who come to the attention of a reporter and who are then actually reported to the child protection entity serving the jurisdiction. The report pool is further limited by the somewhat arbitrary definitions for abuse and neglect representing a

boundary between children included in the report pool and all other maltreated children who are consciously excluded.

Similar closed structures are seen in other areas of child protection practice. For example, consider the children who are judged to be “adoptable.” One might presume any child who has no available relative with whom to live is adoptable simply as a result of his (or her) not having an appropriate, permanent home with a member of his extended family. This is not the case. In particular, older children are likely to be excluded from the adoption pool and assigned to alternative custody arrangements. They are judged to be too old for adoption. These children grow up in foster care or in other impermanent settings. Unfortunately, this outcome is sometimes also seen for younger children.

Children with significant disabilities, behavior issues, developmental deficits, medical problems, and emotional difficulties are also frequently excluded from what we may refer to as the adoption pool. Other children who appear to be in the adoption pool are passively excluded due to the challenges associated with identifying appropriate families who might consider adopting the specific children. Children from minority groups are especially vulnerable to this type of exclusion. The result is an active adoption pool that effectively excludes more children needing permanent homes than it includes.

This traditional closed structure approach to serving maltreated children is present throughout child protection practice. Those maltreated children who come within the scope of child protection as a result of entering the report pool are further reduced through a screening process that reduces their number to those who are determined to be abused or neglected, using the current, fuzzy-edged definitions. Within the remaining group, children are categorized and sub-grouped in ways further restricting the services and opportunities to which they have access. Assuredly, many children fair well within this closed structure approach as they move from compartment to compartment within the overall structure. The dilemma relates to those maltreated children who are actively or passively excluded from the potential benefits of those services and opportunities from which they are excluded.

Traditional legislative and administrative responses to the challenges and negative outcomes for children usually focus on the weaknesses and shortcomings seen in the various elements and processes comprising the structure and sub-structures constituting child protection. Usually this leads to new or modified rules and procedures and often to significant finger pointing. Still, it is rather like trying to improve the functioning of a train. It may be possible to enable the train to run faster or more smoothly. Nonetheless, it is still a train and still must be contained to the track with each car following the one in front of it.

No matter how thoughtful the new rules or how enlightened the new procedures, child protection is a closed structure excluding many if not most maltreated children for reasons unrelated to what we know to be in their best interest, if we were clever enough and creative enough to get it right for each child in need of protective services. Clearly, the need is to transition from the traditional closed structure arrangements to an open structure capable of including all children in need of protective services and likewise capable of delivering the exact services and opportunities needed by each child, one child at a time.

Fortunately, there is some indication child protection is seriously entertaining the idea of open structures and is consciously moving in that direction. This is first appearing in relation to the screening activities mentioned above. There is serious discussion about moving away from classifying children as abused and neglected and simply viewing maltreated children as children in need of protective services. This may help with the fuzzy boundary restricting which maltreated children do and do not get into the report pool. It also may help with opening the fuzzy boundary between abused and neglected children and all other maltreated children discussed above.

Unfortunately, this does not address the fundamentally closed nature of child protection structures. Similarly, the current differential response (alternative response) initiative helps with the boundary issues but does not help much with the closed nature of the general structure. Further, the internal compartmentalization remains unchanged. The conceptual need is to transition the traditional closed structure paradigm to a paradigm whose structure is open, inclusive of all maltreated children, and fully capable of doing the right things right, the first time, on time, every time, for every child, one child at a time, with no child in need of protective services excluded for any reason.

Open Structures And Emerging Models Of Excellence

I have discussed the fundamentally closed nature of child protection's general structure and associated sub-structures. These structures are consistent with nearly exclusive reliance on prescriptive rules and procedures and on the bureaucracy used to organize and operate child protection. These aspects were discussed earlier. There, we saw how reliance on these traditional administrative constructs reinforces staff centered, program centered, agency focused practice. This traditional, closed paradigm effectively includes most (but not all) severely maltreated children and successfully keeps them from harm's way. However, it does not include most maltreated children; and for the children it does include, permanence and ongoing success are secondary considerations, if they are considered at all. The unconscionable number of children lingering in foster care is but one example of the paradigm's inadequacy.

I have also discussed the importance of incorporating permanence and ongoing success with safety as co-equal pillars of child protection practice. Merely keeping most severely maltreated children from harm's way is insufficient. All children, maltreated or not, deserve and must have permanent homes with nurturing and supportive families where their ongoing success is, to the extent possible, guaranteed. This cannot be achieved through continuing reliance on the traditional child protection paradigm, with its closed structures and sub-structures. A transition to an open structure paradigm is much overdue.

An important shift toward open structures begins with simply abandoning reliance on legislatively and administratively determined, prescriptive rules and procedures directing the behavior and actions of child protection workers. The traditional "We know better than you how to help the children and families with whom you work," mentality should be replaced with an "Any reasonable approach" mandate. Here, a "reasonable approach" is consistent with generally accepted practice standards, known best practice, and sound professional judgment in alignment with the judgments

of most other professionals with similar training and experience and in accord with well understood and accepted guiding principles underpinning practice.

Within these constraints, practice relies on clearly articulated outcomes and continuous invention of strategies individualized for specific children and families. Worker, program, and agency centeredness are replaced by child and family centeredness. The locus of services shifts to the community, as discussed earlier. Within this community focus, child protection relies on an integrated model of service delivery where virtual agencies are tailored to the individual needs and interests of specific children and families.

An example of a virtual agency approaching the integrated model suggested above has been functioning in Lorain County, Ohio for several years. The Juvenile Court along with the public child protection agency and the public mental health, substance abuse, and mental retardation and developmental disabilities agencies formed the Integrated Services Partnership (ISP). These public entities funded a services pool to pay for services for children experiencing more serious behavior and adjustment difficulties. The community, under the direction of the ISP governing group, formed the Children's Continuum of Care Committee (4C).

The 4C Committee functions as a clinical panel with full authority to work with the child and his (or her) family and to authorize any services or resources believed to be in the best interest of the child and his safety, permanence, and ongoing success. The panel includes representatives from the partner entities along with representatives from the schools and other community services entities. The services arrays are developed one child at a time and based exclusively on the judgments and experience of panel members and the special insights of the child and his family. The result is a virtual agency created to accommodate to the unique needs and interests of each child included in the ISP's operation.

The ISP has an additional feature of interest here. Although the partnership excludes most children in the County who need support and services since it only services more seriously maladjusted children who are also associated with one of the partner entities, the issue of whether the child is maltreated goes away. Some children served through the ISP have been maltreated and others have not. They are simply children in need of services, with full focus limited to developing the best services array for each child.

The ISP is an example of an integrated model with promise for all maltreated children in particular and all children in need of services more generally. For child protection, realizing the new vision starts with acknowledging the fundamental inadequacy of the traditional paradigm within which child protection is currently mired. The paradigm must shift to a child and family centered, community focused paradigm, relying on standards, best practice, professional judgment, and underpinned by generally accepted guiding principles for work with children and families. From there, we can pursue the serious business of creating strategies for realizing virtual agencies for every child needing services, based on open structures and emerging, integrated models of excellence.

Toward A Unified Commitment

Within the closed structure and associated sub-structures containing child protection I discussed earlier, joint action involving multiple sub-structures or compartments is both tedious and difficult. The challenge is striking at the lowest or most localized level and increases as one moves “up” to district, regional, state, and interstate levels. At a local level, the challenge is seen with departments or areas such as investigations, ongoing services, foster care, independent living, and so on. Each entity functions fairly autonomously and more or less independently. There are clear boundaries separating the functions and cooperative action requires a conscious effort to span those boundaries. The separation and boundaries are more pronounced and less permeable as one moves up to “higher” levels.

When spanning boundaries for cooperative action, each compartment or entity limits its actions to its usual function or activities. It does what it usually does. Spanning occurs for the sake of some shared client or interest. This traditional type of cooperation is usually referred to as “collaboration” and only serves to coordinate the activities of the collaborating entities. Within local agencies, this type of collaboration is typically governed by internal procedures. At higher levels or when the cooperation is between separate agencies, the collaboration is typically governed by contracts, memoranda of understanding, or informal, ad hoc arrangements. Additionally, collaboration is usually limited to a particular case, situation, or circumstance and is most often time limited. It serves a specific purpose and then stops. (Let me note in passing collaboration is usually between entities or individual workers at the same level but sometimes happens vertically, e.g., between state and county entities or between federal and state entities.)

In contemporary child protection practice, collaboration is the primary vehicle for cooperative action at every level. In vertical relationships, legal force, rules, and general coercion frequently “force” cooperation; but voluntary cooperation and collaboration are most common at all levels and particularly with same-level relationships. Due to the essentially voluntary and situational nature of collaboration, it tends to be dependent on the particular people who need to collaborate, on unrelated factors such as other demands on time and services, and on the level of specific interest of the collaborators or Management within their respective entities. Although collaboration usually works to a limited extent, it often fails, breaks down, or is not responsive to the unique circumstances or interests of a client or situation.

Collaborative arrangements as discussed above are often referred to as “partnerships” but are not. The identities and autonomy of the entities remain, as do the clearly defined boundaries between them. They continue to function as separate entities with separately defined functions. A partnership pools or combines specified resources from the partnering entities to form a new entity with its separate identity and function. It is a derivative entity clearly differentiated from the original partnering entities. The Integrated Services Partnership (ISP) discussed above is an example of a partnership as apposed to a collaborative arrangement.

The distinct advantage of a partnership vs. other collaborative arrangements starts with the partnership’s mission or purpose. Although the mission likely needs to be compatible with the purposes of the partnering entities, it can be shaped and tweaked to focus on a mutually agreed to problem or issue. The purpose of the partnership is compatible with but not the same as the purpose

of any of the partners. Given its related but separate purpose, the partnership can focus on the problem or issue with minimal consideration given to the interests of the individual partner entities. Within the partnership, personnel assignments, services, and resource allocation can be managed to optimize action targeted specifically to achieving the partnership's mission.

The evolution of the child protection paradigm is from traditional collaboration to the development of partnerships focusing on safety, permanence, and ongoing success for all of the community's children. If the paradigm is to continue its evolution toward excellence, the perspective shifts away from the partnering entities to children and families and in turn to the community and to integrated service models discussed above. Focus also shifts from abused and neglected children to maltreated children more generally to children in need of services whether maltreated or not. Within the community's children's safety net, there is a unified commitment of all participants to the well being and ongoing success of each of the community's children. The child's parents have the first level of responsibility for assuring their child's success and all agencies and services in the community are ready and committed to whatever is needed to support and backup the parents, with a unified commitment to each child's physical, emotional, moral, social, and intellectual success, through whatever means or arrangements necessary to meet this commitment.

Toward Values Centered Practice

I have discussed various dimensions of transition as the child protection paradigm shifts away from the traditional model relying on legislative and administrative command and control toward standards focused, best practice driven approaches, informed by generally accepted guiding principles. The transition is nowhere more evident than with how we determine practice effectiveness. In the traditional command and control structure, effectiveness is understood in relatively simplistic terms. There are complex, prescriptive rules and procedures child protection workers are expected to consistently follow. Compliance with this expectation is the primary if not exclusive measure of worker and program effectiveness. This approach is what is typically referred to as Quality Assurance (Q.A.). Perfect performance at the highest level of effectiveness is seen when workers' activities comply with all relevant rules and are consistent with all relevant procedures. If you do everything you are expected to do in the ways you are expected to do them, you are doing a good job.

The Q.A. paradigm was largely adapted from production or assembly environments where the goal is to produce uniform products or services. A child and his (or her) situation are first screened to determine general eligibility for child protection services. If determined eligible, the child and his family are then moved (assigned) to an appropriate service area for further processing. The movement from service area to service area continues until the child is moved out of the child protection environment, exiting based on which service area he was in at the time of exit. Even though individual workers may develop some attachments with the child, the child's movement from service area to service area and his eventual exit are primarily determined by eligibility rules for the various service areas and the established procedures for movement and exit.

There has been significant expansion beyond the traditional Q.A. approach to evaluating child protection effectiveness. Over time, it has become increasingly clear reliance on Q.A. is

insufficient. Even when there is high rule and procedure compliance, many children are still being harmed and child protection's legitimacy is suspect. Simply complying with established rules and procedures finds significant numbers of children no better off than they were before child protection involvement and others clearly less well off. This stark reality has prompted a transition from focus on compliance to focus on outcomes, on what really happens with children and their families.

This new focus starts with safety and expands to include permanence. (At this point, it has not yet expanded to embrace the ongoing success of children.) Are children being kept from harm's way and are they living in stable, nurturing families permanently committed to them and their welfare? The answer should be an unqualified Yes. There is a high level of consensus for the correctness of both the question and the desired answer. The point of child protection is to assure safety and permanence for all abused and neglected children.

Child protection is again adopting a strategy from elsewhere. It has incorporated Continuous Quality Improvement (CQI) into its conceptual understanding of practice. In the child protection variant on the strategy, a set of indicators is developed that are thought to be correlates of safety and permanence for children. For example, the frequency of re-maltreatment is understood as a correlate of safety. The lower the rate of re-maltreatment within a population of abused and neglected children, the safer the identified population is as a whole. By implication, agencies and programs showing lower re-maltreatment rates are more effective than those with higher rates. The children with whom they work are safer.

There are various sets of factors thought to be associated with better safety and permanence outcomes for children, although the most widely acknowledged set is the one used for the federal child and family services reviews. With that set as with others, child protection entities are rated using a percent strategy where each entity is given a score on each element in the set. For example, an agency's re-maltreatment rate might be 6%, meaning 6% of children served by the agency experience re-maltreatment within 6 months of the incident prompting initial agency involvement. Other rated elements include events such as movement while in out-of-home care, frequency of contact with families whose children were not removed, and the length of time between initial reports to the agency and the agency's first response.

With CQI, the goal is to improve the percentage of outcomes consistent with the presumed correlate of child safety and permanence. Although this approach does not relate specifically to best practice or how to achieve the desired outcomes, it clearly specifies what are thought to be best outcomes and fairly accurately measures the extent to which those outcomes are being achieved. For this reason, CQI is a major improvement over simple reliance on Q.A. as discussed above.

Although I am not aware of any agencies or programs that have achieved the next level beyond CQI, its nature is evident. Child protection must move beyond CQI to reliance on value based practice and on values that serve as both the prompts for action and the measure of effectiveness. For example, a fundamental value must mandate child protection do no harm. Children must never be worse off for having been served by a child protection agency or program. A child's experiencing re-maltreatment is always an indicator of child protection failure, even if he (or she) is the only child who is re-maltreated. Each child who is not currently safe or in a permanent family

where he is accepted and nurtured is the agency's immediate, highest priority; it is a crisis. The value is safety and permanence for each child, each time, immediately. Practice is then evaluated in terms of adherence to the value for every child, every time.

Toward Performance Based Services

In the traditional child protection paradigm, cost is the central criterion for most program and service decisions. There is a fixed funding level for each program. Within that allocation, a detailed budget covers direct, indirect, and overhead costs for the personnel and resources available to the program.

Within the budgeted limits, managers acquire goods and services from various departments and external sources, with cost being the primary selection factor. The result is an array of resources and personnel that collectively represent the capacity of the program. The per-child allocation for children assigned to the program then varies, depending on the number of children in the program at any specific time.

Cost also is a primary evaluative criterion for programs, services, and workers. Well-managed programs are those that stay within allocations, operate within the line item appropriations, and are in compliance with the rules.

The cost or resource requirement of a given program or service is the primary determinate of whether the program or service is available. Additionally, the choice of one service or another is largely based on cost. For example, when deciding which placement resource to use for a child, lowest cost is a major decision criterion.

As the paradigm transitions to the intermediate level, process has a higher priority than cost. In order to get a specified outcome for a child or group of children, a known services array needs to be present. For example, placement resources are judged in terms of the services array available for the children using the placement resource and how the services are delivered to the children. The availability and delivery of services represent the process aspect of the resource.

The process criteria need to be satisfied before cost becomes an issue. At a very simple level, a group of children may need mental health services to help with their behavior and emotional problems. Focusing only on cost leads to developing or acquiring mental health services delivered for a fixed per-child or per-hour cost. Focusing on process leads to identifying mental health professionals with specific credentials and expertise to deliver specified services to specific children to get pre-defined outcomes. Only when these process criteria are met is cost a consideration.

As the paradigm transitions to a more integrated level, the primary aspect of any program, service, or action is performance. Further, all decisions and actions are driven primarily by performance considerations before cost or process. Here, performance refers to whether services adhere to the shared value propositions, incorporate best practice strategies and protocols, and demonstratively assure safety, permanence, and ongoing success for each child served.

When the paradigm has fully transitioned, performance will be the primary consideration for all programs and services. Will the child or family be appreciably better off after receiving the service or participating in the program? Process consideration then asks, “Is the program or service delivered by appropriately qualified practitioners, delivering the right services to the right children and families?” Only then is “How much does it cost?” asked.

Toward Principle-based Practice

In the traditional, bureaucratically organized, closed structure child protection paradigm, actions and decisions are based on the authority of the individual taking the action or making the decision. This authority derives from the next level above the individual. Thus there is an authority hierarchy regulating and directing practice.

The local agency itself has authority that derives from state and federal laws and administrative code. The result is services are, for the most part, based on rules and the associated authority derived from those rules.

As the paradigm expands into the intermediate level, action is based on assessment and planning. The expansion is from what is supposed to happen to what needs to happen, from how it is supposed to be done to how to achieve the desired outcomes.

When action is based on assessment and planning instead of rules and authority, the associated behavior and actions are less predictable and less consistent. There is also more variability from location to location and from worker to worker. The outcomes for individual children, then, may be better or worse, depending on which local agency provides the needed services and which worker is providing the services. This lack of services equity has to be weighed against the improved outcomes for some but not all children.

Practice expands in the advanced child protection paradigm beyond the authority derived from rules and hierarchical structures, beyond assessment and planning. Rights and responsibilities represent the authorizing structure for practice. Both agencies and workers are extended rights, including the right to deliver defined services to specified clients. These rights are typically conveyed as licenses, accreditations, or certifications issued by units of government or professional organizations. These rights are accompanied by responsibilities including minimum professional qualifications, ethics requirements, and practice standards. Specific rules and outcomes represent the contextual environment for principle-based practice.

The authority derived from organizational position and from associated rules and procedures expands to incorporate practice and associated activities primarily authorized through assessment and planning with specific children and families. It then proceeds as directed and constrained by the rights and responsibilities of both the clients and the workers.