**What Do We Mean by “Integration” Relative to California’s Core Practice Model (CPM)?**

With child welfare agencies managing many initiatives and mandates, efficiency and effectiveness become critical. The complexity facing agencies requires a “core” value base that translates into clear behavioral expectations that are proven, through research evidence, to achieve better system, agency and population outcomes (e.g., safer children, fewer out of home placements, fewer traumatic injuries, lower staff turnover, higher morale, stronger staff-family-child relationships, etc.).

Although it can seem so, the CPM is NOT the next thing to layer onto a child welfare organization’s set of programs or services. The CPM arose from thoughtful design via California’s child welfare directors. It is a grassroots product. It was (and is) seen as essential to standardizing the values and behaviors at every level in an agency to improve a broad range of outcomes. CPM is designed to undergird the leadership and practice essentials which drive the executive, cross-system and day-to-day functioning of an agency. Integrating the CPM occurs through learning, installing, practicing and recognizing the strengths-based leadership and practice behaviors at every level in the agency. The CPM, integrated in this way, overtly and subtly shapes the “how” of an agency’s culture. The CPM then becomes foundational for taking on all new initiatives or mandates.

**DEFINITION: CPM INTEGRATION INTO COUNTY CHILD WELFARE AGENCIES**

Integration means leaders adopting and using the CPM’s leadership and practice behaviors in the agency’s administrative/executive, day-to-day, and cross-agency functions to fully implement the CPM in alignment with other required or desired initiatives. The CPM becomes the language, pulse, culture and observed behaviors of administrators, managers, supervisors and staff members. Laying a solid CPM foundation within each child welfare agency, leaders and staff incorporate the leadership and practice behaviors to navigate all other challenges such as accomplishing implementation of other mandates (or initiatives) such as the CANS, SOP, Partners for Permanency, Child and Family Teams, Wraparound, etc. Implementation is the installation of the structures, processes, and systems that can fully support and account for CPM within an agency. See diagram below:
One parallel way to think about this: if a person moves to another country, one of the first tasks facing them would be to become proficient in the new language (if different than English). The new language helps achieve all kinds of next steps – some very basic and short term (e.g., getting around, establishing a home and safety, figuring out subsistence), while others might be longer term (finding and succeeding in work, perhaps engaging in educational or vocational training, integrating into a new culture). So, imagine the CPM as that new proficiency that leaders and staff can acquire to open a whole new world of opportunities. The “language” of CPM then enables you to accomplish the implementation of other work.

**More about the difference between CPM integration, and CPM implementation:**

Integration happens at the agency’s leadership and business practices level. Implementation occurs because of the adoption and intentional integration of the CPM as a *key leadership/management priority for the agency*. Once integrated into the leadership/management philosophy, the work of implementation (of any initiative) begins.

**In concrete terms, integration may look like:**

- Directors assemble their management teams to discuss and consider the benefits of CPM
- Directors lead, facilitate and/or experience a values-based discussion highlighting the leadership and practice behaviors as preferred strategies to achieve the agency’s goals
- Directors/leaders/managers jointly explore the CPM tools and website to see what resources exist and begin planning for implementation
- Discuss how the CPM aligns with, forms the foundation of, and supports ongoing implementation infrastructures for other initiatives to fully ensure efficiency and effectiveness
- Directors/leaders schedule and participate in a locally contextualized “CPM Snapshot” assessment, and use results to consider specific priorities and steps needed toward implementation – also considering how CPM informs the work of installing other required initiatives or mandates
- Discuss and formally allocate a design team of key stakeholders, subject matter experts to guide the agency in full implementation activities – and consider the staging of implementation in ways that complement and enhance their organizations (with teams, discuss schedules, training, support practices, etc.)
- Begin to set a course for management and implementation processes, *ensuring that only manageable and reasonable activities are prioritized in service to all mandates*

**Implementation of the CPM at leadership/management levels can look like:**

- **Directors, administrators, managers and supervisors use the leadership behaviors (engagement, inquiry/exploration, advocacy, teaming and accountability) to create the structures, teams and strategies within an agency to get the work done – on any task or project.** For example:
  - An implementation team is formed (and sanctioned by leadership) with dedicated time and resources to fully support CPM implementation – full CPM implementation allows for parallel or future implementations of other initiatives and mandates
  - Directors identify and resource processes specifically focusing on building the work teams, communications tools, training schedules and calendars, and other practices that enable the CPM (and/or other initiative) to fully saturate the agency consistent with requirements and goals
  - Leadership engages in a values discussion at all levels to set the environment for CPM implementation, acknowledging 4 key areas of work: Organizational readiness building, Quality and outcomes for system improvement, Workforce development, and Engagement, relationships and partnership
  - Build management schedules so that the leadership behaviors guide *how teams are formed*, who becomes part of which teams, setting agendas that call out leadership behaviors and recognize them when they occur, highlight use of the CPM behaviors to hold teams accountable for meeting and/or task outcomes.
Implementation of the CPM at staff levels can look like:

- Staff implementing the Core Practice Model begin by focusing on the practice elements (engagement, inquiry/exploration, advocacy, teaming, accountability and workforce development and support) to guide the “how” of integrating the practice behaviors into each work function. Examples might include:
  - Staff use supervision and peer conversations to role model, practice Child and Family Team interactions that “lift up” (highlight) positive engagement in the assessment, service planning, collaboration and transition portions of their work
  - Staff use post-training case experiences to specifically focus on “doing” CPM through intentional affirming, listening, validating, reinforcing client and family strengths in all interactions
  - Staff “check” each other through active listening, observation and feedback on staying culturally sensitive and humble as child and family diversity issues arise
  - Staff may schedule periodic peer-led in-service, “brown bag” or “lunch and learn” events to discuss how the practice elements are being seen and reinforced in the work place
  - Staff may develop simple checklists or job tools/aids to have on their desktops or notebooks as reminders to use and reinforce the CPM’s practice behaviors
  - Staff assemble and begin to use tools for advocacy on behalf of their clients to managers/supervisors and agency leaders as well as cross-system partners and communities
  - Staff actively seek feedback from children, youth and families about their engagement, teaming, advocacy and transition behaviors in order to authenticate as well as validate client partnerships in the work
  - Staff work with supervisors and managers to discuss and install team structures, processes and opportunities to share practice-based AND CPM implementation experiences with leadership in formal feedback loops (cross-agency communications and continuous learning)

Implementation of the CPM at cross-agency levels can look like:

- Managers, supervisors and staff collaboratively work to intentionally explore where the CPM practice behaviors fit and are feasibly applied in such circumstances as Child and Family Teams, weekly staff meetings, team decision-making meetings, exploration/assessment interactions (e.g., CANS) with clients and caregivers
- Staff consult with supervisors and peers as to how to intentionally observe and document CPM practice behaviors in ‘live’ situations, in order to reinforce their use during various interactions with peers, supervisors and agency leadership
- Managers, supervisors and staff specifically schedule meetings to align CPM integration into other programming and initiatives, avoiding duplication in schedules, agenda items, training, supervision/coaching, or other routine agency processes
- Staff work with supervisors and managers to co-create and design continuous learning data systems to ensure that measuring and observing CPM is as efficient, user-friendly, and low burden as possible
- Staff collect stakeholder comments/feedback and communicate implementation and integration benefits and challenges to supervisors, managers and leaders to ensure cross-agency integration of performance feedback
- Managers and agency leadership work with supervisors and staff to find protected time to support workforce development activities (coaching, CPM-specific supervision and feedback, peer supports for CPM use and integration) – this ensures that practitioner support is protected and nurtured by the agency; practitioners and supervisors feed back workforce and practitioner issues as part of ongoing continuous learning and quality enhancement
- Agency leaders, supervisors and staff collaborate to identify where intra- and interagency partnerships can be built or enhanced to strengthen CPM integration and practice behavior delivery