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10.2 Vision And Mission Statements

Practice Guidelines

A. Vision Statement:

The Vision Statement of Child and Family Services is:

Safe Children, Strengthened Families

B. Mission Statement:

The Mission Statement of Child and Family Services is:

To keep children safe from abuse and neglect and provide domestic violence services by strengthening families and working with communities.

10.3 Practice Principles, Skills, And Standards

Major objectives:

Child and Family Services staff will provide programs and services in a manner consistent with the following fundamental principles and values. To enable caseworkers to help families meet their permanency, protection, and well-being goals, Child and Family Services provides a flexible organization that encourages team members to apply persistent effort, devise creative solutions, and do what is needed to provide effective services to the children and families they serve.

Applicable Law

Utah Code Ann. [§62A-4a-105](#). Division responsibilities.

Practice Principles

A. Principle One - Protection. Children's safety is paramount; children and adults have a right to live free from abuse.

B. Principle Two - Development. Children and families need consistent nurturing in a healthy environment to achieve their developmental potential.

C. Principle Three - Permanency. All children need and are entitled to enduring relationships that provide a family, stability, belonging, and a sense of self that connects children to their past, present, and future.

D. Principle Four - Cultural Responsiveness. Children and families are to be understood within the context of their own family rules, traditions, history, and culture.

- 56 E. Principle Five - Partnership. The entire community shares the responsibility to
57 create an environment that helps families raise children to their fullest potential.
58
- 59 F. Principle Six - Organizational Competence. Committed, qualified, trained, and
60 skilled staff, supported by an effectively structured organization, helps ensure
61 positive outcomes for children and families.
62
- 63 G. Principle Seven - Professional Competence. Children and families need a
64 relationship with an accepting, concerned, empathetic caseworker who can
65 confront difficult issues and effectively assist them in their process toward
66 positive change.
67

68 Practice Skills

69 Key practice skills have been formulated from the Practice Model Principles to "Put Our
70 Values Into Action." Practice Model related training will provide for the development of
71 these practice skills. Basic skills include:

- 72
- 73 A. Engaging. The skill of effectively establishing a relationship with children,
74 parents, and essential individuals for the purpose of sustaining the work that is to
75 be accomplished together.
76
- 77 B. Teaming. The skill of assembling a group to work with children and families,
78 becoming a member of an established group, or leading a group may all be
79 necessary for success in bringing needed resources to the critical issues of
80 children and families. Child welfare is a community effort and requires a team.
81
- 82 C. Assessing. The skill of obtaining information about the salient events that brought
83 the children and families into our services and the underlying causes bringing
84 about their situations. This discovery process looks for the issues to be
85 addressed and the strengths within the children and families to address these
86 issues. Here we are determining the capability, willingness, and availability of
87 resources for achieving safety, permanence, and well-being for children.
88
- 89 D. Planning. The skills necessary to tailor the planning process uniquely to each
90 child and family. Assessment will overlap into this area. This includes the design
91 of incremental steps that move children and families from where they are to a
92 better level of functioning. Service planning requires the planning cycle of
93 assessing circumstances and resources, making decisions on directions to take,
94 evaluating the effectiveness of the plan, reworking the plan as needed,
95 celebrating successes, and facing consequences in response to lack of
96 improvement.
97
- 98 E. Intervening. The skills to intercede with actions that will decrease risk, provide for
99 safety, promote permanence, and establish well-being. These skills continue to

100 be gathered throughout the life of the professional child welfare caseworker and
101 may range from finding housing to changing a parent's pattern of thinking about
102 their child.

103
104 Practice Standards

105 Following are general practice standards that cross program boundaries. Together with
106 practice principles and skills these standards will help caseworkers understand their
107 roles and responsibilities. Standards will give guidance to caseworkers as they provide
108 services and strive to achieve safety and permanence for each child and family member
109 they help.

110
111 Child and Family Services is a trauma informed agency that provides trauma informed
112 care. Trauma informed care requires an organizational framework that involves
113 understanding, recognizing, and responding to the effects of all types of trauma.
114 Trauma informed care also emphasizes physical, psychological, and emotional safety
115 for children, families, staff, and providers, and helps those recovering from trauma build
116 a sense of control and empowerment.

- 117
118 A. Service Delivery Standards.
- 119 1. Children and families will receive individualized services matched to their
120 strengths and needs as assessed by the Child and Family Team.
 - 121 (a) Prevention services help resolve family conflicts and behavioral or
122 emotional concerns before there is a need for the family to become
123 deeply involved in the child welfare system.
 - 124 (b) In a family where abuse has already occurred, interventions will be
125 developed with the goal of preventing any future incidents of abuse.
 - 126 2. Services provided to children and families will respect their cultural, ethnic,
127 and religious heritage.
 - 128 3. Services will be provided in the home-based and neighborhood-based
129 settings that are most appropriate for the child or family's needs.
 - 130 (a) Services will be provided in the least restrictive, most normalized
131 setting appropriate.
 - 132 4. Meaningful child and family participation in decision-making is vitally
133 important, and all children and family members will have a voice (as
134 developmentally appropriate) in influencing decisions made about their
135 lives, to the level of their abilities, even when specialized communication
136 services are required.
 - 137 (a) Children and families will be actively involved in identifying their
138 strengths and needs, and in matching services to identified needs.
 - 139 5. In whatever placement is deemed appropriate siblings should be placed
140 together. When this is not possible or appropriate, siblings should have
141 frequent opportunities to visit each other.
 - 142 6. When an out-of-home placement is required, children should be placed in
143 close proximity to their family with frequent opportunities to visit.

- 144 7. When children are placed in an environment outside of their parent's
145 home, they must be provided with educational opportunities and, where
146 developmentally appropriate, vocational opportunities with the goal of
147 becoming self-sufficient adults.
- 148 8. Children receiving services will receive adequate, timely medical and
149 mental health care that is responsive to their needs.
- 150
- 151 B. Standards Relating to Child and Family Teams.
- 152 1. Working within the context of a Child and Family Team is the most
153 effective way to identify and provide services to children and families.
- 154 2. Whenever possible, critical decisions about children and families, such as
155 service plan development and modification, removal, placement, and
156 permanency, will be made by a team to include the child and his or her
157 family, the family's informal helping systems, out-of-home caregivers, and
158 formal supports.
- 159 3. Child and Family Teams should meet face-to-face periodically to evaluate
160 assessments, case planning, and services delivered, and also to track
161 progress. When there are domestic violence issues, separate Child and
162 Family Team Meetings may be held (refer to Domestic Violence Practice
163 Guidelines [Section 600](#).)
164
- 165 C. Standards Relating to Assessments.
- 166 1. Strengths-based assessments should be produced with attention to:
167 (a) The family's underlying needs and conditions.
168 (b) Engaging the family in developing interventions that address the
169 threats of harm, the protective capacities of the family, and the
170 child's vulnerability.
171
- 172 D. Standards Relating to Planning.
- 173 1. Children and/or their family members will be involved in the planning
174 process. The plan will be adapted and changed as the case evolves. The
175 Child and Family Plan:
176 (a) Incorporates input from the family, formal, and informal supports.
177 (h) Identifies family strengths.
178 (b) Utilizes available assessments.
179 (c) Identifies services that address the family's needs and includes
180 specific steps and services that assist the family in achieving
181 safety, permanency, and the child's well-being.
182 (e) Anticipates transitions.
183 (f) Addresses safety for both child and adult victims.
184 (g) Identifies permanency goals, including a concurrent permanency
185 goal and plan.
186

10.4 Adherence to Confidentiality

Major objectives:

Child and Family Services will work to ensure that the confidentiality of children and families is protected. Staff will ensure that the identity and identifying factors related to a child or family is not revealed to anyone that is not eligible to receive this information through appropriate releases of information, court involvement, or Government Records and Management Act (GRAMA) guidelines.

Practice Guidelines

Adherence to confidentiality when working with families is imperative in child welfare cases. The Department of Human Services (DHS) receives and generates a variety of information while providing services to clients. Some of this information to which employees, contractors, and others may have access, through their relationship with Child and Family Services and access to SAFE, will be classified as confidential, private, controlled, or protected. Such information must be handled according to the laws governing its classification. The DHS Code of Ethics promotes ethical behavior and the obligation to protect the rights of clients, the public, and other employees while exhibiting exemplary behavior as a state employee. (DHS Code of Ethics can be found in the DHS Policies located at <http://www.hspolicy.utah.gov>.)

- A. Employees should work diligently to protect information that may reveal the identity of the client and/or family, or the involvement of Child and Family Services in relationship to the client and/or family.
- B. Child and Family Services works within the context of a team. Confidentiality needs to be discussed with the family from the beginning of the case, particularly when a Child and Family Team is being developed. Confidentiality forms (CFA02 in SAFE) should be used when meeting as a team.
- C. Confidentiality is breached when any information is revealed to a third party that leads the third party to deduce the identity of the client and/or family, except in CPS cases as provided in [subsection 10.5](#). This may be done through the direct disclosure of the name of the client and/or family or by simply providing enough information about the client's age, gender, vocation, etc. that would lead one to presume the client's identity. This breach in confidentiality may occur by directly relaying information to the third party or by having a third party unintentionally hear information related to a client and/or family. The potential for unintentionally revealing the identity of a client may vary depending upon location of the conversation, people within close proximity of the conversation, or details of the client's life or family composition.

- 229 D. Employees should not reveal the existence of a case, nor other identifying
230 information, without first identifying the person to whom they are talking with and
231 determining if that person is eligible to receive any information related to the
232 case.
233
- 234 E. Employees may not use their governmental access to database information for
235 personal use. Employees may only access information that is needed to
236 complete their job assignment.
237

238 **10.5 Confidential Information, Community Partners, and** 239 **Collateral Contacts**

240
241 During the course of a Child and Family Services case, it is often important to share
242 information with community partners. These guidelines outline to whom and under what
243 circumstances information may be released. These guidelines pertain to all records,
244 papers, files, letters, plans, photographs, films, tape recordings, electronic data, or other
245 communications that are produced, developed, managed, or maintained by Child and
246 Family Services, its employees, or contracted providers.
247

248 Child and Family Services employees may disclose confidential information when the
249 disclosure is necessary to prevent serious, foreseeable, and imminent harm to a client
250 or other person. In addition, an employee may contact law enforcement to make a
251 report when a crime has been committed. Employees should disclose the least amount
252 of confidential information that is necessary to achieve the desired purpose.
253

- 254 **A.** Child and Family Services caseworkers may disclose certain information in order
255 to aid in an investigation of child abuse, neglect, or dependency (Utah Code Ann.
256 [§62A-4a-412](#)). In addition, those people participating in good faith and assisting
257 a Child and Family Services caseworker are immune from liability (Utah Code
258 Ann. [§62A-4a-410](#)).
259
- 260 **B.** Child and Family Services caseworkers may identify themselves to a collateral
261 contact that may have relevant information relating to an investigation of abuse,
262 neglect, or dependency. The employee should not reveal the nature of the
263 investigation or offer information about the family. However, the employee may
264 ask questions that allow the third party to provide pertinent information for the
265 investigation. Examples of these types of collateral contacts include, but are not
266 limited to, neighbors, landlords, friends, relatives, clergy, co-workers, and
267 employers.
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- 269 **C.** Child and Family Services caseworkers may identify themselves at a school or
270 other setting in an attempt to gain access to an alleged victim or child client for
271 the purpose of investigation or to determine whether the child is safe.

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- D. Release of confidential information to members of a Child and Family Team may be appropriate in order to meet the needs of the family. Disclosure of information should be discussed with the family before the meeting. Only information that is directly relevant to the purpose of the meeting should be revealed. Members of these teams or committees should be advised that the information shared should remain confidential. Members of the team are encouraged to sign a confidentiality agreement.
 - E. Information may be released to the regional screening committee as needed after committee members have signed a confidentiality agreement.