

Protective Capacity Progress Assessment Process

Role...Scheduling...Guidelines

October 2010

Introduction

This month we continue with more information about the Protective Capacity Progress Assessment (PCPA). The PCPA is the assessment that measures progress toward achievement of goals in a case plan. It is an assessment required by the Adoption and Safety Families Act. It focuses on progress and change related to enhancing diminished caregiver protective capacities. The PCPA also evaluates the status of impending danger and the effectiveness of safety plans. During this assessment, adjustments to a case plan are considered as well as caregiver participation and service provision effectiveness. With respect to safety management, it is during the PCPA event that reunification is considered when the safety plan is out-of-home placement. The PCPA occurs as an evaluation event every 90 days following the implementation of a case plan. However, the PCPA occurs in relation to a process of case management that connects the PCPA events. The PCPA process is the means for maintaining case management and safety management. So, the PCPA process is intended to result in an official and a structured evaluation, planning and decision making event for helping caregivers move forward in making necessary changes.

This article provides you with content related to the PCPA process including your role as the ongoing Child Protective Services (CPS) case manager; considers scheduling as a dynamic intervention decision; and provides guidelines for practice.

The PCPA and Your Role

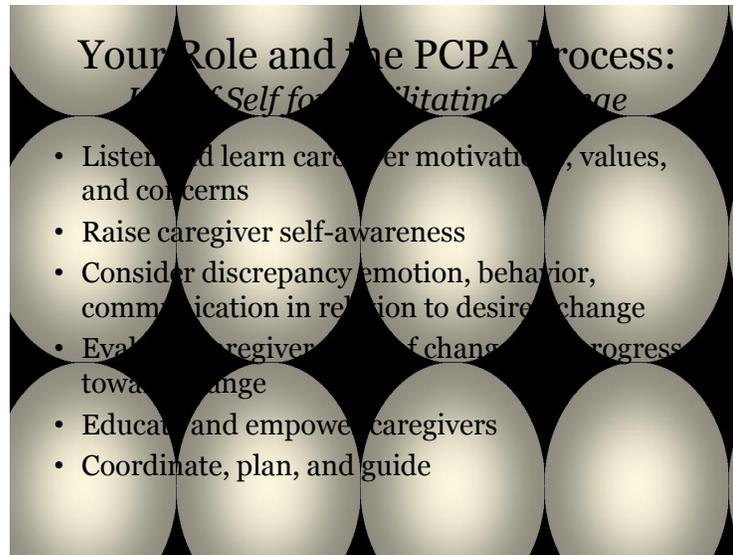
What do you perceive to be your fundamental role when meeting and working with families on a monthly basis? It may be to make sure that families are following through by participating in services or that the services families are receiving are effective. It may be that you see your role as helping families/caregivers to change. Depending on how you view your role and intentions, consider this quote:

*It is the truth we ourselves speak rather
than the treatment we receive that heals us.*

- O. Hobart Mowrer (1966)

With respect to CPS, this quote stimulates a question for ongoing CPS case managers. Is caregiver change externally driven or internally motivated through self-determination and personal choice? Traditional case management in CPS including the case plan evaluation event has tended to focus on the external drivers (treatment services rendered and caregiver compliance) for change as the primary emphasis of discussion during worker-caregiver interactions. The PCPA shifts the focus of your role to interact with caregivers in ways which concentrate on a caregiver's internal motivation associated with behavioral change.

It is crucial that you realize and accept that how you perceive your role when interacting with caregivers is what is most important for effectively conducting the PCPA. The quality of the worker-caregiver interaction is what is most defining with respect to facilitating change. Let's take a look at what you do within your role and how you use yourself.



Caregiver autonomy, perception, and choice are central to the process for facilitating change. Monthly contacts and the PCPA provide a crucial opportunity for caregivers to voice their opinions which enable them to remain actively involved in case decision making. The more informed you are regarding a caregiver's values and concerns the better able you will be to facilitate (motivate) change. It is likely that many, if not most, caregivers will enter into case planned services still ambivalent (i.e., contemplation stage of change¹) about the need for change. So, monthly contacts during the PCPA process are an opportunity for you to use yourself to continue supporting and facilitating movement beyond ambivalence to commitment to change. During the PCPA process, you can interact with caregivers in ways that promote caregiver self-determination and seek to raise caregiver self-awareness and create discrepancy in the status quo and the perceived need for change.

A Dynamic Intervention

The PCPA process can be a dynamic intervention. Scheduling the PCPA event can be part of that intervention. It works because the *Rule of Feedback* applies. We've mentioned (as a sort of minimum standard) that the PCPA is to occur

¹ Di Clemente, et.al. (1992) Stages of Change: Pre-contemplation/denies; Contemplation/discusses; Preparation/plans; Action/acts; Maintenance/maintains

every 90 days following the development of a case plan. But don't you think that the most effective facilitation will occur in relationship to what is happening between you and a caregiver as a determining influence about when a PCPA event would be most beneficial? So, you are encouraged to think of the PCPA process and evaluation event as a dynamic intervention. In other words, you can think less bureaucratically ("Oh, it's time to conduct a PCPA.") and more facilitative ("What is happening in our interaction and with the caregiver could be positively influenced by a PCPA.") As a dynamic intervention, the determination of when a PCPA needs to be completed can be based on specific intervention issues associated with case status and case progress. Can you see that by using the PCPA event in a purposeful way to facilitate change with caregivers who are stuck or ambivalent or maybe slowly beginning to take steps toward change, it can be an opportune time to schedule a PCPA in order to provide caregivers with feedback which can keep movement forward?

The *Rule of Feedback* refers to the acknowledgement that change and progress toward change can be effectively reinforced when a caregiver gets information (e.g., observations, opinions, criticism, praise, reinforcement, clarification, encouragement) about how he is doing. The *Rule of Feedback* operates within a context of timing. The closer the feedback to a caregiver is to indications of progress, or lack thereof, the greater value it will serve.

But there are other prompters that can influence a decision to schedule a PCPA. You can consider the following case circumstances when deciding if it's time to get people together for a PCPA event:

- At the request of the caregivers, age-appropriate children, or individuals involved in the case as safety service providers or treatment service providers;
- When significant changes in family members' and/or family circumstances warrant review and possible revision;

- When information comes to light raising questions about the sufficiency of safety plans or the quality of treatment service provision including the presence of barriers, interpersonal conflicts, or other safety management or case management challenges;
- When there are possible changes or newly emerging impending danger threats;
- When safety management has resulted in a decision to remove a child from home;
- When there is an emergency change in a child's out-of-home safety plan placement;
- When a change in a child's out-of-home safety plan placement is anticipated;
- When considering reunification;
- When the children and/or caregivers are making little or no progress toward the established goals and/or an immediate change in the case plan seems indicated;
- After any review (i.e., judicial, administrative, State, or county QA) recommends or directs that changes be made; and
- When considering case closure.

PCPA Process and Practice Guidelines

These guidelines contain assessment content areas and data sources that you consider as you proceed through the PCPA process. As you review the guidelines, remember it is important to understand that the amount of contact with caregivers is predicated on what you want to achieve as a result of the contact. The practice guidelines refer to “acceptable contact” and “reasonable contact” meaning acceptable or reasonable amount of contact to achieve facilitative objectives. When you are meeting with caregivers on a monthly basis or more frequently, your primary objective is to assist caregivers in moving through the stages of change and progressing toward goal achievement. You can also attend to ongoing safety management responsibilities related to evaluating the

sufficiency of in-home safety plans, overseeing and coordinating visitation, and/or managing out-of-home safety plans (placements). Of course you want to maintain regular contact with children both in the home (in-home safety plan) and in care (kinship or placement) to assure safety plan sufficiency. Those contacts always take into account whether the needs of children are being met. Contacts with treatment services providers should focus primarily on caregiver progress being made toward goal achievement.

Again, the accumulation of information obtained during your monthly contacts is used to decide about the timing of a PCPA event and to inform the PCPA event (which can occur any time but at least every 90 days). The PCPA event consists of three meetings that occur: Initial PCPA Meeting, PCPA Status and Decision-Making Meeting, and PCPA Conclusion Meeting.

**Protective Capacity Progress Assessment
Practice Guidelines**

Process	Information Sources	Facilitative Objectives and Assessment Content
<p>Monthly Contact</p>	<p align="center">Caregivers</p> <p><i>You maintain acceptable amount of contact with caregivers to reinforce working relationship and facilitate change</i></p>	<ul style="list-style-type: none"> • Reinforce engagement and collaboration • Support Caregiver Self-Determination • Accurate perception of conditions resulting in Impending Danger • Emphasize what must change related to diminished Caregiver Protective Capacities • Encourage accurate perception, agreement, and/or continued commitment regarding Goals for Change (enhanced Caregiver Protective Capacities) • Support caregiver involvement in addressing and meeting the needs of children • Address caregiver motivational readiness for change • Assess the sufficiency of in-home safety plans • Consider the potential for a less intrusive safety plan • Consider the need to step up the level of intrusiveness of the safety plan
<p>Monthly Contact</p>	<p align="center">Children</p> <p><i>You maintain acceptable amount of contact to effectively manage child safety</i></p>	<ul style="list-style-type: none"> • Assess child safety • Elicit impressions from children regarding safety plan sufficiency • Assess the needs of children

	<i>and assure the needs of children are met. It is important that contact with children coincide with the scheduling of the PCPA event</i>	<ul style="list-style-type: none"> • Consider progress being made in addressing the needs of children
Monthly Contact	<p>Treatment Service Providers</p> <p><i>You maintain reasonable contact with treatment service providers to facilitate change</i></p>	<ul style="list-style-type: none"> • Consider the effectiveness of the approach to change oriented service provision • Evaluate efforts made by change service providers to address goals • Evaluate efforts being made by caregivers to address case goals • Evaluate caregiver participation in change oriented services • Consider barriers to service provision and/or barriers to change • Elicit feedback regarding changes that might influence safety plan sufficiency
Monthly Contact	<p>Safety Plan Service Providers</p> <p><i>You maintain an acceptable amount of contact with safety plan service providers to assure continued safety plan sufficiency</i></p>	<ul style="list-style-type: none"> • Evaluate changes that could influence the sufficiency of safety plan • Verify the amount and frequency of safety services • Determine continued commitment of safety plan service providers • Consider the need for adjustment to the safety plan

PCPA Event <i>Minimum Every 90 Days (post case plan implementation)</i>		
Initial PCPA Meeting	Caregivers <i>The preliminary discussion with caregivers is intended to prepare them for the PCPA Status meeting. The Initial PCPA meeting will involve you and caregivers sharing your impressions regarding case progress, areas of agreement and disagreement, and reviewing agenda items for the team status meeting</i>	<ul style="list-style-type: none"> • Discuss purpose for the PCPA • Review of goals for change • Caregiver’s acceptance and/or commitment regarding goals for change • Review of change service provision • Discuss caregiver’s participation in case plan service provision • Exchange perceptions/observations regarding progress toward enhancing diminished Caregiver Protective Capacities • Evaluate status of Impending Danger and discuss safety plan sufficiency • Determine individuals who will participate in the PCPA Status Team Meeting • Review the agenda for the PCPA Status Meeting
PCPA Status Meeting	Caregivers Treatment Service Providers Safety Plan Service Providers Children (as appropriate) <i>Upon the determination of who will attend PCPA event, you inform participants, complete arrangements for the meeting, provide necessary information relevant to conducting the meeting, and make</i>	<p>Meeting objectives include reaching conclusions regarding the following:</p> <ul style="list-style-type: none"> • Effectiveness of the case plan; • Sufficiency of the Safety Plan; • Progress toward achieving case plan goals; • The need for revising the Safety Plan; • The need for revising the case plan.

	<p><i>other arrangements for the meeting as required</i></p>	<p>Specific discussions should include:</p> <ul style="list-style-type: none"> • Status of impending danger safety influences; • Progress in enhancing caregiver protective capacities; • Existing caregiver protective capacities that support change; • Specific indicators for measuring observable behavioral change; • Progress in achieving conditions for return (reunification); • Safety planning analysis related to the least intrusive provision of protection and the sufficiency of safety plans; • Caregiver motivational readiness; • Caregiver participation in case plan service delivery; • Addressing child needs; • Anticipated date by which the child will return home or achieve another identified permanency goal; and
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		<ul style="list-style-type: none"> • Effectiveness of case plan services and verification that case plan services are occurring as directed.
PCPA Conclusion Meeting	<p style="text-align: center;">Caregivers</p> <p><i>You follow up with caregivers to debrief the PCPA Status Meeting and review revisions to the safety plan and the case plan as applicable</i></p>	<ul style="list-style-type: none"> • Review the conclusions regarding the status of progress related to enhancing caregiver protective capacities • Discuss and confirm revisions to the safety plan. If the PCPA resulted in a determination to proceed with reunification, begin planning when and how the reunification process will occur • Discuss and confirm revisions to the case plan • Emphasize how revisions to the case plan are intended to address goals for change • Seek and/or renew a commitment from caregivers to actively participate in change oriented services