



Capacity Building
CENTER FOR STATES

Defining Quality Contacts

Good child welfare practice relies on quality contacts between caseworkers and children, youth, parents, and resource parents (foster parents and other caregivers). Moreover, quality contacts ensure child safety, support permanency planning, and promote child and family well-being. Developed by the Capacity Building Center for States (the Center) as a suite of products and learning tools, **Quality Matters: Improving Caseworker Contacts With Children, Youth, and Families** supports public child welfare agencies and contracted service providers in conducting quality contacts. This issue brief—the first product in the suite—provides a foundation for understanding what quality contacts are, what they look like, why they are important, and how a child welfare agency can set the stage for their successful implementation.

What Are Quality Contacts?

Definition

Quality contacts are . . .

Purposeful interactions between caseworkers and children, youth, parents, and resource parents that reflect engagement and contribute to assessment and case planning processes. These face-to-face interactions often are referred to as “home visits” or “caseworker visits.”

Core Components and Characteristics of Quality Contacts

As a cornerstone of casework practice, quality contacts reflect a focused exchange of ideas and information (Atif & National Resource Center for Child Protective Services, 2010). These contacts should go beyond a “friendly visit to chat about how the kids are doing” and represent a professional consultation (National Resource Center for Family-Centered and Permanency Planning, 2008).

Quality contacts incorporate the following components:

- **Preparation and planning** tailored to the specific circumstances of the child or youth and family
- **Assessment** of:
 - Safety, risk, permanency, and well-being
 - Progress toward individual case goals
- **Engagement** of children, youth, parents, and resource parents by the caseworker through use of empathy, genuineness, and respect
- **Dialogue** that values the youth and parent voice and promotes reflection on strengths, needs, and concerns
- **Follow-up** on tasks or concerns discussed previously (this may include difficult conversations about why certain things did not happen as planned)

- **Decision-making and problem solving** to address needs and move the case plan forward
- **Documentation** to support monitoring and follow-up

Federal, State, and local guidelines establish a foundation for a quality contact, while attributes of good casework practice are demonstrated throughout. Exhibit 1 highlights the characteristics of a quality contact.

Exhibit 1. Characteristics of Quality Contacts

Intentional and Purposeful	Goal Directed	Culturally Responsive	Respectful
Unbiased	Tailored	Developmentally Appropriate	Reflective of Critical Thinking

Why Quality Contacts Are Important

Good casework practice depends on quality contacts.

Good Casework Practice

Quality contacts provide important opportunities for caseworkers to:

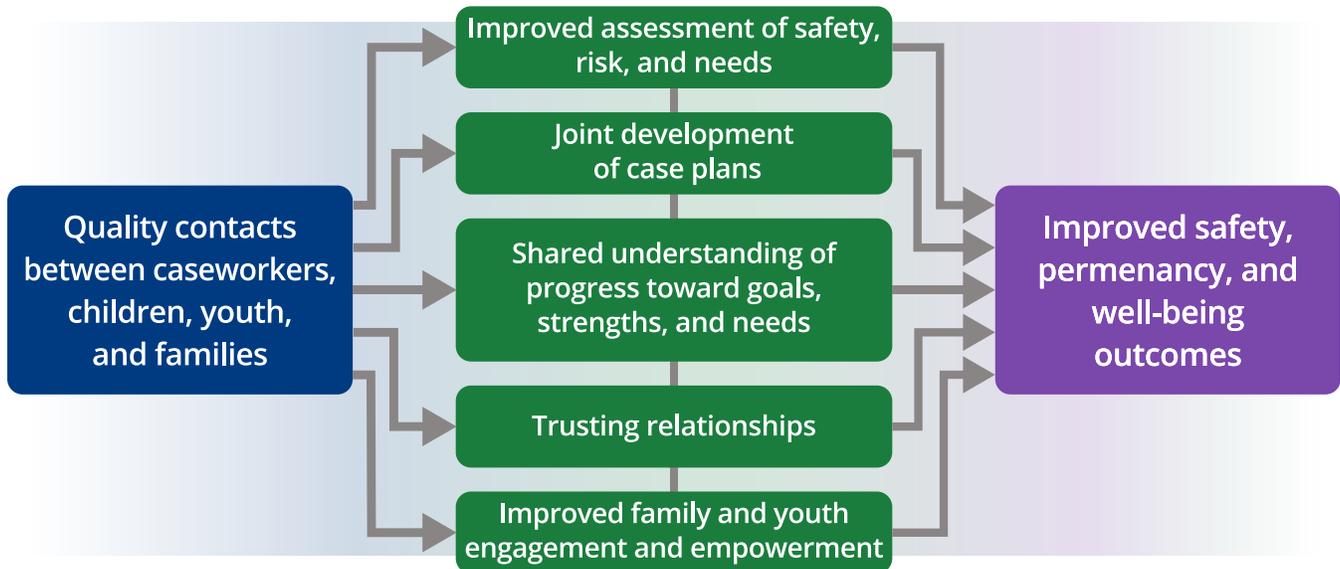
- Ensure child safety
- Make personal connections and develop trusting relationships with family members
- Observe children, youth, and families in their home settings (or other settings appropriate for the circumstances of the case)
- Work collaboratively with families to identify strengths, resources, challenges, and needs and to problem solve
- Develop case plans jointly with the family and assess ongoing progress toward case goals
- Understand and address the specific needs of children, youth, parents, and caregivers and identify opportunities for support
- Reaffirm the parents' and the agency's accountability for child safety, permanency, and well-being (National Conference of State Legislatures, 2006)

Links to Positive Outcomes for Children and Families

Analyses from Round 1 of Federal Child and Family Services Reviews (CFSRs) (2001–04) identified relationships between the frequency and quality of caseworker visits with children and State performance on outcomes related to safety, permanency, and well-being. Findings also showed relationships between caseworker visits and assessment of children's risk of harm, parent involvement in case planning, assessment of needs, and service provision (Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services, 2003). (For a discussion on more recent rounds of CFSR findings, see "Common Challenges Affecting Quality Contacts.")

Exhibit 2 illustrates a theory of connections between quality contacts and improved outcomes.

Exhibit 2. The Impact of Quality Contacts



Federal Legislation and State Policies

Federal legislation¹ establishes State requirements for quality contacts in child welfare. The Child and Family Services Improvement Act of 2006, Public Law (P.L.) 109–288, requires each State’s plan for child welfare services to describe standards for the content and frequency of caseworker visits for children and youth in foster care. The law specifies, **at a minimum**:

- Monthly visits for each child and youth in out-of-home care
- Well-planned visits focused on issues relevant to case planning and service delivery to ensure child safety, permanency, and well-being

Subsequently enacted, the Child and Family Services Improvement and Innovation Act of 2011, P.L. 112–34, includes the following provisions that add to the requirements for caseworker visits:

- For fiscal year (FY) 2015 and thereafter, States must ensure that at least 95 percent of children and youth in foster care receive caseworker visits once a month while in care (increased from 90 percent during 2012–14).
- At least 50 percent of the total number of monthly visits made by caseworkers to children and youth in foster care must occur in the child’s or youth’s residence.
- States must submit reports on their caseworker visit performance to the Children’s Bureau.²

P.L. 112-34 also allocates funding to support monthly worker visits and improvements in the quality of the visits with an emphasis on enhanced decision-making.

In addition to Federal laws, States commonly have written standards expressed in State and local agency policies for the frequency and content of caseworker visits with children, youth, and parents. State child welfare information systems collect data related to the frequency and quality of visits to support State child welfare policies and practices as well as Federal reporting requirements.

¹ To keep informed on changes in child welfare legislation, see Child Welfare Information Gateway’s webpage on Federal laws at <https://www.childwelfare.gov/topics/systemwide/laws-policies/federal/>

² For data on State caseworker visits for children in foster care, see the Child Welfare Outcomes Report Data at <https://cwoutcomes.acf.hhs.gov/cwodatasite/>

Common Challenges Affecting Quality Contacts

States often face challenges in achieving the benchmarks set in Federal legislation and State standards, as evidenced in CFSR findings.

CFSR Findings

The Children's Bureau CFSR process monitors State child welfare programs to ensure conformity with Federal requirements, assess the experiences of children and families receiving child welfare services, and assist States in enhancing their capacity to achieve positive outcomes. Two items examined in the CFSR case reviews specifically address quality contacts:

- Item 14: Caseworker visits with child
- Item 15: Caseworker visits with parents

Findings from CFSR Round 2, which ended in 2010, indicated that States generally needed improvement on both caseworker visit items (Mitchell, Thomas, & Parker, 2014). A content analysis of Round 2 final reports identified common challenges to CFSR outcomes across States and revealed that caseworker visits with children did not focus adequately on case-planning issues, service delivery, and goal attainment. Analyses also suggested challenges in working with birth parents, particularly fathers (Mitchell et al., 2014).

Recent analyses of final reports in CFSR Round 3 by the Center suggest that States continue to experience challenges with conducting quality caseworker visits. In all 19 final reports of States that completed CFSR Round 3 reviews in FY 2015 and FY 2016,³ both "caseworker visits with child" and "caseworker visits with parents" were identified as areas needing improvement. The proportion of applicable cases in each State that rated as a strength for these items varied widely. While performance in both areas were poor, generally States performed better on visits with children (item 14) than they did on visits with parents (item 15).

Factors That May Affect Quality Contacts

Multiple factors may play a role in the frequency and quality of caseworker contacts, including:

- Gaps in caseworker knowledge and skills, including knowledge of effective engagement practices, competencies in ongoing safety assessment, and skills with difficult conversations
- High caseworker caseloads and workloads
- Competing priorities for caseworkers and families, which may lead to rescheduling visits or may impinge on the time and planning devoted to the contact
- Crisis management, which may draw caseworker focus away from the recommended visit components
- Long travel distances to foster home placements in rural areas or other counties
- Frequent staff turnover

States should consider these factors, as well as individual professional development needs, as they adopt strategies for building capacity for conducting quality caseworker visits (discussed further below).

³ Analyses included States that conducted CFSR Round 3 reviews in FY 2015 and FY 2016 and for which reports were available to the Center team by February 2017.

Key Phases and Activities in Quality Contacts

While quality contacts are an integral part of routine casework, they are just one part of the varied supports and services provided to children, youth, and families. Federal requirements of monthly visits are *minimum* requirements, and caseworkers need to adjust to accommodate case circumstances and to complement other supports, services, and events within the case.

A quality contact consists of more than just the time spent in the home; it begins before the visit and continues during and after. Exhibit 3 illustrates the three key phases of quality contacts.

Exhibit 3. Key Phases of Quality Contacts



Exhibit 4 presents key casework activities during each phase that contribute to a meaningful visit. The table synthesizes and adapts guidance provided in multiple training and practice resources (Albers, n.d.; Atif & National Resource Center for Child Protective Services, 2010; Institute for Human Services, 2011a & b; National Resource Center for Family-Centered Practice and Permanency Planning, 2008 a & b). While every visit may be different and flexibility is important, Exhibit 4 provides some general guidelines.

Exhibit 4. Key Quality Contact Casework Activities

Quality Contact Casework Activities	
Before the visit	
Schedule	<ul style="list-style-type: none">Align visit frequency with national and State requirements and case circumstances.Consider the schedules of parents, resource parents, and youth/young adults in identifying the visit time.Consider the length and location of visits to support open and honest conversations.
Gather information and review	<ul style="list-style-type: none">Gather and review case documents, service plans, and related data and information.Review documentation of the last contact to ensure follow-up was completed.Make any collateral contacts with key individuals in the case (e.g., therapist, treatment provider, doctor, school personnel) to assess progress and concerns.
Plan and prepare	<ul style="list-style-type: none">Set a clear purpose and agenda for the visit.Identify issues and concerns to explore (with room for adaptation during the visit).Consider and plan for worker safety.

During the visit

Engage and collaborate

- Review the objectives and agenda for the visit and incorporate input from the child, youth, parent, and/or resource parent into the agenda.
- Demonstrate genuineness, empathy, and respect for each family member.
- Suspend biases and avoid judgments.
- Make sure children, youth, parents, and resource parents feel comfortable discussing challenges and needs.
- Talk with adults and children or youth separately to allow for privacy in sharing concerns.
- Communicate support and partnership.
- Listen!

Focus on the case plan, explore progress, and make adjustments

- Assess child safety and risk (including identification of safety threats, vulnerabilities, and protective capacities).
- Explore well-being of the child or youth and family.
- Ask developmentally appropriate questions.
- Discuss case goals, progress toward goals since the last visit, and actions needed—in language that all participants can understand.
- Identify strengths and opportunities for the child or youth and family.
- Identify concerns, changing circumstances, and challenges.
- Observe what is happening in the home.
- Discuss what the agency will do to support the family to meet identified needs and expectations for the child or youth and family.
- Make needed changes to the case plan.

Wrap up

- Conclude visit with a summary, next steps, and actions needed.
- Make arrangements for the next visit.

After the visit

Document⁴

- Document key information, observations, and decisions in a concrete, concise, and nonjudgmental manner.
- Record information, as appropriate and in accordance with agency policies:
 - Participants
 - Date and location
 - Assessment of child safety and risk
 - Child or youth well-being (related to health, mental health, development, behavior, education, social activities, and relationships)
 - Progress toward case goals and any changes to case plan or tasks
 - Concerns expressed by the child, youth, parent, or resource parent
 - Observations on the home environment and interactions
 - Additional service needs
 - Cultural considerations
 - Follow-up activities and priorities
- Highlight actions needed, the person responsible, and target dates for easy reference.

Debrief

- Discuss visit and key directions with supervisor.
- Reflect on successful approaches during visits, challenges experienced, and areas for development in conducting quality contacts.

Follow up

- Follow up on commitments made and next steps.

⁴ Visit the quality contacts webpage for more information: <https://capacity.childwelfare.gov/states/focus-areas/foster-care-permanency/quality-matters>

Supervisors provide critical support to caseworkers across each of the three phases. At the individual level, supervisors deliver support through supervisory conferences, coaching, and skill building, and at the group level through unit learning activities and peer sharing.

Roles in Ensuring Quality Contacts

Within a child welfare system, multiple players contribute to the achievement of quality contacts. Exhibit 5 highlights various roles and responsibilities.

Exhibit 5. Roles in Ensuring Quality Contacts

Administrators	<ul style="list-style-type: none"> • Set standards and policies for quality contacts. • Build agency capacity. • Review performance and introduce strategies for improvement based on identified challenges.
Program Managers	<ul style="list-style-type: none"> • Monitor and support program staff in conducting quality contacts. • Identify and address program barriers to quality contacts. • Collaborate with IT, data, and CQI staff to promote system design and data collection that supports quality contacts.
Trainers	<ul style="list-style-type: none"> • Help build staff knowledge and skills on conducting quality contacts.
Supervisors	<ul style="list-style-type: none"> • Support caseworkers during all three phases of quality contacts. • Discuss caseworker strengths and challenges in conducting visits, and promote critical thinking skills. • Provide oversight to caseworker documentation of visits.
Caseworkers	<ul style="list-style-type: none"> • Plan and conduct quality contacts. • Engage children, youth, parents, and resource parents. • Document key information. • Work together with supervisors to enhance skills.
Children and Youth	<ul style="list-style-type: none"> • Express thoughts, concerns, and needs. • Partner in age appropriate decision-making and planning. • Contribute to agency efforts to improve quality contacts.
Parents	<ul style="list-style-type: none"> • Express thoughts and concerns related to their case plan. • Partner in decision-making and planning. • Contribute to agency efforts to improve quality contacts.
Resource Parents and Caregivers	<ul style="list-style-type: none"> • Express thoughts and concerns related to child or youth well-being and needs, as well as their own. • Contribute to agency efforts to improve quality contacts.
Information Technology Managers	<ul style="list-style-type: none"> • Ensure information system makes relevant case information accessible to caseworkers, supervisors, and managers. • Ensure that documentation of contacts reflects agency policies and practices.
Data and CQI Managers	<ul style="list-style-type: none"> • Analyze, use, and share data to inform areas for improvement as part of the quality assurance and continuous quality improvement (CQI) processes.

Considerations for Building Capacity for Quality Contacts

To build agency capacity for quality contacts, State and agency leadership and program managers may want to consider the following questions relating to various aspects of capacity.⁵ The classification of these considerations reflects the five dimensions of capacity as defined by the Child Welfare Capacity Building Collaborative (2015).

1. Organizational resources

- Does the agency have adequate staff to meet frequency and quality standards?
- Do staff reflect the families served in the communities and speak the languages spoken in the community?
- Are caseloads, workloads, and responsibilities appropriate to enable caseworkers to conduct quality visits that meet State standards and promote positive outcomes? If not, what changes can the agency, supervisors, and caseworkers make?
- What additional resources do caseworkers need to support and enhance quality contacts?

2. Organizational infrastructure

- Does the agency have adequate policies and standards in place to ensure that caseworkers conduct quality contacts? Do policies and standards align with Federal guidance?
- Do practice guidelines support quality contact activities and documentation?
- What role do supervisors play in promoting frequent and quality contacts? How does the agency support supervision and coaching in these activities?
- Has the agency considered policies and mechanisms to support flextime or other accommodations for workers conducting visits during evening hours to avoid burn out?
- How does the agency monitor the quality and frequency of caseworker visits?
- How does the agency use data to inform and enhance contacts?
- What processes does the agency have in place to identify and address strengths, barriers, and challenges to quality contacts and improve effectiveness?
- How does the agency assess the impact of quality contacts on outcomes for children, youth, and families?

3. Organizational knowledge and skills

- Do caseworkers receive the right training and ongoing supports to understand policies and build skills necessary for conducting quality contacts?
- Do caseworkers have knowledge of the community, the culture(s), and the language(s) common to the community?
- Do supervisors have the knowledge and skills to support caseworkers?

4. Organizational culture and climate

- Does the agency have widespread understanding of the link between quality contacts, engagement, and positive outcomes for children, youth, and families?
- Does the agency culture support quality contacts?
- Does every level of the organization value quality contacts?

5. Organizational engagement and partnership

- How can the agency engage its State and community partners in supporting quality contacts?

⁵ The Center adapted and expanded these questions from questions developed for State legislators by the National Conference of State Legislators (2006).

Conclusion

A comprehensive and strategic approach to conducting quality contacts is critical to good casework practice and improving outcomes for children, youth, and families. Continuous improvement of quality contacts requires efforts at all levels of a child welfare agency to enhance and align agency culture, policies, data collection, knowledge and skills, supervision, and frontline practices. This issue brief—the first in a set of “building blocks”—establishes a foundation for understanding and communicating about quality contacts, components and characteristics of quality contacts, and key activities to undertake to achieve quality contacts, as well as considerations for capacity building.



To learn more about quality contacts and related Center for States publications and learning tools, visit the **Quality Matters: Improving Caseworker Contacts With Children, Youth, and Families** webpage at <https://capacity.childwelfare.gov/states/focus-areas/foster-care-permanency/quality-matters>

References

- Albers, M. (n.d.). *Social worker contact*. Retrieved from http://calswec.berkeley.edu/files/uploads/social_worker_contact_steps.docx
- Atif, K., & National Resource Center for Child Protective Services. (2010). *Field guide for the practice of quality visitation with children and families*. University of Pittsburgh, Pennsylvania Child Welfare Resource Center. Retrieved from <http://www.pacwrc.pitt.edu/QV/Field%20Guide.PDF>
- Child Welfare Capacity Building Collaborative. (2015). *Child welfare organizational capacities*. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau. Retrieved from [https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Blob/100460.pdf?w=NATIVE%28%27BASIC+p+h+i+s+%27%27Child+Welfare+Capacity+Building+Collaborative+\[Overview+Factsheet\]%27%27%27%29&upp=0&order=native%28%27year%2FDescend%27%29&rpp=25&r=1&m=1](https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Blob/100460.pdf?w=NATIVE%28%27BASIC+p+h+i+s+%27%27Child+Welfare+Capacity+Building+Collaborative+[Overview+Factsheet]%27%27%27%29&upp=0&order=native%28%27year%2FDescend%27%29&rpp=25&r=1&m=1)
- Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. (2003). *Results of the 2001 & 2002 Child and Family Services Reviews*. Retrieved from http://www.acf.hhs.gov/sites/default/files/cb/results_of_the_2001_and_2002_child_and_family_services_reviews.pdf
- Institute for Human Services. (2011a). *Effective home visits. Online training*. Ohio Child Welfare Training Program. Retrieved from http://www.ocwtp.net/EHV/EHV_Session1/player.html
- Institute for Human Services. (2011b). *Effective use of home visits: A supervisor's companion guide*. Ohio Child Welfare Training Program. Retrieved from <http://www.ocwtp.net/PDFs/Common%20Ground/Supervisors%20Companion%20Guide.pdf>
- Mitchell, L., Thomas, M. L., & Parker, B. (2014). The Child and Family Services Review. In G. P. Mallon & P. M. Hess (Eds.), *Child welfare for the 21st century: A handbook of practices, policies, and programs* (pp. 567–582). New York, NY: Columbia University Press.
- National Conference of State Legislatures. (2006). *Child welfare caseworker visits with children and parents*. Washington, DC: Author.
- National Resource Center for Family-Centered Practice and Permanency Planning. (2008a). *Promoting permanency through worker/parent visits. A one day training program*. (Original work published 2005). Retrieved from <http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/worker-child-visiting/workerparentvisiting.pdf>
- National Resource Center for Family-Centered Practice and Permanency Planning. (2008b). *Promoting placement stability and permanency through caseworker/child visits: A one day training program*. (Original work published 2004). Retrieved from http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/caseworker_child_visiting_curriculum_0508.pdf

This product was created by the Capacity Building Center for States under Contract No. HHSP233201400033C, funded by the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

