



# **New Mexico CYFD – Protective Services Organizational Health Assessment**

**Report for Protective Services Staff**

**February 28, 2011**

***Prepared for New Mexico's Piñon Project***

***Funded by MPCWIC***

## Introduction

New Mexico's Protective Services (PS) Division undertook a statewide organizational health assessment during the months of November and December 2010 and January 2011. The assessment was coordinated with the help of the Mountains and Plains Child Welfare Implementation Center (MPCWIC) as part of the state's Practice Model Development Project – known as the Piñon Project.

The members of the Piñon Project's Research and Evaluation Workgroup identified a need to conduct a broad assessment of PS staff and stakeholders to gather:

- Staff's perceptions of the agency's overall organizational health
- Staff and stakeholder perceptions of both effective and ineffective change initiatives that were introduced by PS in the past
- Staff and stakeholder input related to elements of current practice that should be addressed or strengthened in the development of the new Practice Model.

The assessment was comprised of both a web-based survey and facilitated focus groups. The survey was open for the period of November 1 – 19, 2010 and sixteen focus groups were held during the months of November and December 2010 and January 2011. Survey response was strong with a 68% completed survey response rate from those invited to participate.

Focus Groups attendees participated fully in the discussions and shared their unique perspectives on perceptions of change, practice, and need for stakeholder communication.

Focus Group Participants:

- Eight Protective Services focus groups were held, including workers (2 groups), supervisors, Children's Court Attorneys, County Office Managers, Regional Managers, Bureau Chiefs, and Management (Director and Deputies).
- Eight Stakeholder focus groups, including foster parents (2 groups), providers (2 groups), court appointed attorneys, Court Appointed Special Advocates (CASAs) and Citizen Review Boards (CRBs), Tribal Social Service providers, and youth.

Ultimately, the results of the overall assessment will influence the content and components of the Practice Model itself and the findings will inform the Piñon Project's Communications, Implementation and Training strategies.

## The Survey

The assessment process had two components: a web-based survey and focus groups. The survey measured 17 scales related to “organizational health” and the focus groups looked at perceptions about change, perceptions about practices, and needs for stakeholder communication.

Surveys were administered via the web and overall, 547 out of 765 surveys were submitted which represents a 71% response rate, and while some of those surveys were not complete, 524 individuals completed the survey in full (68%). Respondents came from all five regions, central office, and statewide programs. All positions within Protective Services were represented: managers at all levels, supervisors, workers (the largest group), attorneys, client service agents, and others. For workers and supervisors, the largest group represented permanency planning, followed by investigation, placement, in-home services, and other functions. Respondents were also asked how long they had worked for CYFD Protective Services, from less than two years to 16 years or more.

Data were collected on race as well as ethnicity. Almost 90% of the respondents indicated their race as White. In terms of ethnicity, 56% identified as Hispanic or Latino. In terms of gender, 86% of these respondents are female.

## Results

The mean/average scores for all scales can be found in the table that follows. Each score can be interpreted on a 6-point continuum with 1 being the lowest/least positive and 6 being the highest/most positive. The items and item means/averages comprising each scale can be found in the attachment.

**Scale Scores  
Highest to Lowest**

	N	Mean
Efficacy Scores (Means)	546	5.18
Adaptability Scores (Means)	545	4.64
Supervisor Support Scores (Means)	524	4.62
Job Satisfaction Scores (Means)	545	4.52
Supervisor Competence Scores (Means)	531	4.44
System of Care Scores (Means)	501	4.37
Community Resources Scores (Means)	514	4.27
Current Practice Scores (Means)	536	4.00
Mission Scores (Means)	544	3.89
Effective Leadership Scores (Means)	523	3.80
Cultural Competence - Administration Scores (Means)	511	3.72
Readiness for Change Scores (Means)	517	3.70
Shared Leadership Scores (Means)	519	3.70
Cultural Competence - Services Scores (Means)	505	3.69
Public Perception Scores (Means)	520	3.67
Autonomy Scores (Means)	536	3.49
Communication Scores (Means)	536	3.22

## Discussion

Scales are discussed below from highest to lowest. Those scales shaded in green with means above 4.0 on the six-point continuum are viewed as “apparent assets and strengths.” Those scales shaded in yellow with means below 3.5 are considered “apparent challenges.” Those scales shaded in gray with means between 3.5 and 4.0 are relatively neutral as they hover around the mid-point between positive and negative scale scores.

Scales are also compared by the various respondent characteristics: location, current position, tenure, and ethnicity. No differences in scales scores were noted by gender or race. Comparisons are not reported for primary function as this item only applied to worker and supervisor respondents.

In these comparisons, tenure is clearly the variable that most frequently distinguishes subgroups of respondents. On 14 of the 17 scales, there is a pattern such that the longer the tenure, the less positive the scores. Location also differentiates some scales, with the pattern frequently (but not always) such that staff from central office and statewide programs are less positive than the field. Some scales also vary by position with directors, deputies, bureau chiefs, and program managers (and sometimes Children’s Court Attorneys) being less positive than other staff. Finally, there are differences by ethnicity on a few scales with Hispanic/Latino respondents more positive than non-Hispanic/Latino respondents.

### **Apparent Assets/Strengths (Means above 4.0)**

**Efficacy:** With a mean of 5.18, this construct was the most highly rated; staff report that they have the skills and confidence to accomplish their work, that they plan ahead and carry through, and that overall they are effective. There are differences by tenure such that the longer the tenure the more positive the score. This is the only scale where longer tenure relates to more positive responses.

**Adaptability:** This scale achieved a mean of 4.64, indicating that staff believe they can adapt to changing environments and that they are willing and able to learn and try new approaches to their work. There was little variation by any demographic other than ethnicity, where Hispanic respondents had higher adaptability scores than non-Hispanics.

**Supervisor Support:** This scale achieved a mean of 4.62 indicating that staff perceive their supervisors as supportive. Supervisors encourage improvement and engage staff in decision-making that makes an impact on minimizing burnout. Opinions about supervisor support generally decline with tenure.

**Job Satisfaction:** The mean score for this scale was 4.52. Overall, staff are satisfied with their jobs; they feel appreciated; and they believe in the value of their work. There are variations by tenure with staff under two years having the highest score, generally declining from 2-10 years but leveling a bit higher for those employed 11 years or more. By position, County and Regional Managers, Children’s Court Attorneys, and Client Service Agents have the highest scores while workers and administrative support have the lowest scores.

**Supervisor Competence:** The mean here is 4.44. Staff generally find their supervisors knowledgeable and able to problem-solve, as well as flexible and encouraging. Scale scores generally decrease with tenure; the longer one has worked with the agency, the less positively they rate this scale.

**System of Care:** This scale also showed relative positivity with a mean of 4.37. In general, staff see a reasonably comprehensive and family-centered service system though lacking an adequate service array in the community. They are positive about needs and strengths assessment as well as customized service planning involving the family. There are however, variations by location, position, tenure and ethnicity. Central office and statewide staff are less favorable about systems of care than staff from the five regions. Directors, deputies, bureau chiefs, program managers and Children’s Court Attorneys are less favorable than staff in other positions. Staff of Hispanic/Latino ethnicity are more favorable than non-Hispanic. Perceptions about systems of care also consistently decline with tenure (the longer tenure the less favorable).

**Community Resources:** The mean score overall was 4.27, suggesting a positive perception about the availability of resources for families served by the agency (though housing and employment services are not seen as generally available). By position, directors, deputies, bureau chiefs, and program managers have considerably lower ratings on this scale. Central office and statewide staff are also lower on this scale than staff from the regions. The tenure pattern holds here with scores decreasing with the length of employment at CYFD.

### **Neutral Scales Hovering around the Mid Point (Means between 3.5 and 4.0)**

**Current Practice:** This scale (mean of 4.00) consists of 11 items developed by the evaluators. Most of these items relate to current practice in terms of system of care and practice model values. A few items relate to the current Practice Model initiative. Of interest are the opinions evident in the item scores where practice is seen as driven by child and family needs, evidence based, value driven, and in accordance with standards about engaging family and youth. On the low end of the item scales is the perception that practice is not consistent across workers as well as general change fatigue and skepticism about the Practice Model initiative. When viewed from the perspective of CYFD tenure, mean scores generally decrease by length of time employed.

**Mission:** The average score here is 3.89 indicating only moderate clarity and awareness of the agency's mission and goals as well as the perception that staff are confused about mission and goals. By location, Central office and statewide staff rate this scale lower than staff from the regions. Again, scores decline with tenure.

**Effective Leadership:** The mean score overall was 3.80 on this measure of the perception of leaders' ability to motivate staff, set priorities, promote communication, and advocate for resources. There are variations by location (Regions 1, 2, 4, and 5 are more positive than elsewhere). There is also the general decline with tenure; the longer the tenure the less positive the scores.

**Cultural Competence – Administration:** A mean of 3.72 was achieved on this scale that assesses the degree of cultural competence in recruitment, hiring, training, retention, and other administrative practices. By location, central office and statewide staff are less positive than others. There is also the general pattern of declining scores by tenure.

**Readiness for Change:** The mean is 3.70 on this measure of staff willingness and ability to create and implement change. By position, directors, deputies, bureau chiefs and program managers have the lowest score. By location, central office and statewide staff are lower than the regions. By tenure, scores decrease the longer the tenure.

**Shared Leadership:** The mean here is also 3.70 on this measure of leadership's ability to support innovation, shared leadership, and independent decision making by staff. There is some variation by location; region 3 and statewide staff are lower than staff from elsewhere. There is the same general decline in scores by tenure.

**Cultural Competence – Services:** This scale achieved a mean of 3.69. This is a measure of the extent of culturally relevant services to families as well as culturally appropriate materials, toys, and food. There are variations by position with directors, deputies, bureau chiefs and program managers having the lowest ratings. By location, central office and statewide staff are lower than the regions. By tenure, scores decrease the longer the tenure.

**Public Perception:** The overall mean is 3.67 on this measure of measure of community perceptions of the value and importance of child protection work and workers. There was no variation by any demographic factor. Of note, the item "the media provides a balanced view of our work" was the lowest item score on the survey at 1.96.

### **Apparent Challenges (Means below 3.5)**

**Autonomy:** The mean is 3.49 on this scale, just below the midpoint. This is generally a measure of the perceived latitude staff have with respect to their work and speaks to management's trust in staff judgment, the authority staff have to carry out their duties and try new ideas. By location, regions 1 and 4 are rated higher than other areas of the state. By tenure, there is the same pattern of declining scores with time at CYFD.

**Communication:** This scale achieved the lowest mean in the survey at 3.22. This is a measure of the openness and inclusiveness of communication that includes perceptions of being heard, being involved and informed, and the freedom to ask questions and express concerns. There is variation by location with central office and statewide staff having the lowest ratings. There is also variation by tenure, holding true to the pattern of declining ratings the longer the tenure.

### **Open Ended Items**

Two open-ended items were asked at the end of the survey. These were then coded into response types and tallied as follows.

***Is there anything else about Protective Services organizational health that you believe is important for us to know?***

One hundred thirty four (134) of the 547 respondents added comments to this item. For those 134 respondents, comments are summarized below from most frequent to least frequent.

#### Low morale, negativity, burnout – 32 responses

The majority of the 32 responses discussed feeling undervalued and/or expendable. Many of the respondents suggested not feeling supported or recognized for their good work. Some suggested that the individuals doing all the work were not the workers being rewarded and/or promoted. Responses reflect a sense of negativity and burnout coming from the field.

#### Management issues (not competent, out of touch, too political) – 22 responses

There were 22 responses related to management issues. In general, responses suggest a dissatisfaction with that the top down style of management within counties and across the state. Comments reflect a belief that individuals in upper management do not understand the realities and experiences of workers in the field. Some believe that a change in upper management is needed for change to occur. Upper management needs to have a direct connection to the field.

#### Not enough staff – 21 responses

The 21 responses related to there not being enough staff in general and in small counties in particular. Responses pointed to the need for more positions as well as workers of all kinds. The hiring freeze and its impact on not being able to fill vacant positions was also described. Some respondents discussed not being able to keep up with the work and not being effective in light of caseloads that are too large.

#### Environment and people need to be more supportive – 15 responses

These 15 responses related to the need for more support for workers at all levels of Protective Services. Many comments reflected a need for a more supportive work environment as well as additional support from supervisors and co-workers. Some comments described the difficulty of the work and the need for more support and respect.

#### Inadequate pay – 12 responses

There were 12 responses related to inadequate pay. Some respondents discussed not being compensated for the amount of work they are required to do. Respondents pointed to the inability to make ends meet and adequately care for their own families. It was suggested that an increase in wages would demonstrate that workers were valued.

#### Too much turnover – 10 responses

The 10 responses related to their being too much turnover pointed to low wages, limited resources, and worker burnout as a few of the primary causes. Some responses discussed that higher wages would support improved retention. Comments suggest that high case loads and overtime impact retention.

#### Supervisor issues (not competent, need training, not supportive) – 10 responses

There were 10 responses related to supervisor issues. Some of the responses reflect a belief that supervisors lack strong leadership and supervisory skills. Responses suggest a desire for supervisors to be more inclusive of front line workers in decision-making, in particular around hiring new staff.

#### Not enough resources (services, placement, etc.) – 9 responses

There were 9 responses related to not having enough resources to meet the needs of families. Some comments suggest the need for access to health services and that these services should be provided by the State and not private contractors. It was suggested that their needs to be a greater emphasis on closed cases as far as providing resources that will help families be successful. Budget cuts within the agency and partnering organizations have had an impact on morale.

#### Generic positive comments about Protective Services – 9 responses

There were 9 positive responses. Some of the responses reflect an appreciation for the commitment and dedication of Protective Services workers.

#### Need more training – 7 responses

There were 7 responses related to the need for training and its relationship to improving the interactions between workers, families, and the system. Some responses suggested that workers need more training to address worker biases.

#### Need better communication – 6 responses

There were 6 responses pertaining to the need for better communication overall and in particular communication coming out of central office. A number of the responses pointed to the lack of communication regarding changes to policies, procedures, and practice.

#### Protective Services is too reactive, has poor judgment – 6 responses

The 6 responses related to Protective Services being too reactive were related to decision-making. Respondents suggested that Protective Services makes reactive decisions when major incidents occur without considering the impact on the field. Some responses were related to Protective Services being more reactive than proactive in the community.

#### Environment and people need to be more inclusive – 6 responses

There were 6 responses reflecting a need for more inclusive decision-making. Comments suggested that decisions are made from the top down without input from the field. Some comments suggested top down decisions were also being made about specific cases without input from individuals working on the case.

#### Too much paperwork and administrative tasks – 6 responses

The 6 responses related to too much paperwork suggest that the excessive amount of paperwork and administrative tasks required by the social workers takes away from their work with families. Many respondents report an understanding of the need for paperwork but believe it impedes their ability to engage families.

#### Other responses – 5 or fewer

Respondents also talked about there being too much variability and inconsistency by county and region (5); scarcity of resources in small counties (5); Albuquerque issues such as “they have it all” (4); need for greater attention to worker safety issues (4); Protective Services being too top heavy (3); staff with negative regard for families (2); poor quality contractors (2); need for better image and public relations (2); favoritism and politics (2); need for more translation and interpreter services (2).

***Is there anything else about the Practice Model project that you believe is important for us to know?***

Seventy four (74) of the 547 respondents added comments to this item. For those 74 respondents, comments are summarized below from most frequent to least frequent.

Don't know about the Practice Model; need more info – 24 responses

Overall, 25 respondents said they didn't know about or needed more information about the Practice Model initiative. Some responses suggested that this was the first time they had heard about it and some reflected a need for additional information about what this will mean for the field.

Skepticism; no belief Practice Model will happen or have impact – 8 responses

There were 8 responses reflecting a level of skepticism about the Practice Model. Some respondent comments suggested that the Practice Model was another attempt to create change without support or input from the field. It was reported that a more positive messenger would be helpful. Comments also suggest that those in supervisory and management positions do not support a new Practice Model.

Negative comment regarding current practice (not related to Practice Model) – 8 responses

There were 8 negative comments pertaining to current practice that are not related to the Practice Model. Some responses suggested that social workers are bogged down with paperwork and administrative tasks that takes time away from providing quality services to families. One comment pertained to the idea that counties outside of Bernalillo don't feel included and will use that as an excuse to work against others, supervisors and overall decisions.

PM needs to create consistent practice – 8 responses

There were 8 comments related to the need for consistency across the state. In general all the respondents identify the need for uniformity in practice and for everyone to be on the same page.

Need more input from staff; need to be inclusive – 6 responses

There were 6 comments reflecting a need for more input from the field. Some respondents report that decisions are made without information and input from the field and they do not feel supported. A couple comments reflect a desire to have direct communication between front line staff and upper management.

Other responses – 5 or fewer

Respondents spoke about how the Practice Model needs to be an objective model (4); the Practice Model should be implemented with training, information, and follow-up (4); the Practice model should address specific topics such as substance abuse, trauma, safety (3), and other comments about the Practice Model needing accountability, collaboration, support from supervisors and mid-managers.

## Focus Groups

There were a few areas not readily assessed by the survey discussed above. These included perceptions about change (including beliefs about the Practice Model as a vehicle for positive change) and perceptions about current practice (including beliefs about the Practice Model as a vehicle for positive outcomes). These became the subject of focus groups with Protective Services staff.

It was further decided that input from across the child welfare system via focus groups would be beneficial to developing and implementing the Practice Model. Stakeholders thus participated in focus groups on content related to current practice (including beliefs about the Practice Model as a vehicle for positive outcomes) and communication needs and preferences of stakeholders related to the Practice Model.

## Participants

Eight Protective Services focus groups were held, including workers (2 groups), supervisors, Children's Court Attorneys, County Office Managers, Regional Managers, Bureau Chiefs, and Management (Director and Deputies).

Eight stakeholder focus groups, including foster parents (2 groups), providers (2 groups), court appointed attorneys, Court Appointed Special Advocates (CASAs) and Citizen Review Boards (CRBs), Tribal Social Service providers, and youth.

## Findings

The following sections of this report present summary results for each of the three major topics – Perceptions about Change (Protective Services only), Perceptions about Current Practices (Protective Services and Stakeholders), and Communication Needs and Preferences (Stakeholders only).

### Perceptions of Change (Protective Services Only)

The initial discussion centered around identifying elements of change processes that were particularly effective. These included implementing change so as not to increase workload with a well-planned strategy that includes grass roots involvement, collaboration, and clear two-way communication. In addition, respondents maintain that implementing change requires leadership as well as extensive training, support, and follow up.

The discussion then moved to areas that create impediments to change. These include top down decision making that does not include the field, inadequate communication and preparation for change, inadequate and inconsistent training, a lack of follow up and support, a lack of understanding, and fear of change. It was also said that the lack of accountability systems creates barriers to change, and that Protective Services needs to break its pattern of starting things and then stopping or going on to the next thing.

Strengths of Protective Services to sustain change included passion, commitment and dedication of staff, loyalty to peers and the agency, and a sense of mutual support and collaboration. Resources to disseminate information and collaboration with stakeholders were also mentioned.

Participants then talked about current needs for change. Many talked about overall climate and culture change. Specific areas needing change included greater support for supervisors and workers, better communication, being more inclusive, consistency in practice across the state, and accountability. Additional changes that related more to practice were the need to re-do the safety training and overall implementation, early engagement with families, and a suggestion to look at best practices in local offices. The need for more providers and resources of all types, especially behavioral health, was also discussed.

Finally, there was a range of responses about the Practice Model initiative. Some of the respondents believed that a new practice model was not a good vehicle for positive change. The discussion reflected a belief that the current climate is too limiting – “if you are drowning, you don't need a manual on how to swim.” Some participants felt that this was not a good way to spend resources. It was suggested that “this is about bells and whistles” and will not actually happen. Some individuals believed that a practice model may happen but suggested that it will need credibility; it will need to move faster; and its success will be based on how it is implemented in the field.

### Current Practice – Protective Services and Stakeholders

The discussion from Protective Services and stakeholders around perceptions of positive outcomes was very similar. Both identified Safety, Permanency and Well-Being as positive outcomes. Protective Services also identified keeping families together and drug free as positive outcomes. Stakeholders identified placement stability, minimal trauma, and smooth transitions as additional positive outcomes.

Family-Centered Meetings and early engagement of families were two practices that were discussed as particularly effective by both Protective Services and stakeholders. The discussion from Protective Services also identified in-home services and child-worker visits as effective practices. Practices are generally viewed as child-focused, family-centered, and strengths-based, but less so in terms of trauma-informed, community-based and culturally competent. In fact, there is no general understanding of these three concepts. Some see these things as buzz words that the practice model should avoid as they don't resonate. Stakeholders talked about how practices vary too much from worker to worker and county to county to say that any one thing is effective; workers practice with very different values; workers do their jobs differently; and workers treat families very differently. Some participants said that there is no sense of what culturally competent means and that there is a need for more respect and better relationships, especially with Tribal workers and ICWA.

Protective Services and stakeholders report that current practices are not driven by consistent values and standards. The Protective Services discussion suggested that Safety, Permanency and Well-being are the closest things they have to explicit values. Stakeholders said that there are no visible or consistent values and standards.

The discussion with Protective Services and stakeholders both suggested that a practice model could possibly produce better outcomes. Protective Services participants said that it will need to be holistic and concrete. It will need to be clear and consistent, communicated well, and cannot increase workload or create additional stress. Stakeholders recommend that it be system wide, child-centered and that it will require accountability throughout the system.

### Communication – Stakeholders Only

This component of the focus group refers to communication between Protective Services and stakeholders and is thus a different measure than the communication scale in the Protective Services survey. Stakeholders reported that communication with Protective Services is not particularly effective and that communication varies too much from county to county and region to region. Stakeholders across the board called for creating regular opportunities for communication, putting important things in writing, and a need for greater transparency. Participants recommended a number of ways that individuals would like to be kept informed about the new practice model. Ideas include communicating openly and often, clear explanations on how the practice model will impact stakeholders, and ways they can support it. Respondents also suggested that providing information to stakeholders, as well as opportunities for questions and feedback, would be important. Email, newsletters and webinars were recommended as avenues for sharing information.

**ATTACHMENT**  
**Scale Items and Item Means**

Efficacy Scale Items and Item Means

	N	Mean
You have the skills needed to conduct your duties effectively.	547	5.35
You consistently plan ahead and then carry out your plans.	545	5.01
You usually accomplish whatever you set your mind on.	545	5.15
You are effective and confident in doing your job.	545	5.26
You have been highly effective in your work here.	544	5.11

Adaptability Scale Items and Scale Means

	N	Mean
You are willing to try new ideas even if some people are reluctant.	545	5.09
Learning and using new procedures are easy for you.	545	4.63
You are sometimes too cautious or slow to make changes. REVERSED	539	4.01
You are able to adapt quickly when you have to shift focus.	544	4.82

Supervisor Support Scale Items and Item Means

	N	Mean
My supervisor genuinely cares about me.	529	4.67
My supervisor gives me help when I need it.	533	4.72
My supervisor supports me in difficult case situations.	527	4.85
My supervisor helps me learn and improve.	529	4.58
My supervisor values and seriously considers my opinions in case decision making.	523	4.69
My supervisor helps me prevent and address burnout.	528	4.20

Job Satisfaction Scale Items and Item Scores

	N	Mean
You are satisfied with your present job.	545	4.53
You would like to find a job somewhere else. REVERSED	545	3.92
You feel appreciated for the job you do.	546	3.68
You like the people you work with.	538	4.85
You give high value to the work you do here.	545	5.41
You are proud to tell others where you work.	545	4.75

Supervisor Competence Scale Items and Item Means

	N	Mean
My supervisor assists me in setting and assessing long-term case goals.	533	4.30
My supervisor encourages creative solutions.	533	4.59
My supervisor demonstrates consistency in decision-making.	530	4.29
My supervisor is appropriately flexible when it comes to applying rules.	529	4.46
My supervisor is knowledgeable about effective ways to work with children and families.	530	4.93
My supervisor helped me learn the ropes of the agency.	531	3.95
My supervisor demonstrates leadership.	530	4.57

System of Care Scale Items and Item Means (Researcher Revised)

	N	Mean
In our agency, family needs are assessed.	519	5.00
In our agency, family strengths are assessed.	519	4.98
Service plans are based on needs that are prioritized by the family.	511	4.41
A customized service plan is developed for each family.	517	4.65
Parents participate in developing their individualized service plan.	506	4.36
Youth participate in developing their individualized service plan.	509	4.36
Parents receive coordinated services, when more than one type of service is provided.	506	4.52
Youth receive coordinated services, when more than one type of service is provided.	504	4.52
Services are made available to parents in a timely manner.	509	4.27
Services are made available to youth in a timely manner.	507	4.27
Service plans are adapted as family needs change.	508	4.42
Prevention is highly valued to reduce children's potential for later problems.	510	4.31
Our agency strives to reduce families' barriers to receiving services.	511	4.48
There is a comprehensive array of services available to families in our community.	512	3.40
Services are provided to families in the least intrusive way.	505	4.11
Providers in our community take into consideration the cultural environment and context of the families that they serve.	507	4.23
Providers in our community adapt their services to the cultural context of their clients.	505	4.15
Our agency evaluates the impact of services.	504	4.14

Community Resources Scale Items and Item Means

	N	Mean
There are strong, positive relationships between my agency and community resource providers.	511	4.32
Availability of services for families served by your agency: Substance abuse interventions	514	4.55
Availability of services for families served by your agency: Mental health intervention	515	4.62
Availability of services for families served by your agency: Domestic violence intervention	515	4.74
Availability of services for families served by your agency: Housing	513	3.64
Availability of services for families served by your agency: Employment assistance	514	3.65
Availability of services for families served by your agency: Food and clothing assistance	515	4.43
Availability of services for families served by your agency: Transportation assistance	512	4.27

Current Practice Scale Items and Item Means (Researcher Developed)

	N	Mean
Our current practices are driven by the needs of families and children.	544	4.45
Our current practices are driven by tasks that we need to complete, such as paperwork.	545	4.59
Our current practices are value-driven.	543	4.16
Our current practices are evidence-based.	543	4.20
Our current practices are consistent across workers.	543	2.84
We have standards of practice related to engaging parents.	543	4.35
We have standards of practice related to engaging youth.	543	4.32
I have seen, read, or heard about what a Practice Model is.	541	4.26
Our agency needs a Practice Model.	530	4.22
I am skeptical that the Practice Model initiative will result in any real changes for our agency. REVERSED	529	3.25
I am tired of all of the practice and policy changes that take place in our agency. REVERSED	535	3.38

Mission Scale Items and Item Means

	N	Mean
Staff sometimes get confused about our main goals and mission. REVERSED	544	3.12
Staff members understand how everyone's duties fit together as part of the overall mission.	544	3.69
Your duties are clearly related to the overall goals here.	544	4.85
Goals and objectives of this agency are communicated clearly.	544	4.01
Management here has a clear plan for accomplishing the goals.	543	3.77

Effective Leadership Scale Items and Item Means

Leaders:	N	Mean
Motivate staff to give 100% to the job.	523	3.72
Work as a team in setting priorities.	523	3.76
Promote communication throughout the agency.	524	3.64
Advocate for resources necessary to meet our goals and agency mission.	521	4.12

Cultural Competency – Administration Scale Items and Item Means

	N	Mean
Staff recruitment, hiring, and retention practices reflect the goal to achieve ethnic diversity and cultural competence.	514	3.80
Resources are in place to support initial and ongoing training for staff to develop cultural competence.	519	3.85
Position description and staff performance measures include skills related to cultural competence.	512	3.67
Participants for all advisory committees and councils are recruited and supported to ensure the diverse cultural representation of the organization's geographic area.	500	3.58

Readiness for Change Scale Items and Item Means

	N	Mean
Staff understand that specific changes may improve outcomes for the children and families.	518	4.59
It is easy to change procedures to meet new conditions.	517	3.11
When changes are necessary, management provides a clear plan for implementing the change.	520	3.49
Staff are encouraged to discuss and explore evidence-based practice techniques.	514	3.79
Staff adapt quickly when they have to shift focus to accommodate program changes.	519	3.53

Shared Leadership Scale Items and Item Means

Leaders:	N	Mean
Provide visible, ongoing support for innovations and ideas.	522	3.78
View leadership roles as shared by staff and administrators.	519	3.59
Encourage others to provide leadership for new projects.	519	3.80
Encourage staff to make our own decisions in our work.	521	3.65

Cultural Competency – Services Scale Items and Item Means

	N	Mean
Cultural bias of assessment tools is considered when interpreting the results and making recommendations.	505	3.60
Forms of communication (reports, appointment notices, telephone message greetings, etc.) are culturally and linguistically appropriate for the populations served.	516	3.69
Pictures, posters, printed materials and toys reflect the culture and ethnic backgrounds of the children and families served.	512	3.82
When food is discussed or used in assessment or treatment the cultural and ethnic background of the child and family is considered.	499	3.65

Public Perception Scale Items and Item Means

	N	Mean
Most people respect the choice to do this work.	520	4.27
People feel that child protection work is important.	521	4.88
Child welfare work is valued by the community.	519	3.81
Child protection workers are held in high esteem.	520	3.19
Most people are sympathetic about how difficult child protection work can be.	522	3.92
The media provides a balanced view of our work.	520	1.96

Autonomy Scale Items and Item Means

	N	Mean
Too many staff decisions have to be reviewed by someone else. REVERSED	535	3.25
Management here fully trusts your professional judgment.	535	3.45
Staff members are given broad authority in carrying out their duties.	536	3.61
Staff here are free to try out different ideas or techniques.	538	3.51
There are too many rules and limitations here. REVERSED	535	3.62

Communication Scale Items and Item Means

	N	Mean
Ideas or suggestions from staff get a fair hearing from management.	534	3.47
The formal and informal communication channels here work fine.	535	3.25
The staff here are kept well informed by management.	538	3.36
More open discussion about issues would be helpful. REVERSED	538	2.41
Staff members here always feel free to ask questions and express their concerns.	534	3.64