R³ **Report** Requirement, Rationale, Reference

A complimentary publication of The Joint Commission

Issue 27, May 26, 2020

Published for Joint Commission-accredited organizations and interested health care professionals, *R3 Report* provides the rationale and references that The Joint Commission employs in the development of new requirements. While the standards manuals also may provide a rationale, *R3 Report* goes into more depth, providing a rationale statement for each element of performance (EP). The references provide the evidence that supports the requirement. *R3 Report* may be reproduced if credited to The Joint Commission. Sign up for <u>email</u> delivery.

New and revised standards for child welfare agencies

Effective Sept. 13, 2020, 74 new elements of performance (EPs) and 12 revised EPs will be applicable to Joint Commission-accredited child welfare agencies. These new and revised requirements are designed to improve the quality and safety of care provided to individuals served and their families in settings/domains such as adoption, family preservation, foster care, kinship care, and child protective services. The Joint Commission currently accredits nearly 200 child welfare organizations that provide child welfare and human services. Many of these organizations provide these services in addition to programs such as children's residential centers and group homes. These standard additions and revisions incorporate the latest research, best practices, and federal regulations with the primary goal of improving quality and safety in these settings.

The Joint Commission evaluated expert literature to determine what areas of a child welfare program held the most potential to impact key quality and safety issues. The literature review revealed that intake, assessment, reunification, trauma-informed care, and case closing were all areas that could improve quality and safety. This approach was supported by a technical advisory panel assembled by The Joint Commission, resulting in the development of EPs that focus on these areas.

Engagement with stakeholders, customers, and experts

In addition to an extensive literature review, public field review, and pilot surveys, The Joint Commission obtained expert guidance from the following groups:

- <u>Technical Advisory Panel (TAP)</u> of subject matter experts from various health care and academic organizations and professional associations from the child welfare field.
- <u>Standards Review Panel (SRP)</u> comprised of clinicians and administrators who provided a "boots on the ground" point of view and insights into the practical application of the proposed standards.

The prepublication version of the child welfare standards will be available online until Sept. 12, 2020. After Sept. 13, 2020, please access the new requirements in the E-dition or standards manual.

Comprehensive Accreditation Manual for Behavioral Health Care and Human Services

Requirements	For this project, 86 new or revised standards and elements of performance (EPs) were
	developed. In addition, many current standards and EPs were updated to reflect a more
	humanistic language style in the standards. All new and revised requirements can be
	found on the Prepublication Standards page of The Joint Commission's website.



Rationale	Children who have experienced significant life changes such as adoption, foster care, and other out-of-home placements are more likely to require higher-level services. ¹ In addition, these children often are exposed to trauma and other situations that may require extra support. Studies suggest that increased support services improve children's behavioral health outcomes and can help foster positive relationships within the family. ¹ Having adoptive parents, foster parents, and child welfare workers use a trauma-informed approach to the care, treatment, or services they give has improved outcomes in the children and families they serve. ^{2,3}
	 Some examples of trauma-informed approaches can be found here: <u>California Evidence-Based Clearinghouse</u> <u>Substance Abuse and Mental Health Services Administration (SAMHSA)</u> Child Welfare Information Gateway: <u>Trauma-informed practice</u> <u>Developing a trauma-informed welfare system</u>
	To facilitate success in adoption, foster care, reunification, and other services, it is critical to create stable relationships. For this reason, it is important that the entire family receive needed support services (such as mental health care and substance abuse counseling) and not just the child/individual served. ⁴ When the case plan's aim is reunification, it's important to consider placing the child in an environment that is similar to his or her family of origin, and in as close proximity as possible to the family's original location. ⁵
	The earlier a child finds a permanent family, the better his or her outcomes. ⁶ This suggests that children who are finding new placements as they get older may need increased services. For this reason, the proposed new and revised standards focus on key aspects of the assessment process, which encourage providing support for families and children. These key areas of support help to promote consistency in the child's environment. The proposed standards also focus on evidence-based safety practices and incorporate federal requirements related to the Family First Preservation Services Act, which promotes keeping families together and placement in the least-restrictive environment when foster care is needed. ⁷
References*	 Chobhthaigh, S. N., & Duffy, F. (2018). The effectiveness of psychological interventions with adoptive parents on adopted children and adolescents' outcomes: A systematic review. <i>Clinical Child Psychology and Psychiatry</i>, <i>24</i>(1), 69– 94. Murray, K. J., Sullivan, K. M., Chaplo, S. D., Tunno, A. M., & Lent, M. C. (2019). Promoting trauma-informed parenting of children in out-of-home care: An effectiveness study of the resource parent curriculum. <i>Psychological</i> <i>Services</i>, <i>16</i>(1), 162–169. Sullivan, K. M., Murray, K. J., & Ake, G. S. (2016). Trauma-Informed Care for Children in the Child Welfare System: An Initial Evaluation of a Trauma-Informed Parenting Workshop. <i>Child Maltreatment</i>, <i>21</i>(2), 147–155. Brodzinsky, D., & Smith, S. L. (n.d.). Commentary: Understanding research, policy, and practice issues in adoption instability. <i>Research on Social Work Practice</i>, <i>29</i>(2), 185–194. Case Planning for Families Involved with Child Welfare Agencies. (2018). Retrieved from https://www.childwelfare.gov/pubPDFs/caseplanning.pdf Tung, I., Norona, A. N., Lee, S. S., Langley, A. K., & Waterman, J. M. (n.d.). Temperamental sensitivity to early maltreatment and later family cohesion for externalizing behaviors in youth adopted from foster care. <i>Child Abuse and Neglect</i>, <i>76</i>, 149–159. Family First Prevention Services Act Historic New Reforms for Child Welfare. (2020).
	Retrieved from https://www.childrensdefense.org/policy/policy-priorities/child- welfare/family-first/

*Not a complete literature review.



Child Welfare Agency Standards

Behavioral Health Care Program

Technical Advisory Panel (TAP) Members

Carla Aaron, MSSW Tanya Albornoz Darlene Allen, MS Stephanie Barrett Richard Barth, PhD, MSW Betty Berzin, MSW Andrea Darr Yolanda Green Rogers, MSW Traci Jones, MSW Brenda Keller, MSW Gregory Kurth, MA Cari Pointer Stefanie Polacheck, MSW, LCSW, MPP Nancy Rolock, PhD, AM Sheila Walker, MA Tequila Washington, MSA

Standards Review Panel (SRP) Members

Darlene Allen, MS Betty Berzin, MSW Sheila Bustilos, PhD Kristine Cambell, MD, MSc Linda Carter, LCSW-BACS Laurel Cima Coates, MPA Roberta Downey, MS, LMFT Pamela DuBois, MSW Jennifer Flowers, MBA Jennifer Gillyard, MSSW, MDiv Matt Holtman, MSW, LCSW Julie Pickens, MSW, LCSW Marvetta Price, LCSW Marie Ramirez, LCSW Marcus Stallworth, MSW Stephanie Terry, MSW Patricia Wilcox, LCSW

