



CWCM-P Requirement: Case Management Concepts and Procedures

*Checklist of Required Discussions and Observations
Attestations of Achievement*

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CWCM-P Requirement: Case Management Concepts and Procedures

Checklist of Required Discussions and Observations
Attestations of Achievement

Definitions (not in alphabetical order)

1. **CM Trainee** means an individual hired as a case manager who is in the process of completing pre-service training and credentialing requirements necessary to hold Child Welfare Case Manager-Provisional (CWCM-P) certification.
2. **Supervisor** means the individual who serves as the CM trainee's immediate supervisor or the agency's designee.
3. **Certified Child Welfare Case Manager-Provisional (CWCM-P)** means the entry-level professional child welfare certification awarded to individuals who meet all certification eligibility requirements and demonstrate competency necessary to hold protected caseload and transition to a full case management caseload under intensive supervision. The CWCM-P credential allows new case managers up to 12 months to build and demonstrate competency necessary for full, professional certification as a CWCM.
4. **Certified Child Welfare Case Manager (CWCM)** means the professional child welfare certification awarded to individuals who meet all certification eligibility requirements and demonstrate competency to hold a case management caseload under standard supervision.
5. **Qualified Facilitator** means a person assigned primary responsibility by the CM trainee's agency for facilitating successful completion of the Case Management Concepts and Procedures Checklist. Qualified facilitators should hold mentoring roles in their agency. Multiple eligible people may serve as qualified facilitators, if appropriate.
 - i. Eligible Qualified Facilitators meet the following criteria: (1) are a certified child welfare professional with current experience in the case management discipline; (2) are qualified to lead case management concepts and procedures discussions, and facilitate and debrief observations, and (3) consistently demonstrates exemplary professional and personal conduct.
 - ii. Persons are NOT QUALIFIED to serve as a qualified facilitator for this requirement are: (1) a subordinate, another CM trainee, a provisionally certified CM (CWCM-P), or (2) anyone, regardless of job title, in any of the following relationships with the CM trainee: a relative, a person sharing the same household, or a person in a romantic, domestic, or familial relationship with the trainee.

CWCM-P Requirements

CWCM-P applicants must meet the following training, on-the-job experience, and exam requirements. The CWCM-P credential is issued when the full application portfolio is completed.

CWCM-P REQUIREMENT	STANDARD
Classroom Training	Successful completion of Child Welfare Foundations curricula Successful completion of Protective Investigations curricula
Field Training	<i>Case Management Concepts and Procedures Checklist and Attestation Form</i>
On-the-Job Supervised Experience	<i>Two (2) eligible CWCM-P Competency Demonstration Assessment Verification Forms.</i> One form is completed by the applicant's immediate supervisor and the second form is completed by one or more Qualified Evaluators
Exam	Passing score on the <i>Child Welfare Foundations exam</i>

This document provides directions, the Case Management Concepts and Procedures Checklist Verification Form, which includes the checklist itself and attestation forms.



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CWCM-P Field-Based Training Requirement

Complete discussions about 28 case manager duties and their associated concepts and procedures and observe Certified Child Welfare Case Managers performing 14 of the 28 job tasks/duties. Observations require debriefing sessions that connect case management concepts and procedures to observed on-the-job performance, including discussions of what went well and, as appropriate, recommendations to improve practice.

Performance Standard

1. Actively participate in facilitated discussions of 28 duties and their associated case management concept and procedures with qualified facilitators.
2. Actively participate in facilitated observations of certified case managers performing 14 case management duties in their natural environment, followed by active participation in a debriefing discussion with qualified facilitators.
3. Eligible discussions or observations occur after the applicant's first day of employment at the FCB approved child welfare employer and prior to CWCM-P credential award.

Application Documentation & Requirement Approval

The complete *Case Management Concepts and Procedures Checklist Verification Form* is submitted to FCB to verify achievement of the requirement and attest to the accuracy of the required discussions and observations/debriefings.

Completed forms are submitted to the FCB by the CM trainee's designated point-of-contact; FCB approval is a condition of provisional certification.

This form and all information submitted to the FCB in support of the CM trainee's application for provisional certification (CWCM-P) are subject to compliance with the *FCB Code of Ethical and Professional Conduct*, specifically rules 4.1 and 4.2, as follows:

4.1 An applicant or certified professional will not present fraudulent documents when applying for certification, certification upgrades, or certification renewal.

4.2 An applicant or certified professional will not prepare fraudulent certification documents for other certification applicants.

Guidelines for CM Trainees

The CM trainee is assigned a lead facilitator by their supervisor or training unit, depending on the agency. The lead facilitator will conduct all or most discussions/observations with the trainee and will sign off on the Lead Facilitator section of the Attestation Form. If the trainee works with additional facilitators, the others need to complete the Additional Qualified Facilitator Attestations form.

All CM trainees must:

- Print or otherwise secure a hard copy of the *Case Management Concepts and Procedures Checklist and Verification Form*.
- Participate in field discussions on each item on the checklist.
- Complete field observations of the 14 items in bold type on the checklist.
- Discuss case management concepts, procedures, and field observations with qualified facilitator(s).



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Checklist of Required Discussions and Observations Attestations of Achievement

- As appropriate, take notes approximating case documentation and complete mock documents to compare with the work product of investigator(s) being observed.
- Secure documentation of discussions and observations from qualified facilitators.
- Sign the Trainee section of the attestation page of *Case Management Concepts and Procedures Checklist and Verification Form* and any additional attestation forms.
- Submit the completed *Case Management Concepts and Procedures Checklist and Verification Form* to their supervisor, who will review, sign, and forward them to the designated FCB point of contact.

General Guidelines for Facilitators

Discussions and observations conducted with the CM trainee must be led/facilitated by a qualified facilitator. Trainees may work with one or more qualified facilitators to complete the checklist requirement per the following guidelines:

- If one facilitator participates in the completion of all discussions and observations, they should check, date, and initial each discussion and/or observation and sign the lead facilitator section of the attestation page of the *Case Management Concepts and Procedures Checklist and Verification Form*.
- If multiple facilitators participate in various individual discussions and observations, each facilitator should check, date, and initial the discussion(s) and/or observation(s) they facilitated (on the same checklist – do not submit multiple, partial checklists). The individual who facilitated the most concepts and procedures will sign the first attestation page; each additional facilitator will sign a separate additional attestation page. CM trainees and their supervisors must sign each individual attestation page.
- Checklists completed in a period of less than 20 working hours require a written narrative from the CM trainee's supervisor describing how the events occurred in this compressed period.

Effective Discussions and Observations/Shadowing with Trainees

Effective discussions with the CM trainee rely on the ability of the facilitator to introduce and explain child welfare concepts and procedures that may be new to trainees.

Facilitators should prepare for discussion with the trainee by asking themselves:

- What do I want the trainee to know about this topic?
- How much does the trainee already know about the topic?
- What is the best way to present the information so that the message is clearly understood?

The facilitator also should encourage questions from the trainee and check for learning by asking them to explain back what they understood from their discussion.

Effective observations rely on the ability of the facilitator to identify natural opportunities for the trainee to observe colleagues performing case management procedures. The facilitator should then manage the trainee during the observation, as necessary, and debrief with the trainee after the observation.

Facilitators are also responsible for preparing their colleagues and any other persons to be observed by the trainee. In doing so, they should focus on the learning opportunities for the trainee and assure all participants of confidentiality.



Case Management Concepts and Procedures Checklist Verification Form

Case Management Concepts and Procedures Checklist

Qualified facilitators lead discussions introducing CM trainees to item on the checklist, as well as its related concepts and procedures. CM trainees observe certified case managers (CWCMs) performing 14 of the 28 items, followed by a debriefing discussion with their facilitator. When the checklist is complete, the CM trainee meets with the immediate supervisor for a final review and debriefing of the checklist items, discussions, and observations/shadowing experiences. After this meeting, the supervisor will sign their attestation page and provide the form and all attestation pages to their FCB point-of-contact.

Document and submit one form only, regardless of the number of people facilitating discussions and observations.

CM Trainee and Qualified Facilitator Information				
CM Trainee Name	Email Address			
Qualified Facilitator Name	Email Address			
Title	Employer			
Trainee's must discuss all these case management tasks and duties and must observe/shadow bolded items:	Discuss	Date/Initial	Observe	Date/Initial
1 Participate in a Case Transfer Staffing	r		r	
2 Complete Family Engagement-Preparation tasks	r		r	
3 Determine worker safety considerations and strategies	r		r	
4 Assess for on-going safety plan sufficiency	r		r	
5 Participate in a safety-plan supervisory consultation	r		r	
6 Receive and respond to out-of-county service requests	r		r	
7 Conduct on-going assessment of family conditions/dynamics	r		r	
8 Conduct announced home visits/assess for ongoing safety	r		r	
9 Conduct unannounced home visits/assess for ongoing safety	r		r	
10 Gather information to inform and update FAA-O domains	r		r	
11 Prepare a Family Functioning Assessment – Ongoing (FAA-O)	r		r	
12 Identify and contact local safety and service providers	r		r	
13 Develop a family change strategy and case plan	r		r	
14 Conduct ongoing family assessment of progress, safety/well-being	r		r	
15 Document case plan progress with case notes in FSFN/CCWIS	r		r	
16 Update a case plan	r		r	
17 Conduct a Unified Home Study	r		r	
18 Transport Children/Follow car seat safety protocols	r		r	
19 Develop parent and sibling visitation schedules	r		r	
20 Participate in a Children's Legal Services (CLS) Staffing	r		r	
21 Prepare court documents and verbal testimony for judicial cases	r		r	
22 Participate in dependency hearings (case plan update & TPR)	r		r	
23 Participate in a Multidisciplinary Staffing (not a case transfer)	r		r	
24 Participate in required supervisory consultations and staffings	r		r	
25 Determine achievement of conditions for return (of child)	r		r	
26 Follow policy for children on psychotropic and opioid medications	r		r	
27 Follow policy for missing children	r		r	
28 Follow policy and appropriately access Master Trust Funds	r		r	



Case Management Concepts and Procedures Checklist Verification Form

Case Management Concepts and Procedures Checklist Attestation Page

The qualified facilitator, the CM trainee, and the trainee's supervisor must sign this attestations page; each additional facilitator and the CM trainee will sign a separate additional attestation form (next page).

Qualified Facilitator Attestation: This qualified or lead facilitator of the below named trainee completes this section.

Full Name

Email Address

Title

Employer

I attest that I led _____ discussions and facilitated _____ observations with _____ as documented on the attached Case Management Concepts and Procedures checklists.

Do any aspects of the trainee's performance in discussions/observations give you concern about their ability to earn the CWCM-P certification? **If yes, attach a description of your concerns.*

r Yes*
r No

By my signature, I attest that the information documented on this form is true, and I consent to an interview, if requested by FCB staff, to discuss my experiences and documentation.

Signature (FCB accepts both manual and electronic signatures)

Date

Trainee Attestation: The trainee completes this section.

Full Name

Email Address

Do you have any questions or concerns related to the case management concepts and procedures you discussed with your qualified facilitator and/or your supervisor? **If yes, attach n additional page describing your concerns.*

r Yes
r No

By my signature, I attest that the information documented on this form is true, and I consent to an interview, if requested by FCB staff, to discuss my experiences and documentation.

Signature (FCB accepts both manual and electronic signatures)

Date

Supervisor Attestation: The immediate supervisor of the trainee named above completes this section.

Full Name

Email Address

I attest that I have reviewed the checklist with _____, and verified that all discussions and observations were completed, dated, and initialed by qualified facilitators. Additionally, I attest, that I have discussed field experiences with the trainee to address any questions and check for understanding of the core case management concepts and procedures enumerated on attached checklist.

r Yes r No

Do any aspects of the trainee's performance in discussions/observations give you concern about their ability to earn the CWCM-P certification? **If yes, please attach an additional page describing your concerns.*

r Yes*
r No

By my signature, I attest that the information documented on this form is true, and I consent to an interview, if requested by FCB staff, to discuss my experiences and documentation.

Signature (FCB accepts both manual and electronic signatures)

Date



Case Management Concepts and Procedures Checklist Verification Form

Additional Facilitator Attestation Page

ONLY use this page if there are multiple people serving as qualified facilitators for the CM trainee named below. Complete a separate page for each additional facilitator.

Qualified Facilitator Attestation: The additional qualified facilitator for the below named trainee completes this section.

Full Name

Email Address

Title

Employer

I attest that I led _____ discussions and facilitated _____ observations with _____ as documented on the attached Case Management Concepts and Procedures checklists.

Do any aspects of the trainee's performance in discussions/observations give you concern about their ability to earn the CWCM-P certification? **If yes, attach a description of your concerns.* r Yes*
r No

By my signature, I attest that the information documented on this form is true, and I consent to an interview, if requested by FCB staff, to discuss my experiences and documentation.

Signature (FCB accepts both manual and electronic signatures)

Date

Trainee Attestation: The trainee should complete this section.

Full Name

Email Address

Title

DCF Region

Do you have any questions or concerns related to the case management concepts and procedures you discussed with your qualified facilitator? **If yes, please attach a page describing your concerns* r Yes*
r No

By my signature, I attest that the information documented on this form is true, and I consent to an interview, if requested by FCB staff, to discuss my experiences and documentation.

Signature (FCB accepts both manual and electronic signatures)

Date