



# Certified Child Welfare Supervisor (CCWS) Application

## Observation Form: PROFESSIONAL CHILD WELFARE FOUNDATIONS

- ❖ This form documents the CCWS applicant’s demonstration of competencies in the PROFESSIONAL CHILD WELFARE FOUNDATIONS domain. Carefully read the *CCWS Observation Directions-7-1-2022.pdf* before conducting a rated observation.
  - a. The CCWS applicant completes Part 1 prior to the observation, provides the partially completed form to the individual conducting the observation, and signs Part 6 after receiving performance feedback.
  - b. The qualified professional conducting the observation/rating/follow-up performance consultation completes Parts 2 – 5, secures the signature of the CCWS applicant in Part 6, and submits ONLY the form that documents achievement of a three-point rating or higher to their Certification Point of Contact to forward to the FCB for processing.
  - c. Forms submitted for certification purposes must be typed.

**Part 1: Applicant Information.** Provide information exactly as it is associated with your CCWS applicant credential.

Name: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Part 2: Observer/Rater Information.** Enter requested information for the Qualified Professional who conducted the rated observation.

Observer/Rater Name: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Employer: \_\_\_\_\_

**Part 3: Observed Event Information.** Only observe events/work activities where the CCWS applicant is responsible for leading the event for a minimum of 30 consecutive observed minutes.

Date of Observation: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_  
 Type of Observation:  Face-to-Face Observation  Virtual Observation (*attach agency’s virtual supervision policy*)  
 Observed Work Activity:

<b>Sample PI Events</b>	<b>Sample CM Events</b>	<b>Sample LC Events</b>
<input type="checkbox"/> Supervisor reviews and consultations	<input type="checkbox"/> Supervisor reviews and consultations	<input type="checkbox"/> Supervisor reviews and consultations
<input type="checkbox"/> Rapid Safety Feedback	<input type="checkbox"/> Permanency meetings or staffings	<input type="checkbox"/> Delivery of Foster Parent Training
<input type="checkbox"/> Second Tier Consultation	<input type="checkbox"/> Legal Staffings	<input type="checkbox"/> Delivery of Licensing Staff Training
<input type="checkbox"/> Learning Circle (facilitate)	<input type="checkbox"/> Permanency Round Table	<input type="checkbox"/> QA review of initial/relicensing files
<input type="checkbox"/> CPI Certification Observation		<input type="checkbox"/> Over capacity waiver assessments and reviews
<input type="checkbox"/> Legal Staffings		<input type="checkbox"/> Other (describe below):
<input type="checkbox"/> Other (describe below):	<input type="checkbox"/> Other (describe below):	

**Part 4, sections A – D: PROFESSIONAL CHILD WELFARE FOUNDATIONS Competency Demonstration Documentation and Rating**

**A. Notate strengths and opportunities for improvement as demonstrated by the CCWS applicant.**



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**B. Check off each competency that was observed and discussed during the performance consultation.**

**PROFESSIONAL CHILD WELFARE FOUNDATIONS (5 competencies).** The competencies in this domain reflect the supervisor’s ability to demonstrate comprehensive knowledge of the child welfare system of care in order to promote employees understanding of why they are performing specified tasks and how their role fits within the overall system of care and impacts achievement of child safety, permanency, and well-being outcomes.

- Understand the roles and functions of the major employers of Child Welfare staff.
- Help employees develop systemic thinking about State’s efforts to achieve safety, permanency, and well-being for children by sharing knowledge of the “big picture”, including the interrelationships between major agency programs, systems, and activities and the individual employee’s actions or lack of actions.
- Possess a working familiarity with major theoretical models of supervision, methods of supervision, and teaching strategies.
- Teach and model professional child welfare best practices for employees to emulate.
- Use relevant resources and tools to ensure that the child welfare practices of employees align with the requirements established in federal laws, state statutes, administrative codes, operating procedures, and agency policies and procedures.

**C. Rate the CCWS applicants overall demonstration of PROFESSIONAL CHILD WELFARE FOUNDATIONS competencies.**

<input type="checkbox"/> Outstanding (5 points)	The supervisor consistently demonstrates extensive knowledge and understanding of the child welfare system. This includes having a thorough understanding of the function and role of all partners within the system of care and how to locate and apply statutes, administrative code, and operating procedures.
<input type="checkbox"/> Above Expectations (4 points)	The supervisor demonstrates an understanding of the child welfare system that exceeds expectations. Evidence of this includes displaying an understanding of the function and role of all partners within the system of care when conveying information and the application of statutes and operating procedures.
<input type="checkbox"/> At Expectations (3 points)	The supervisor demonstrates adequate knowledge of the child welfare system that meets expectations. This includes sufficient understanding of the function and role of all partners within the system of care when conveying information and the application of statutes and operating procedures.
<input type="checkbox"/> Below Expectations (2 points)	The supervisor demonstrates marginal child welfare system knowledge that is below expectations and with deficiencies. The supervisor may have a lack understanding of the function and role of all partners, may struggle with conveying foundational information, or may show a lack of comprehension regarding statutes and operating procedures.
<input type="checkbox"/> Unsatisfactory (1 point)	The supervisor fails to demonstrate an acceptable grasp of the child welfare system as evidenced by a complete lack of understanding of the roles and functions of key players, an inability to establish effective collaborative efforts, and the conveyance of misinformation that results in ineffective application of methods, statutes, and operating procedures.



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**D. Explain the reason for your rating, using behavioral examples. If additional coaching is necessary to achieve a 3-point or higher rating, include recommended strategies to prepare for future observations of the CCWS applicant's competency as it relates to PROFESSIONAL CHILD WELFARE FOUNDATIONS.**

**Part 5: Attestations.** To be completed by the qualified professional conducting the rated observation.

I have read the PROFESSIONAL CHILD WELFARE FOUNDATIONS domain competencies and understand how they are demonstrated on-the-job.  Yes  No

I conducted an eligible rated observation of the CCWS applicant for a minimum of 30 minutes, a follow-up performance consultation for a minimum of 15 minutes, as identified in Part 3 and described in Parts 4A-D.  Yes  No

**Final Rating PROFESSIONAL CHILD WELFARE FOUNDATIONS Competency Demonstration:**

Based on your direct observations and interactions with the CCWS applicant during the observation identified in Part 3, do you have any concerns about their ability to effectively perform PROFESSIONAL CHILD WELFARE FOUNDATIONS competencies under standard supervision?  Yes  No

I consent to an audit of related agency records to verify my attestation, if requested by FCB.  Yes  No

*By my signature, I attest that the above material is true.*

\_\_\_\_\_  
Qualified Professional Signature (FCB accepts both manual and electronic signatures)

\_\_\_\_\_  
Date

**Part 6: Verification of Observation and Performance Consult.** To be completed by the CCWS applicant.

I participated in the rated observation and performance consultation, focused on my demonstration of competencies in the PROFESSIONAL CHILD WELFARE FOUNDATIONS domain, as documented herein. The content of the observation and rating has been discussed with me in detail. My signature indicates knowledge and understanding of the contents of this form and does not necessarily imply agreement.  Yes  No

\_\_\_\_\_  
CCWS applicant Signature (FCB accepts both manual and electronic signatures)

\_\_\_\_\_  
Date