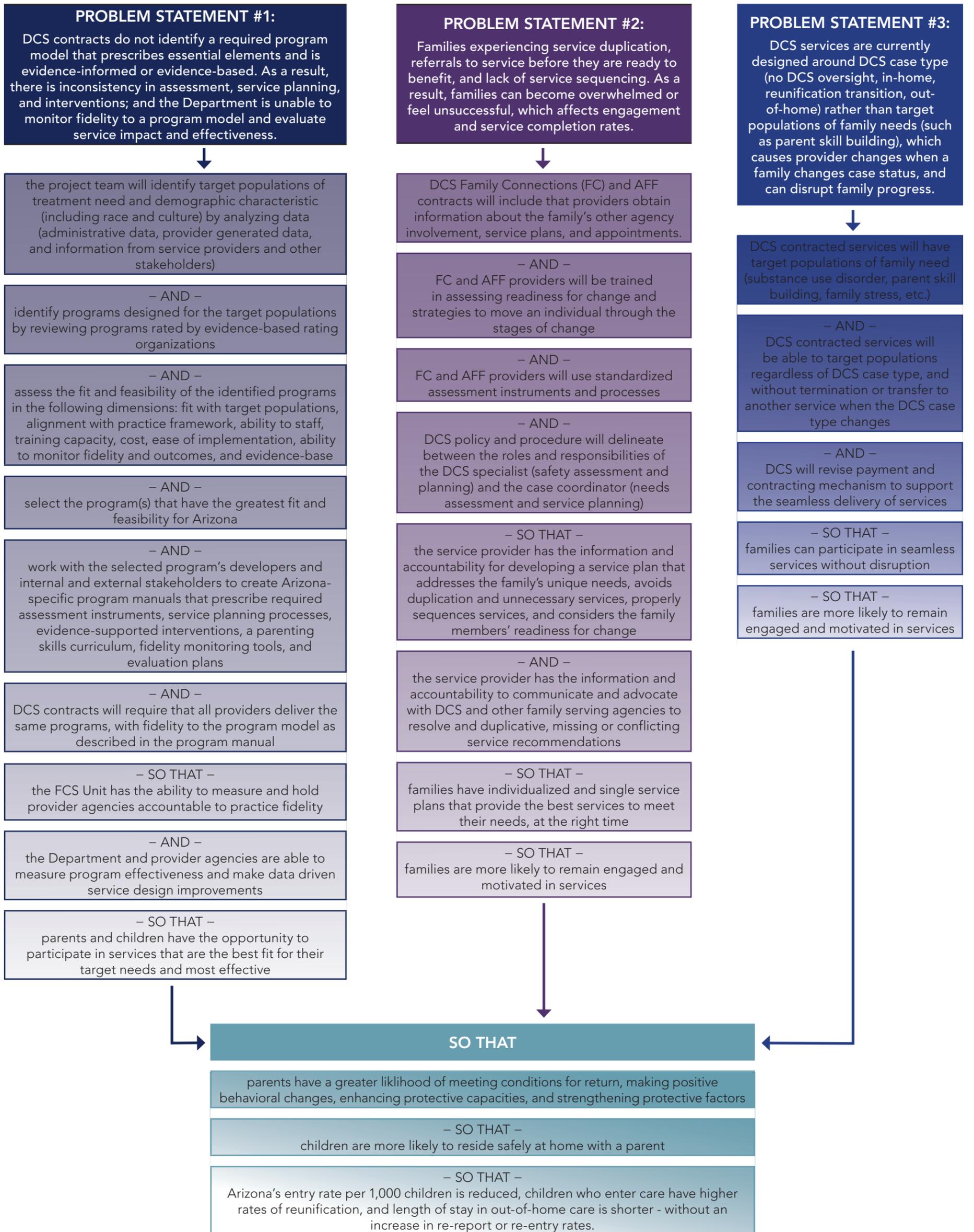


DCS SERVICE ARRAY THEORY OF CHANGE



DCS SERVICE ARRAY THEORY OF CHANGE WORKSHEET

A SERVICE ARRAY THAT IS:

1. Individualized to family need, culture, and readiness for change
 - Most likely to be successful in change when their basic needs are met and they are contemplating change
2. Based on family need not case status (in-home or out-of-home)
 - To avoid disruption of service and build new relationships at critical points, such as removal or reunification
3. Coordinated with other family-serving agencies
 - To receive the right services at the right time, without duplication and without overwhelming a family
4. Separates Safety Assessment & Planning from Needs Assessment & Service Planning
 - Clear role delineation with DCS as the safety experts and Service providers as the family needs experts
5. Naturally fits with Arizona's Safety and Risk Assessment models
 - Services strengthen Protective Factors and enhance Caregiver Protective Capacities so children are safe
6. Consistent across providers and regions
 - Everyone is speaking the same language and receives the same training
7. Science-based
 - Evidence the service will be effective and fidelity can be assessed

Individualized Relevant Engaging Coordinated Consistent Effective

ASSUMPTIONS

- Well-defined evidence-based programs that meet Arizona's needs related to fit and feasibility exist.
- Training is effective in developing practitioner ability to deliver programs with fidelity.
- Family-serving systems effectively collaborate with one another, provide requested information, and respond to advocacy by the FC Consultant.
- DCS Specialists conduct comprehensive and accurate impending danger assessment to identify dangers, diminished caregiver protective capacities, behavior change goals, and conditions for return.
- DCS Specialists communicate the results and conclusions of the impending danger assessment to the service provider, including UBSMART behavior change goals.
- With efficiency and accountability in the use of funds to meet the targeted needs of families, sufficiently funding exists to serve eligible families without waitlists.
- Provider agencies will be able to serve the full range of acuity (from moderate risk to unsafe with out-of-home care) with minimal case transfer.