

*Using Comprehensive Family Assessments
to Improve Child Welfare Outcomes*

I. Project Implementation

A. Major activities and accomplishments

1. Project Administration

Contracts with Consultants

- Cultural Consultants: During the period of this review three meetings and additional telephone consultations were held with our cultural consultants, Full Circle Community Institute, in order to plan the strategy for utilizing the cultural consultation. Our objective in using cultural consultation is to obtain culturally specific feedback to inform our new model and to assist us in recruiting consumer advisors for our Advisory Group. Full Circle was successful in recruiting African American and American Indian consumer advisors for our project during the period of this review. They provided initial training for the consumer advisors and conducted seven focus groups with them. Full Circle's efforts to recruit members for ongoing advisor roles and focus groups in the Hmong and Latino communities were not as successful. They have developed a strategy to address this problem that will be described below (see Section G).

A Full Circle staff member was present at our Advisory Group meeting in August and made a report on the consumer feedback received to date. The University of Minnesota researchers feel that the consumer feedback obtained by Full Circle is better and more useful than that obtained by the family interviews they have conducted due to the fact that the families who have agreed to be interviewed by the University seem to be only those who have had extremely positive experiences with their social workers. Consequently, the University would like to incorporate Full Circle's information in their evaluation (see "Changes" section below.)

- Training Contract: Lorrie Lutz of L3P Associates provided consultation and training which will be described below.

Ongoing Project Administration

- CFA Steering Committee: This group, composed of the key project staff from Ramsey County and the University of Minnesota meets twice each month. This bi-monthly meeting format continues to be an extremely valuable way to share information and do problem-solving.
- Advisory Group and Subcommittees: Due to the intensive focus on providing training and consultation for the two Child Protection Program units that were conducting a trial with our new CFA model, the Advisory Group only met once during the period of this review.

At that meeting in August it was decided to expand the membership of the group. It was felt that additional stakeholders would be able to bring important perspectives to the group as the project moves forward. The new members include the lead Child Protection county attorney, a Guardian Ad Litem supervisor, two Child Protection supervisors, and consumers who have had experience in the Child Protection system. It was also decided to increase the frequency of meetings to once every two months. The first meeting with our newly expanded membership is scheduled to be held at the end of October.

Service Quality Assurance Project (SQA): In August the Child Protection Program section became involved as a pilot project for the SQA project (previously referred to as the Medicaid Billing Project). As has been described in previous reports, this agency-wide project is aimed at improving Targeted Case Management rates and improving the agency's performance in audits by developing training and tools to promote standardized documentation and clinical practice in each program area. The aim of the SQA project is to "follow the golden thread" that connects assessment of needs and strengths, choice of services, effectiveness of services, and case outcomes.

To date the various sets of practice standards that pertain to Child Protection have been catalogued. These standards include Medicaid, CFSR, CFA, and Ramsey County Family and Children's Division standards. Next, the various sets of standards will be combined to create performance expectations for Child Protection workers. Following that step an audit tool will be developed for the performance expectations so that supervisors can track Child Protection workers' performance.

2. Planning and development of the CFA model

Activities Related to the Baseline Study of Family Assessment Processes in Child Protection Program Conducted by the University of Minnesota

- Family Interviews: An addendum to the Baseline Study Report reflecting the results of the interview was completed. (See attached)
- Time Study: An addendum to the Baseline Study Report reflecting the results of the time study was completed. (See attached)

Activities Related to the Baseline Study of Use of Assessment Protocols in Practice in Child Protection Intake in Ramsey County Conducted by the University of Minnesota

(The protocols used in the Child Protection Program baseline study, described in previous reports, were modified to reflect the Intake work duties, but the tools used were geared to the same CFSR items.)

Case Review: This was a review for baseline and interim assessment of practice changes since 2005 in Intake units. Sixty cases from traditional investigation and 60 cases from Family Assessment (Differential Response) were reviewed.

Family Interviews: Ten family interviews were conducted with families randomly selected from the 120 cases that were reviewed. There were not as many fathers available to be interviewed as had been anticipated. As was mentioned above the University of Minnesota would like to discontinue the family interviews and instead incorporate the consumer feedback obtained by Full Circle into their evaluation.

Focus Group: A focus Group was held with the supervisors of the three Child Protection Intake units. Focus groups with the staff in those units were conducted during the period of the previous review.

School Information Linkage: During this period the University of Minnesota matched all the children from the sixty cases of the Child Protection Program baseline study and the 120 cases of the Child Protection Intake baseline study to the statewide education data set through the MNLink system. Analysis of the data will take place during the next reporting period.

3. Implementation of the CFA model

- Controlled Trial: On April 1 the trial of the new CFA model began. Two Child Protection program units comprised of 15 social workers formed the intervention group for the trial. The workers applied the new model to all new cases as of 4/1/09 and to all cases that had been in Program no longer than six months as of 5/15/09. The trial extended through mid-September.
- Consultation Conference Calls: There were six case consultation phone calls with Ms. Lutz during the course of the controlled trial. Each call involved sending a case summary to Ms. Lutz in advance and then processing the case during the call. The calls were 90 minutes in duration. Many of these calls were well received, but on one occasion issues arose that were not able to be resolved during the call. This general issue will be discussed further in the "Lessons Learned" section below. In addition, there were several additional calls with Ms. Lutz and the managers during the trial period.
- Joint Unit Meetings for Intervention Group: The managers met with both units in the intervention group for five consultation/training sessions during the period of this review. These were 90 minute meetings where the model

was discussed, case situations were processed within the model, and there was an opportunity for staff to ask questions.

- Case Consultations with Managers: In order to supplement case consultation by the supervisors during the course of the trial, the two Child Protection managers and the Project Managers established “case consultation office hours” for staff. In order to keep the worker’s supervisor “in the loop” a summary of the consultation was written and given to the supervisor. Over half of the staff brought cases to consult with the managers on. General feedback from staff was that they viewed this as helpful.
- Revised Case Plan and Court Report Formats: Two working committees were established to revise the existing case plan and court report formats to bring them more into alignment with the terminology and concepts of the new model.
- Laptop Computers: All staff in the two units using the new model received laptop computers early in the trial. They found that the laptops made their work more efficient.
- Training of the Case Aides: The new model has implications for an expanded role in visitation monitoring for case aides. The “intentional visitation” feature of the new model calls for parents to practice and demonstrate the parenting skills and behaviors that will keep their children safe while they are having visits with them. Our case aides monitor many visits, and so they need to know which behaviors the parents are working to change and also be able to determine whether or not parents are demonstrating behavioral change. Midway through the controlled trial, we were able to establish new parameters for the case aide function. At that time training of the case aides was conducted to explain the model and their role within it.
- Fidelity Testing: In August the University began conducting preliminary fidelity testing with the two intervention units. They found that there was some confusion on the part of staff about various features of the new model and a need for additional supervision and consultation on the model by staff.
- Train the Trainer Manual: Lorrie Lutz of L3P Associates created a train the trainer manual (See Attached). The managers created a power point based on the manual and used it as the basis for one of the training sessions with the two intervention units described above.

4. Dissemination

a. Current

- Project Presentations: During the period of this review informational presentations about the project were held for several stakeholder groups. These groups included the Minnesota Department of Human Services administrative staff; representatives from vendor agencies that work on child protection cases; the Child Safety Advisory Team, an inter-agency and interdisciplinary team; the Guardian Ad Litem supervisory staff; the Children's Justice Initiative, a group of administrators from court related functions; and the Ramsey County Attorney's Office child protection attorneys. The new model was presented in each case, and a power point developed by Richard Coleman, Child Protection Program manager, was used. The new model was received very positively by all groups. The groups articulated a recognition that change is needed in the current child protection system, and they felt that the features of the new CFA model, e.g., using behaviorally based as opposed to compliance based case plans, were promising.

5. Sustainability N/A

6. Other activities N/A

B. Challenges/Barriers (See "Lessons Learned" Section)

C. Technical Assistance

- During the period of this report, there have been several calls for consultation with the Project Officer.
- Technical Assistance from J. Bell: See attached request for technical assistance from J. Bell and description of the circumstances that led to the request in the "Changes" section.

D. Changes (Additions and Deletions) from Original Application or Implementation Plan

Planning and Development of the CFA Model

The need to make changes in the timing of some planning, implementation, and evaluation activities has become clear to the project team. The awareness of the need began early during the controlled trial and was confirmed by the results of the University's preliminary fidelity testing toward the end of the trial.

During the preliminary fidelity testing the University found staff to be uncertain about many features of the new model, despite the fact that they were generally positive about it. The University evaluators believe that increased fidelity to the model is needed before an evaluation of the model can be undertaken. Therefore, we feel it is not appropriate to proceed with the evaluation plan as written, including the completion of a full case record review (in a controlled trial in case management) at this time.

Simultaneously, programmatic changes have necessitated a revision of the proposed evaluation plan. In particular, the Service Quality Assurance (SQA) project mentioned above (Section 1.A.), which seeks to develop worker job descriptions, naming conventions, and new documentation requirements. These changes are consistent with CFA and the newly developed model. However, only some of the changes that will be incorporated in the SQA project are incorporated into the current model. SQA is scheduled to be piloted early in Year 3 of the CFA grant and implemented agency-wide in the third quarter of Year 3. Because the SQA project shares numerous elements of the CFA model, significant intervention bleed- use of CFA components by the control group- will occur. This will be true in both the Program and Intake units.

In light of these unforeseen challenges, we are proposing modifications to the original plan: 1) rather than conduct a controlled trial evaluation in either Intake or Program, we propose to fully implement the model across all units in Child Protection (following the design and piloting for Intake) and subsequently conduct a comprehensive evaluation of the model in full implementation; 2) incorporate cultural consultants input into the model; and 3) conduct a formative evaluation of the implementation of CFA , including a more comprehensive evaluation of fidelity. (See attached proposal for a more complete description of the modifications.)

In addition, the proposed formative evaluation will give us much more information from which to assess what the needs of staff and supervisors actually are as they go about learning and implementing the new model. As has been mentioned in a previous report, the disbanding of one Child Protection Program unit during the period of the last report caused each of the remaining four supervisors to acquire more supervisees as well as additional functions to supervise. The new CFA model is heavily dependent on adequate supervision. It became clear early in the trial with the new model that some way to augment the capacity of the existing supervisors needed to be found. A partial, but only temporary, answer was found by instituting case consultation by the managers.

In order for Ramsey County to be able to understand how to go about providing adequate supervision of the model, it will help to have a deeper understanding of the questions and unclear areas for staff and about the level of understanding of the model by the supervisors. In addition, it will be helpful to us to understand what the time constraints are that the supervisors function under. Having a realistic assessment of the supervisors' available time is a precondition for planning for adequate supervision. The University is planning to conduct a "shadowing" project of each of the four Child Protection supervisors. Each of the supervisors will be continuously shadowed by a researcher for a period of a week in order to assist us in

understanding more completely what the actual supervisory capacity is. We are requesting the technical assistance of J. Bell in constructing the protocol for the shadowing project and training the researchers. (See attached request for technical assistance.)

Beginning CFA Model Design in Child Protection Program

The original design of our CFA project called for the new CFA model to be created and implemented in Child Protection Program rather than at the “front” of the system in Child Protection Intake. There were various reasons for this choice, including the fact that Child Protection Program staff were already using the Family Centered Assessment model. In addition, it was thought that the length of time that cases are worked with in Program and the relative stability of the work over time would make Program a suitable area for beginning the project.

During the course of our work thus far there have been reasons to rethink that original choice. Since our new model is based on a very deliberate analysis of what safety threats exist for the child and what behaviors of the parents cause the child to be unsafe, it seems logical that the front part of the case system would be the first area of development and application of the model. Staff in Child Protection Program have given abundant feedback that it is very difficult to obtain the key information about the child’s safety and the parents’ behaviors from the Intake staff because they have not been trained in the new model.

In any event, it seems completely clear that any jurisdiction considering adopting our model should apply the model to Intake staff and Program staff at the same time.

D. Activities Planned for the Next Reporting Period

1. Project Administration

Advisory Group and Subcommittees: the project Advisory Group will meet every two months due to the importance of providing on-going project information to our stakeholders and the importance for the project team of receiving their feedback. If needed, the subcommittees will meet in order to achieve specific objectives.

CFA Steering Committees: Team meetings of the project management staff from Ramsey County and the University of Minnesota will continue to be held regularly twice each month.

Cultural Consultants and Parent Response Focus Groups: Full Circle will continue their work with the already established African American and American Indian parent focus groups. In

addition to obtaining feedback from the groups to inform the implementation of our CFA model, they will assist the members to work with us in a consumer advisory capacity.

As was mentioned above, recruitment efforts in the Hmong and Latino communities have not been successful to date. During the next reporting period one of the directors of Full Circle plans to work directly with their Hmong and Latino staff who have attempted to do recruitment. In addition, the director has made contacts with a Hmong community agency and a Latino community agency. It is anticipated that these efforts will result in successful recruitment of parent response focus groups members from these two communities.

Also, the University will begin to incorporate the feedback from the parent response focus groups into their evaluation.

Service Quality Assurance Project (SQA): During the next reporting period the new SQA performance expectations mentioned above will be piloted in Child Protection Program. These performance expectations will incorporate some CFA standards. As part of the pilot the supervisors will utilize the newly created case audit tool.

In February the SQA pilot will be extended to Child Protection Intake.

2. Planning and Development of the CFA Model

Evaluation Activities: During the period of the next review the University will conduct formative evaluation including fidelity, costs, and management studies relating to Child Protection Program. It is hoped that the planning for the supervisor shadowing activity mentioned above in the “Changes” section will occur in November and that the actual shadowing will take place during the first two weeks of December.

Modification of the CFA Model for Child Protection Program: During the period of the next review the CFA model for Child Protection Program will be modified. The modification process will be based on the information gathered from the formative evaluation conducted by the University; the feedback of our training consultant, Lorrie Lutz; feedback from our Advisory Group and parent response focus groups; and feedback from social workers, supervisors, and managers involved in the controlled trial.

Planning and Design for CFA Model in Child Protection Intake: Planning for the expansion of the CFA model into Child Protection Intake will begin in January. Currently we are seeking volunteers from Intake to assist with this project. The design for Intake will be informed by the results of the University’s baseline study of Intake and by input from staff, supervisors, managers, external stakeholders and our consultant, Lorrie Lutz. Because our model was designed in Child Protection Program which is the “back half” of our system, we will need to create a “front half” that seamlessly and logically meshes with the parts of the model already created for program. We are currently involved in analyzing what the implications of the Program part of the model are for the design of the Intake model.

3. Implementation of the CFA Model

- Refinement of Case Plan and Court Report Formats: During the period of the next review, we will work with the two Child Protection Program units who formed the intervention group to refine the case plan and court report formats that we adapted to reflect the terminology and concepts of the new CFA model.
- Intentional Visitation: An important aspect of our model is intentional visitation, i.e., the practice of using visits between parents and their children as opportunities for parents to practice and demonstrate parenting skills and behavioral changes that are part of their case plans. We will continue to develop protocols for intentional visitation and to work with the parties who may be affected by this new practice: our case aides, foster parents, and staff from vendor agencies.
- Work with Vendor Agencies: We will modify our referral forms to vendor agencies to reflect the specific goals in the CFA case plans. The modified forms will contain language relating to the safety threats to the children and will list the specific behaviors that parents need to change. We will also work with the agencies to interpret to them new expectations that stem from the new model. We will be relying on them as one source of feedback about whether parents are making necessary behavioral changes.
- On-going Consultation with the Child Protection Units Who Were in the Intervention Group: On-going case consultation with the two units who formed the intervention group in the controlled trial will occur. The manager and supervisor will use case-mapping and other strategies to help clarify how to apply the new model to cases. Particular focus areas for on-going training and consultation will be: 1) how to write behaviorally based case plans; 2) how to describe the behavioral changes families need to make when dealing with vendors and stakeholders; and 3) how to determine whether behavioral change has taken place.

E. Attachments

- Logic Model
- Timeline
- Baseline Study Addendum on Family Interviews
- Baseline Study Addendum on Work Load Study
- Train the Trainer Manual
- Proposal for Modification of the CFA Project
- Request for Technical Assistance

Process Evaluation

This section should describe the implementation activities the project engaged in over the past six months, focusing on the key interventions/ activities delineated in the project’s logic model (as applicable to each demonstration project).¹

Process Evaluation				
Intervention/Activity	Outputs	Data Source or Measure	Challenges/Barriers	Lessons Learned
<i>a. State the Intervention/Activity</i>	<i>b. Indicate outputs for each activity in the logic model (e.g., number of trainings conducted, number of families served, or other project results. See project logic model)</i>	<i>c. Identify the data source or measure used (e.g., program records, administrative dataset, survey, case record review)</i>	<i>d. Describe challenges or barriers experienced regarding each activity (including how the project attempted to overcome challenges and the project’s success in the effort).</i>	<i>e. Include a description of any key lessons learned regarding program implementation.</i>
1				
2				
3				
4				
5				

(REPEAT the above format for each intervention/activity in the project logic model. The header row will repeat).

¹ *Examples of Key Activities:* Fidelity assessment of key components of CFA guidelines; Implementation of CFA family engagement and caseworker visit policies; Staff training, coaching, mentoring or other supports; Clinical supervision; Service referrals and utilization; Demographics of families served; and Other.

II. Practice Evaluation

This section should report on the evaluation activities the project has engaged in over the past six months, focusing on the key activities delineated in the project’s logic model that are related to practice outcomes (as applicable to each demonstration project).² The grantee may enter all planned activities and data collections as outlined in the logic model for the entire project period and indicate whether data analysis, findings, or challenges are applicable or not applicable to the current reporting period or will be forthcoming in later project years.

Practice-Related Outcomes						
Activity & Outcome		Data Collection & Analysis		Findings	Challenges	
<i>a. Identify the activity or activities associated with this outcome³</i> <i>b. State the anticipated outcome in measurable terms</i>		<i>c. Identify data collection method and source (e.g., case record reviews of agency files; interviews with agency staff; clients surveys; worker observations; agency administrative data, etc.)</i>		<i>d. Identify:</i> 1. <i>Timeframe(s) for data collection</i> 2. <i>Sampling frame and plan</i> 3. <i>Data analysis method</i>	<i>e. Present findings, if available</i> <i>f. Interpret findings:</i> 1. <i>What do findings mean?</i> 2. <i>What process-level⁴ factors may have influenced findings?</i> 3. <i>What are the implications of findings?</i>	<i>g. Discuss any challenges or barriers regarding the outcome</i>
1						
2						
3						
4						

(REPEAT the above format for each outcome in the project logic model. The header row will repeat.)

² *Practice-Related Outcomes:* Worker acquisition and utilization of CFA competencies (e.g., assessment, case planning); Uniformity of practice across work teams (as above); Establishment of effective working partnerships with families; Appropriate identification of needs and provision of services; Family involvement in case planning; Degree of client engagement with services; Timely initiation of services; Time spent with client; Other.

³ *Examples of Key Activities:* Implementation of current assessments and tools (site-specific); Implementation of new assessment approaches and tools (e.g., NCFAS (G&R), protective capacity assessment, Motivational Interviewing, FAF, etc.); Address multiple domains of family functioning; Implementation of family engagement/involvement strategies (e.g., focus on fathers and paternal kin, Parent Partners, family meetings, etc.); Use of culturally sensitive or competent approach to family engagement; Development of individualized, strength-based case plans; Ongoing assessments of progress and needs; Reassess family strengths/needs prior to case closure; Development of relationships with community service providers to enhance referral processes and service delivery ; and Other.

⁴ Contextual events, community changes, staff or client perceptions gathered during focus groups or interviews, barriers to specific intervention, etc.

III. Outcome Evaluation

This section should describe the evaluation activities that the project engaged in over the past six months, focusing on the key activities delineated in the project’s logic model that are related to the following outcomes (as applicable to each demonstration project. The grantee may enter all planned activities and data collections as outlined in the logic model for the entire project period and indicate whether data analysis, findings, or challenges are applicable or not applicable to the current reporting period or will be forthcoming in later project years.

- Children’s safety (CFSR 3-4); permanency (CFSR 5, 14, 15), well-being (CFSR 17-19; 21-23) outcomes
- Family functioning and/or capacity to provide for children’s needs (CFSR 17-20); family satisfaction
- Staff retention measured via caseworker job satisfaction survey, and resignation and transfer requests
- Other agency or system level outcomes

Outcomes						
Activity & Outcome		Data Collection & Analysis		Findings	Challenges	
<i>a. Identify the activity or activities associated with this outcome</i> <i>b. State the anticipated outcome in measurable terms</i>		<i>c. Identify data collection method and source (e.g., case record reviews of agency files; interviews with agency staff; clients surveys; worker observations; agency administrative data, etc.)</i>		<i>d. Identify:</i> 4. <i>Timeframe(s) for data collection</i> 5. <i>Sampling frame and plan</i> 6. <i>Data analysis method</i>	<i>e. Present findings, if available</i> <i>f. Interpret findings:</i> 4. <i>What do findings mean?</i> 5. <i>What process-level⁵ factors may have influenced findings?</i> 6. <i>What are the implications of findings?</i>	<i>g. Discuss any challenges or barriers regarding the outcome</i>
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(REPEAT this format for each short-term and intermediate outcome in the logic model. The header row will repeat. This format also can be used to report information on long-term outcomes, as information becomes available).

⁵ Contextual events, community changes, staff or client perceptions gathered during focus groups or interviews, barriers to specific intervention, etc.