Another Road to Safety/Family Maintenance in Alameda County:
A Case Study in Linking Practice to Outcomes
in Child Welfare Contracting

Katie Greaves

EXECUTIVE SUMMARY

It has long been the goal of the child welfare system to deliver high quality services to the children and families who come to its attention with the goals of maintaining children’s safety and achieving permanency for all children. Federal policy developments over the last ten years have created a new system of outcomes and accountability through which states and counties are required to organize their thinking and align their practices. This paper will describe how Alameda County has seized on this opportunity to build a local framework for understanding, communicating and achieving its goals.

Another Road to Safety (ars) is an example of one of the new initiatives launched in Alameda County after joining the Title IV-E waiver project. ars was created in response to an analysis of the local child welfare system, which identified the gaps in services for families that led to either an intensified involvement with or a reentry into the child welfare system. Due to myriad factors, Alameda County has entered a period of incredible change in the way child welfare is conceptualized and administered from the top management to the social workers in the field to partner organizations. Rather than relying on anecdotal data on how to effect the changes it desired, Alameda County used an evaluative approach by looking at data and best practices and establishing firm expectations about each new investment.

Based on the findings of this case study, it is recommended that Sonoma County Child Welfare Services should:

- Make it a priority to do a full inventory of its services to match up every service to an outcome or set of outcomes.
- Conceive and produce a logic model for each service type, including identification of an evidence base.
- Design an evaluation plan for each service contract.
- Align contracts with logic model, including outputs and outcomes.
- Evaluate the effectiveness of its contracted services.

For a modest investment of time—and an enormous leap of faith—Sonoma County could reap considerable benefits, both fiscally and in terms of client outcomes, by assessing and improving the effectiveness of its contracted services.

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Introduction

It has long been the goal of the child welfare system to deliver high quality services to the children and families that come to its attention with the goals of maintaining children’s safety and achieving permanency for all children. Federal policy developments over the last ten years have created a new system of outcomes and accountability through which states and counties are required to organize their thinking and align their practices. This paper will describe how one California county has seized on this opportunity to build a local framework for understanding, communicating and achieving its goals. The methods of analyses used for this case study were site visits, key informant interviews and document analysis.

The literature on child welfare outcomes and evaluation is scant. There is a plethora of reports on particular child welfare strategies, such as Parent Child Interaction Therapy. There is relatively little literature on how child welfare as a field has incorporated evaluation concepts and techniques into program planning, design and implementation. Nor have child welfare practices been mapped to desired child welfare outcomes. Much of the research in this area is focused on efforts to privatize child welfare itself.¹

Child Welfare Services in Sonoma County

Sonoma County is a semi-rural, midsized county located approximately 60 miles north of San Francisco. With a population of over 480,000,² Sonoma County is comprised of an urban core (Santa Rosa, Rohnert Park, Windsor) surrounded by more rural outlying cities and unincorporated areas. Child Welfare Services are administered via a central administration building with individual social workers stationed in outlying or strategically important locations in the community. In 2008, Sonoma County had over 500 dependent children in out-of-home care.

Many of the services provided to clients involved in the Sonoma County Child Welfare System are delivered by community-based organizations. Parent education, parenting support, substance abuse treatment, supervised visitation, etc. are contracted out to private, community-based providers who then deliver the services and charge fees for services rendered. Whether a client has achieved a desired outcome is decided by the social worker in consultation with the service provider. The quality of services delivered is evaluated, for the most part, by individual social workers based on their experiences with the service provider. Since a fee-for-service model is utilized in Sonoma County, service contracts do not include outcomes or outputs. Even though services are a primary intervention towards desired behavior changes (e.g., improved parenting, no substance abuse, etc.), Sonoma County does not have a way of determining, in the aggregate, if the practices employed by its contracted service providers are effective.

Outcomes in Child Welfare

Child welfare has a long history of articulating and rearticulating its goals (Kahn et al., 1999, pp. 15–24). Largely in response to changing political preferences, adverse media coverage and other external factors, the focus of the child welfare system has swung from

²http://www.sonoma-county.org/cao/citizens_guide/sonoma_county_population.htm
one extreme to another. For example, with one administration the focus may have been on family preservation with the goal of keeping families together; with another, or after a child fatality, the focus has shifted to child safety with the goal of moving kids more quickly into permanent adoptive homes. At the local level, local preferences and history of practice are paramount; changing foci are perceived on the ground to be faddish and are resisted as such. The specific interventions may not have changed, but they may have a new name or rationale.

In 1997, Congress adopted the Adoption and Safe Families Act (ASFA) which attempts to encompass the full spectrum of child welfare goals from family preservation to speedy adoptions. As such, it provides a federal framework for child welfare outcomes and requires states—and further down the food chain, counties—to organize their outcome measures accordingly. In California, AB 636 was the vehicle for conceptualizing child welfare outcomes and measures within the federal framework. For example, counties have ready access to their own performance on timely reunification, measured according to ASFA rules and as a percentage of the national target. Today counties, states, and the federal government have a common language with which to communicate about outcomes and performance measures. What is largely missing is evidentiary knowledge about the types of interventions or programs that achieve the intended outcomes.

While the body of evidence is growing on effective child welfare practice thanks to such sites as the Child Welfare Evidence-Based Clearinghouse, there is truly a dearth of evidence-based child welfare practices. Further, the child welfare system in general has neither a systematic method nor a historical tradition of evaluating social work practice in the aggregate form (see “Program Evaluation,” US Department of Health and Human Services, 2005). Thus, a disconnect exists—on the one hand there are an assortment of desired outcomes and performance measures; and, on the other hand, there is limited ability to identify and implement the practices known to achieve those outcomes.

### Charting a New Path

Since 2001, child welfare funding has remained relatively static and at a level that does not support optimal caseload standards. In fact, when the increased costs of doing business are taken into account, child welfare funding has effectively declined. This, combined with the complex mechanics of child welfare funding, has resulted in the inability of counties to evaluate their practices. There are simply not enough resources to undertake this task.

Alameda County began its adventure as a Title IV-E Waiver County in 2007. Alameda County recognized from the start that the waiver presented myriad opportunities to improve outcomes. First, whereas other counties did not have the “breathing room” to take a step back and evaluate their practices, Alameda County was in the position of conceptualizing what it wanted to achieve (guided by federal framework and AB 636) and identifying how best to get there, i.e. to engage in strategic planning. Therefore, Alameda County was afforded the opportunity to engage in proactive program planning rather than remaining continuously reactive. Second, the waiver provided flexibility in the mechanics of Alameda County’s Title IV-E funding, allowing savings to be reinvested into programs. Therefore, if Alameda County was able to achieve savings in the cost of out-of-home placement, it had a built-in funding source for new or redesigned program initiatives. Third, and largely due to the first two opportunities, the incentive was there for Alameda County to establish baseline data on client outcomes and include a rigorous evaluation component to all “new” strategies under the waiver. In fact, in speaking with managers in Alameda County, there appears to be consensus on using evaluation findings as a foundation for ongoing program planning. If a program does not achieve its desired outcomes in a way that is measurable, there is a good likelihood the program will either be redesigned or discontinued.

### Another Road to Safety/Family Maintenance

Another Road to Safety (ARS) is an example of one of the new initiatives launched in Alameda County
after joining the waiver project. ARS was created in response to an analysis of the local child welfare system, which identified the gaps through which families fell that led to either an intensified involvement with, or a reentry into, the child welfare system. The two primary gaps identified were at the front end and after reunification (see Attachment A, “Waiver Schematic Model”). Low-level preventive services may not be enough to stabilize families whose risk does not warrant a child removal but who are at risk of repeatedly coming to the attention of child welfare. At the other end of the continuum, many families require intensive supportive services after reunification to prevent re-entry into the child welfare system.

To address these gaps, ARS was devised to bolster the safety net for children at risk of out-of-home placement. Reducing the risk of out-of-home placement, and ultimately the number of children in out-of-home placement, is not merely a moral imperative. Clearly, one understands that foster care is not an ideal long-term solution for children. However, there are also fiscal and policy reasons to reduce the number of kids in out-of-home placement. The cost of foster care can be expensive especially for group care. For Alameda County, lowering the number of kids in placement allows them to use the placement dollars in other ways, including strengthening family support systems, which may be better for children in the long run. In terms of policy, moving children out of foster care or preventing their entrance into foster care is aligned with federal and state policy objectives as quantified for California via AB 636.

Alameda County is not unique in trying to reduce the number of children in out-of-home placement. Every county in California has moral, fiscal (albeit to a lesser degree) and policy directives to reduce the number of kids in foster care. What is unique about Alameda County is the purposeful way it is endeavoring to produce changes in its child welfare outcomes. ARS was created based on a solid grasp of how families move through the child welfare system, the types of interventions that are believed to be effective in stabilizing high risk families, the expected goals to be achieved from employing identified interventions and how Alameda County (and its partner agencies) will be able to recognize if the program is succeeding or failing in the short-, medium-, and long-term.

**ARS Evaluation Plan**

The specific program components of ARS are less important to this case study than the elements of the evaluation plan. At its core, ARS provides joint case management and coordinated service delivery between the families’ child welfare workers and the ARS/FM family advocates, employed by community-based organizations contracted to provide ARS services. Family support services include in-home parenting support and education, mental health and substance abuse education, referrals to other treatment providers, dependency court services, safety and risk assessment, developmental screening, and others.

Alameda County has developed a logic model (see Attachment B, “ARS/FM Impact Model”) to describe the relationship between the specific ARS programmatic strategies and their intended outcomes. The long-term goal of ARS is that families are supported in their communities and children are able to remain safely in their homes. ASFA, AB 636 and Alameda County’s 5-year Waiver Logic Model all legitimize this goal. The way that Alameda County will know if it is achieving its ARS goals is if the following indicators are present:

- Reduced number of children in out-of-home placement
- Reduced number of children re-entering the child welfare system
- Increased number of children who enter child welfare system but avoid out-of-home placement
- Increased number of parents with improved parenting sufficiency
- Increased number of eligible children developmentally screened and referred

The logic model also includes process measures, or outputs, that reflect the breadth and depth of the program’s implementation, including numbers of referrals, parents attending parenting classes, risk assessments, consultations/case meetings, etc. While
process measures do not directly relate to the achievement of outcomes, if the program theory is correct, process measures will indicate if the program is being implemented with fidelity to the design.

A rather extensive ARS/FM Evaluation Plan (J. Ulricks, Consultant Report, Program Evaluation and Research, Alameda County Dept. of Human Services, Oct. 1, 2008) has also been developed that expanded on the logic model by adding objectives, or quantified targets, established at the local level to describe the “amount of outcome” expected to be achieved in a given time period. For example, one ARS objective is that between December 30, 2008 and June 30, 2009 there will be a demonstrable reduction in risk of future maltreatment in 50% of families, as measured by SDM risk assessment scores. In addition to objectives, the ARS Evaluation Plan delineates how each objective will be measured, an identified data source, and the party responsible for data collection and reporting.

**ARS Status Report**

**ARS** was launched December 1, 2008. As a precursor to this, Alameda County conducted an analysis on the costs associated with its implementation in comparison to the anticipated benefits, in dollars, based on the stated objectives. It was determined that for **ARS** to be cost-neutral, 32 youth would need to be prevented from re-entering foster care each year. Success above this target would result in additional savings to be reinvested in other program interventions.

In sum, due to the myriad factors, including becoming a Title IV-E waiver county, SFERA, AB 636 and emerging data-driven trends in child welfare administration, Alameda County has entered a period of incredible change in the way child welfare is conceptualized and administered from the top management to the social workers in the field to partner organizations. Alameda County has been able to take a step back from the bustle of day-to-day crises and engage in strategic planning as a way to think about and decide what it wants to achieve for children and how. Rather than relying on anecdotal data on how to effect the changes it desired, Alameda County uses an evaluative approach by looking at data, best practices, and establishing firm expectations about each new investment. As Finance Director, Dan Kaplan, put it, “The IV-E Waiver changed the way we think about program design and contracting.” As **ARS** and other Alameda County initiatives move into full implementation, there will undoubtedly be much for other counties to learn.

**Implications for Sonoma County**

Even though Sonoma County does not participate in the waiver and thus is not presented with the same opportunity for change as Alameda County, there are a few lessons for Sonoma County to take away from this case study. First, the conceptual paradigm shift in the way Alameda County looks at, plans for, implements and evaluates child welfare programming can occur in non-waiver counties. While it may be easier to undertake such a monumental change with the flexibility of the waiver, it is not contingent upon participating in a waiver. The real obstacles to this type of visioning and strategic planning are money and time. There is not enough staff to cover the day-to-day crises in child welfare and find “breathing room” for proactive planning. Second, linking client outcomes, such as timely reunification, to particular program interventions based on a solid understanding of baseline data, effective program strategies and concrete evaluation protocols can assist counties in identifying and expanding effective programs and discontinuing ineffective programs. Third, embedding evaluation and desired client outcomes into child welfare contracting is useful for both the county and the contractor. For the county, it provides a framework for linking client outcomes to service strategies as well as a way to measure progress. For contractors, it offers a quantitative and concrete picture of the expectations of the funder which only serves to tighten and focus its service delivery. For both, and for the public, it promotes accountability in the use of public funds. Finally, employing Alameda County’s approach to program design, evaluation and contracting can produce cost savings and other benefits, i.e., fewer kids
or less time in out-of-home placement. The trick is finding the will, time and knowledge base to interrupt the status quo.

**Recommendations**

Based on the findings of this case study, Sonoma County Child Welfare Services should make it a priority to do a full inventory of its services to match up every service to an outcome or set of outcomes; conceive and produce a logic model for each service type, including identification of an evidence base; design an evaluation plan for each service contract; align contracts with logic model, including outputs and outcomes; and evaluate the effectiveness of its contracted services. Ultimately, there should be no service for which Sonoma County cannot state its intended purpose vis-à-vis AB 636 outcomes and understand and communicate its effectiveness.

**Action Plan and Fiscal Impact**

The recommendations stated above are not only huge tasks in and of themselves, they are also a marked change from the way child welfare services have been conceived and administered in Sonoma County for decades. It would be advisable for Sonoma County to implement the recommendations in increments, program by program. Table 1 illustrates a potential action plan for Stage 1 of this project.

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<th>Table 1</th>
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**Action Plan for Implementing Outcomes-Informed Contracting**

<table>
<thead>
<tr>
<th>Goal: Parent education strategies will be linked to child welfare outcomes in contracts with community based service providers</th>
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<tbody>
<tr>
<td>Task</td>
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<tr>
<td>Inventory current strategies/services for delivering parent education</td>
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<tr>
<td>Identify desired outcomes for parent education, linked to AB 636 measures</td>
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<tr>
<td>Research best (parent education) practices for achieving desired outcomes</td>
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<tr>
<td>Crosswalk best practices with current practices to identify possible program changes, expansions, eliminations</td>
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<tr>
<td>Examine current contracts for parent education to identify opportunities for either contractual changes or RFPs</td>
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<tr>
<td>Develop program theory, logic model and evaluation design</td>
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<tr>
<td>Develop RFP for parent education containing outcomes, objectives and evaluation</td>
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<tr>
<td>Release RFP, review proposals, select vendor(s)</td>
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<tr>
<td>Begin evaluation program, including establishing baseline data</td>
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Summary

It has long been the goal of the child welfare system to deliver high quality services to the children and families that come to its attention with the goals of maintaining safety and achieving permanency for all children. Federal policy developments over the last ten years have created a new system of outcomes and accountability through which states and counties are required to organize their thinking and align their practices. Alameda County has seized on this opportunity to build a local framework for understanding, communicating and achieving its goals. In doing so, Alameda County has paved the way for other counties, including Sonoma County, to re-conceptualize delivering services to its child welfare clients. For a modest investment of time—and an enormous leap of faith—Sonoma County could reap considerable benefits, both fiscally and in terms of client outcomes, by assessing and improving the effectiveness of its contracted services.

Acknowledgements

I wish to formally thank the individuals from Alameda County who graciously hosted my visits, provided me with an abundance of program information and answered all my questions. These individuals are Lori Jones, Kan Kaplan, Jennifer Oldricks and Michelle Love.

References


Attachment A
Waiver Schematic Model

SSA Foster Care System

2090 Children in Foster Care

Preventive Services
Help children stay out of FC

Post Care Services
Reduce the number of children returning to FC

Alternate Family Placement

Emancipation

Adopt/Guard

Reunify

FC Entry of Children

Re-Entry of Children into FC

292 GH $5415 per month

604 FFA $1945 per month

115 FH $630 per month

1079 Kin F $592 per month

292 GH $5415 per month

115 FH $630 per month

1079 Kin F $592 per month

2090 Children in Foster Care

$592 per month

$630 per month

$1945 per month

$5415 per month
Attachment B

ARS/FM Impact Model

Resources/Inputs

Agency funding to support three Community-Based Organizations in three high-risk communities:

- South Hayward
- East Oakland
- West Oakland

Trained ARS Family Advocates

ARS/FM

Provides joint case management and coordinated service delivery between the family's Child Welfare Worker and ARS/FM Family Advocate. Family Advocates provide a maximum of 6 months of intensive family support services for families with children 0 to 18 at risk of entering foster care:

- Families scoring moderate and high risk on SDM Risk Assessment and abuse and neglect allegations do not pose an immediate risk of serious harm and there is no current injury.
- Families that have recently entered into the Formal Family Maintenance Program subsequent to a child welfare dependency investigation or family reunification.

Program Activities

Child Welfare Services

Dependency court services
Assessment of Safety, Risk & Family Strength/Needs (SDM)
Team Decision Making
Parent Orientations

Jointly developed family care plan and coordinated delivery of services to assist families in meeting care plan goals and mitigate crisis.

ARS/FM Intensive Family Support Services

Comprehensive Family Assessments

Safety and Risk (SDM)
Child Development

Weekly home visitation

In-home parenting support & education

Mental health & substance abuse education

Referrals to other community based treatment providers

Basic needs assistance

Process Measures/Objectives

# of families served by the ARS/FM program (DR/FM, FR/FM, IFM)

# % of families who participated in a TDM (initial removal or reunification)

# documented TDM plans (CWS TDM Data)

100% of referred families will receive an SDM safety, risk, and FSN assessment (OW & ARS FA)
(CWS/SDM & ECChange Data)

All referrals to ARS/FM will be responded to within 7 days (ECChange Data)

# of parents attending parent orientations (Parent Engagement)

Case Plan engagement & compliance (CWS/CMS & ECChange Data)

Risk Reassessments at ARS/FM close (CWW & ARS FA)
(CWS/SDM & ECChange Data)

# homes visits provided (CWW & ARS FA)
(CWS/CMS & ECChange Data)

# of families receiving basic needs assistance (Provider receipts)

# of referrals to other CBOs (ECChange Data)

# bi-monthly case meetings with FM Program (Provider reports)

# consultations with SSA Child Courts Specialty Provider Team (Provider reports)

Interim Outcome Measures/Objectives

# of children who avoid foster care placement/

are able to remain safely at home during program

# families with lower assessed risk levels

# & % goal (CWS/SDM and ECChange Data)

# parents with improved parenting sufficiency

Which assessment, if any, may measure this? (ECChange Data)

At full staffing, projected annual service capacity (# families):*

- South Hayward = 260
- East Oakland = 280
- West Oakland = 48

Based on RFP case load guidelines, 6 month service maximum and # of projected family advocates.

(10 each in South Hayward & East Oakland, 2 in West Oakland)

Interim Outcome Measures/Objectives

# children with improved?

ARS Family Advocates will provide several child level developmental assessments, which may be relevant to track in achieving outcomes.

(CWS/CMS Data)

Long-term Outcome Measures

Families are supported in their communities and children are able to remain safely in their homes.

Reduce foster care caseload and associated placement costs.

- Caseload reduction (# & %)
- Caseload costs Fewer re-entries (# & %)

(CWS/CMS Data)

In FY 05/06 Among children who reunified after a placement of 8 or more days and went straight from a service component of DR to FM, 31% (46 children) had re-entered foster care by August 31, 2007. 6.7% of those re-entries occurred within 6 months.