# Another Road to Safety: A "Differential Response" to Child Maltreatment

#### Chua Chao

## **EXECUTIVE SUMMARY**

#### **Background**

Alameda County, on its own initiative, implemented a "Differential Response" program before Child Welfare Redesign made "Differential Response" buzz words throughout California. In response to AB636, many counties have implemented a Differential Response program as part of their program improvement efforts. Marin County, being one of the third cohort counties to implement Child Welfare Redesign, has the valuable opportunity to learn from other counties' experiences as it prepares to customize its own Differential Response program. Alameda County's Another Road to Safety (ARS) pilot program has been operating since 2002, and this study attempts to examine and identify some of the key elements that have contributed to its success and sustainability.

#### **Another Road to Safety Program**

The successful development and implementation of ARS was a result of a strong partnership between Alameda County Social Services Agency (SSA) and Alameda County First 5 Commission/Every Child Counts (ECC). ECC's \$1 million a year funding

from Proposition 10 helped launch and continues to support the ARS program. With this financial support and SSA's funding from other sources, the ARS program now operates in three communities in Alameda County: South Hayward, East Oakland, and recently West Oakland. In each site, a community-based organization (CBO) is contracted to provide full case management services for 50-75 families.

## **Implications for Marin County**

Although Marin County differs from Alameda County in many respects, the demographic distribution of needy families in Marin lends itself to a program like ARS. Like Alameda County, Marin also has pockets of poor neighborhoods. Child welfare data for 2005 indicates that 59% of children involved in reports of suspected child abuse and neglect in Marin County came from four zip code areas, three of which are contiguous neighborhoods. Located within these neighborhoods are CBOs which are already partners in Marin's Differential Response effort. It is recommended that Marin explore the feasibility of piloting a modified version of ARS in one of these neighborhoods using the resources of its CBO partners.

Chua Chao is a Social Services Unit Supervisor with Marin County Department of Health and Human Services.

## Another Road to Safety: A "Differential Response" to Child Maltreatment

#### Chua Chao

#### **Background**

Marin County, being one of the "third cohort" counties in Child Welfare Redesign, is in the early stages of implementing a Differential Response Program. It is making good progress towards building a collaborative with community partners in this effort but much work is needed to implement a sustainable program. This study comes at a critical time in the development of Marin's Differential Response Program as it does not yet have a well-defined model. Alameda County's Another Road to Safety (ARS) program has enjoyed great success, and we hope to explore the feasibility of implementing a modified version of this program in Marin County.

## **History of Another Road to Safety**

In 1997, the Child Welfare League of America (CWLA), at the request of the Alameda County Board of Supervisors, initiated a review of the county's Child Protective Services (CPS) program. Upon examining the county's data, CWLA discovered that 60% of the 19,100 reports that came into the emergency hotline in 1997 were screened out with no services. In addition, data from an earlier random sample study conducted by the UC Berkeley Center for Social Services Research in 1993-1994 showed that 62% of the screened out referrals in Alameda County had prior reports and of those closed after investigation, 71% had prior or subsequent reports of abuse and neglect. Based on these findings, the CWLA, in a report released in 1998, recommended a community-based system of response to child maltreatment with prevention and early intervention services.

In 1998, California passed Proposition 10, and the tobacco tax revenue generated from that initia-

tive was earmarked for improving the health and well-being of children, ages 0-5, and their families. The Alameda County First 5 Commission was created to facilitate, through this funding stream, the development and implementation of a community-based system of prevention and early intervention services in order to achieve better outcomes for children and families. The two agencies recognized the benefit of a partnership, as the 0-5 age group was the target population of both agencies. Another Road to Safety, initially named Alternative Response System, is the product of this partnership.

## **ARS Program Structure**

In preparation to pilot ARS, two neighborhoods in Alameda County—East Oakland and South Hayward—were identified as the initial pilot sites due to their high rates of child abuse and neglect reports. After months of planning and numerous community studies, including focus groups, in-home surveys, asset mapping (identifying community resources in a neighborhood), and an exploration of community-based strengths and needs, ARS launched its program in 2002. La Familia was chosen as the lead agency in Hayward, and Family Support Services of the Bay Area (FSSBA) was selected to serve the East Oakland neighborhood.

Alameda County Social Services Agency (SSA) entered into a memorandum of understanding with the Alameda County First 5 Commission/Every Child Counts (ECC) to oversee the service delivery and monitoring of ARS contractors. ECC contracted with La Familia and FSSBA to provide case management services to ARS families. In addition to providing ARS agencies with on-going technical support, training, consultation, and data collection,

ECC has been providing ARS with \$1 million per year financial support. With this funding, along with additional Title IV-E funding through SSA, ECC provides each of the two agencies with \$500,000.00 per year in grants as well as on-going training and support. Each agency is expected to serve 50-75 families per year.

In November 2005, ARS added a third site, the Prescott Joseph Center, in West Oakland. Unlike La Familia and FSSBA, Prescott Joseph is a direct contractor of SSA and is not funded by ECC. SSA, through a federal grant from the Administration of Children and Families, provides Prescott Joseph with a \$424,000.00 a year grant to provide case management services to 45-50 ARS families in West Oakland. Because it is not funded through ECC, Prescott Joseph is able to serve families with children up to age 18. Although they continue to report data to ECC and receive training through ECC, Prescott Joseph staff receive their support primarily from SSA.

## **Key Program Components**

Although all three ARS sites differ from each other in many ways—including the communities they serve, the political atmosphere in their neighborhoods, and the strengths and needs of their community-based organization (CBO) partners—they all share the following key elements of ARS:

- Each agency was identified as the lead agency in a local collaborative of CBOs.
- Each site consists of a director, a clinical supervisor, and three case managers.
- All case managers receive initial and on-going training on relevant topics, including training on the application of Structure Decision Making (SDM) assessment tools.
- Social Workers/Family Advocates are trained to perform assessments using the following tools: SDM Risk and Safety Assessments, Ages and Stages Questionnaires (ASQ), Ages and Stages Questionnaires: Social-Emotional (ASQ: SE), Edinburgh Depression Scale, and 4Ps Plus Screen for Risk of Alcohol and Drug Abuse.

- Each Social Worker/Family Advocate carries a maximum 13 family caseload.
- Families receive ARS services for a maximum of nine months.
- All three sites collect and record client data on ECC's secure web-based information system ECChange.

#### **The Referral Process**

Families are referred to ARS if they meet the following criteria:

- The referral was evaluated out (EO) as not meeting CPS criteria to open an investigation;
- The family lives within one of the three ARS neighborhoods based on their address zip code; and
- If the family lives in the East Oakland or South Hayward neighborhoods, there is at least one child under the age of 5 or a pregnant mother in the home.

After reviewing the referral, an Emergency Response supervisor faxes the referral over to the appropriate ARS agency. The ARS receiving agency has seven days to make contact with the family either by phone or by mail to set up a home visit. The clinical supervisor and the Social Worker/Family Advocate conduct the initial home visit together. At this initial home visit, ARS staff explains the reason for their visit; that a report of abuse or neglect was made on the family but that the nature of the report did not meet CPS criteria for an investigation.

After staff describe ARS services, families can either accept or decline services. Families are told that participating in ARS is voluntary but if they refuse services, ARS will notify CPS of their refusal. Families who accept services are asked to sign consent forms allowing ARS staff to share their information with other CBOs and perform assessments, including SDM Safety and Risk Assessments. Based on the results of the SDM assessment, ARS staff may refer families back to CPS for intervention if there are safety factors that cannot be mitigated with an ARS safety plan.

#### **Signs of Success**

ARS is a well thought out and well-planned program with much community support. Although it is too early to tell what challenges the Prescott Joseph site will encounter, data on the other two pilot sites show promise for county-wide implementation of ARS. Between October 2002 and September 2004, Alameda County CPS screened out 17,011 calls, of which 1,798 were families who lived in the ARS program neighborhoods. Due to ECC's funding limitations, only 319 families were referred to ARS. Of those referred, ARS was able to provide full case management services to 146 families; of the remainder, 4 were referred to other CBOs, 4 were pending assessments, 165 were returned to CPS. Although ARS was originally designed to serve low to moderate risk families, the program has been able to serve some high to very high risk families. Statistics on recidivism rates for families served by ARS show positive results: six months after receiving ARS intervention, only 4 of 79 families had substantiated reports to the CPS hotline.

#### **Next Steps**

Alameda County SSA's contract with ECC will end in June 2007, which means La Familia and FSSBA will become SSA's direct contractors. Now that three sites are successfully operating, the next phases of ARS include expanding the program countywide and incorporating Path 2 referrals (cases where ARS and CPS initiate a joint response) into ARS.

#### **Implications for Marin County**

This study has tremendous implications for Marin County. Currently the Differential Response Program in Marin is a collaborative consisting of Marin County CPS and four CBOs: Marin Advocates for Children, Coordinated Youth Services Council, Canal Alliance, and Family Service Agency (FSA) of Marin. Two part-time liaisons conduct follow-up phone calls to cases evaluated out as not meeting CPS criteria for investigation. If contacted, the families are referred to either Canal Alliance or FSA for

services. Neither of these CBOs provides case management services to Differential Response clients, and they are paid for the number of hours of services provided to clients. A program like ARS would address the following challenges currently faced by the Differential Response Program in Marin:

- 1 Due to confidentiality issues, the liaisons are not able to share clients' information with CBOs;
- **2** Without case management services, families do not receive the benefit of a full assessment or assistance with additional services they may need;
- **3** Families who are most in need of services are less likely to follow through without support;
- 4 Data collection is difficult due to lack of on-going assessments and monitoring; and
- 5 Sustainability is challenging because the current program structure does not lend itself to helping the CBOs leverage future funding on their own.

Although Marin County is much smaller than Alameda County in population size and its CPS client demographics may be somewhat different, the concentration of client population is conducive to a program like ARS. Data from Child Welfare Services/ Case Management System (CWS/CMS) show that 26% of the Marin County children associated with child abuse and neglect reports in 2005 came from the 94901 zip code area, which encompasses the primarily poor and Hispanic Canal neighborhood of San Rafael. The next three zip code areas (94903, 94947, and 94949) with the highest report rates (33% combined) are contiguous neighborhoods in central San Rafael and southern Novato. Canal Alliance is a well-established agency near the Canal neighborhood providing an array of services to the primarily Hispanic clients of central Marin. FSA, located in the 94903 zip code area, is ideal for serving clients of central San Rafael and southern Novato.

#### **Recommendations**

I highly recommend that Marin County re-evaluate its current Differential Response strategy and consider a pilot project before expanding the program county-wide. Given the limited funding resources, the demographics of our client population, and the location of the participating CBOs, I recommend the following steps for Marin County:

- Pilot Differential Response in the 94901 zip code area using Canal Alliance as a lead agency.
- Explore the possibility of utilizing existing staff at Canal Alliance to provide program management and clinical supervision.
- Given current funding limitations, start with one full-time case manager.
- Identify assessment tools to be used and train case managers on their usage.
- Explore the possibility of paying for case managers to participate in ECC's initial and on-going training.
- Utilize the Youth Pilot Project waiver to allow for sharing of information between CPS and Differential Response CBOs.
- Establish protocols for on-going monitoring, evaluation, and problem solving.

#### **Acknowledgements**

I would like to thank Alameda County Social Services Agency for giving me this valuable opportunity to study the ARS program. I especially want to express my gratitude to Michelle Love, Program Manager at Alameda County Social Services Agency, for organizing the many site visits; Carla Keener, Contractor Liaison at First 5 Alameda County/Every Child Counts, for providing me with valuable information on the history and development of ARS; and Ouida Cooper-Rodriquez, Program Director at Prescott-Joseph Center, for sharing her experiences with starting a new ARS site. Also, many thanks to Aisha Brown, Aide to Alameda County Supervisor Keith Carson, Melissa Shick, Financial Analyst at Alameda County Social Services Agency, and Greta Filligim, Clinical Supervisor at La Familia, for answering my many questions about the political, financial, and community aspects of ARS. Thank you to Martin Graff, Program Manager at Marin County Health and Human Services, for editing my paper and providing me with CWS/CMS data for this study.

#### Resources

Conley, A. "Another Road to Safety: Program Replication Guide"

First 5 Alameda County's website: www.ackids.org ECChange First 5 Annual Report 2003-2004.