

# 10

## PRACTICES

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**MAKING THE BUSINESS CASE**

**RESEARCH AND REFERENCES FOR  
10 PRACTICES AND APPENDICES**

PART TWO

The Annie E. Casey Foundation is a private philanthropy that creates a brighter future for the nation's children by developing solutions to strengthen families, build paths to economic opportunity and transform struggling communities into safer and healthier places to live, work and grow. For more information, visit [www.aecf.org](http://www.aecf.org).

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This publication supports *A child welfare leader's desk guide to building a high-performing agency: 10 practices*, which can be found at [www.aecf.org](http://www.aecf.org).

## **MAKING THE BUSINESS CASE:** Research and References on the 10 Practices

Child welfare leaders need to do what's right to protect children and families. But they also need to be able to communicate why certain practices and approaches are best to their staff, stakeholders, providers and budget decision makers. The following pages include research and materials on the 10 practices described in the *A child welfare leader's desk guide to building a high-performing agency: 10 practices*. They are not meant to cover the waterfront or serve as in-depth literature reviews. But they may be helpful as agency leaders, staff and stakeholders chart a course toward agency improvement.

Also included are four appendices that will help agency staff learn more as they identify and install improvements.

- Appendix 1 describes Casey innovations and strategies.
- Appendix 2 lists states that have extended foster care to age 21.
- Appendix 3 describes how to use Entry Cohort Longitudinal Data.
- Appendix 4 describes how to measure racial and other disparities.

## INTRODUCTION

*For background materials on child welfare budgeting and funding, see:*

Annie E. Casey Foundation. (2013). *When child welfare works: Reforming federal financing to support best practices in foster care*. Baltimore, MD: Author. Retrieved from [www.aecf.org/blog/when-child-welfare-works-reforming-federal-financing-to-support-best-practi/](http://www.aecf.org/blog/when-child-welfare-works-reforming-federal-financing-to-support-best-practi/)

Child Trends. (2014). *Federal, state, and local spending to address child abuse and neglect in SFY 2012*. Bethesda, MD: Author. Retrieved from [www.childtrends.org/?publications=14383#sthash.UMNmCugR.dpuf](http://www.childtrends.org/?publications=14383#sthash.UMNmCugR.dpuf)

State Policy and Advocacy Reform Center and First Focus. (2014). *Child welfare policy primer: A guide for advocates, policymakers, and others interested in child welfare policy reform*. Washington, DC: Authors. Retrieved from <http://childwelfaresparc.org/child-welfare-policy-primer-a-guide-for-advocates-policymakers-and-others-interested-in-child-welfare-policy-reform/>

U.S. House of Representatives, Committee on Ways and Means. (2012). Chapter 11: Child welfare. In *Green book*. Washington, DC: Author. Retrieved from <http://greenbook.waysandmeans.house.gov/2012-green-book/chapter-11-child-welfare>

*What does research say about how to understand child welfare indicators and measures?*

No child welfare indicator or measure can be viewed in isolation. Changes in how the system operates at one stage of the cycle may have significant consequences for outcomes at later stages.

- University of California at Berkeley, School of Social Welfare. (2005). *Understanding and measuring child welfare outcomes (an evidence for practice report)*. Berkeley, CA: Bay Area Social Services Consortium. Retrieved from [http://cssr.berkeley.edu/bassc/public/outcomes\\_summ.pdf](http://cssr.berkeley.edu/bassc/public/outcomes_summ.pdf)

## **PRACTICE #1** Focus on Child and Family Outcomes

*What does research say about the need for agencies to have good data practices, assess quality of services and focus on child and family outcomes?*

A 2001 federal mandate holds states accountable for child welfare outcomes.

- University of California at Berkeley, School of Social Welfare (2005). *Understanding and measuring child welfare outcomes (an evidence for practice report)*. Berkeley, CA: Bay Area Social Services Consortium. Retrieved [http://cssr.berkeley.edu/bassc/public/outcomes\\_summ.pdf](http://cssr.berkeley.edu/bassc/public/outcomes_summ.pdf)

A 2011 study found that case reviews conducted in a timely manner that involve parents, legal system representatives and foster parents predicted both positive permanency outcomes and reduced length of time in out-of-home care.

- Whitaker, T. (2011). Administrative case reviews: Improving outcomes for children in out-of-home care. *Children and Youth Services Review*, 33(9), 1683–1708. doi: 10.1016/j.childyouth.2011.04.034

Using point-in-time or exit cohort data to track outcomes may lead to the incorrect assessment of a system's effectiveness because they do not include all children. By valuing each child's experience equally — no more and no less than each deserves — longitudinal data can accurately capture the system's performance

- Courtney, M., Needell, B., & Wulczyn, F. (2004). Unintended consequences of the push for accountability: The case of national child welfare performance standards. *Children and Youth Services Review*, 26(12), 1141–1154. doi: 10.1016/j.childyouth.2004.05.005

Child welfare IT systems have historically had limited capacity to routinely and efficiently collect and analyze data to inform real-time policy decisions, practice, service development and performance.

- Pindus, N., Zielewski, E., McCullough, C., & Lee, E. (2008). *Ensuring quality in contracted child welfare services: Topical Paper #8*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Retrieved from <http://aspe.hhs.gov/hsp/07/cwpi/quality/>

Technology has the power to influence policy, practice and management decisions. The private sector has realized this and is investing in modern technology. State government can likewise benefit.

- Feely, K., & Gill, S. (2011). Casebook: The power of social networking technology to change policy, practice and management. *Policy and Practice* (American Public Human Services Association), 69(4), 12–15. Retrieved from [http://casecommons.org/newsite/wp-content/uploads/2014/08/pp\\_august\\_11.pdf](http://casecommons.org/newsite/wp-content/uploads/2014/08/pp_august_11.pdf)

Cross-agency data sharing is important for case management, accountability and efficiency, and benefits the families being served. It is possible with modern technology to enable secure and private data sharing for greater integration of data and services.

- U.S. Government Accountability Office. (2013). *Human services, sustained and coordinated efforts could facilitate data sharing while protecting privacy*. Washington, DC: Author. Retrieved from [www.gao.gov/assets/660/652058.pdf](http://www.gao.gov/assets/660/652058.pdf)
- U.S. Department of Health and Human Services, Administration for Children and Families. (2013). *Program Instruction ACF-OA-PI-13-01: Waiver process for the use of federal funding for commercial off-the-shelf software products*. Washington, DC: Author. Retrieved from [www.acf.hhs.gov/sites/default/files/cb/acf\\_oa\\_pi\\_13\\_01.pdf](http://www.acf.hhs.gov/sites/default/files/cb/acf_oa_pi_13_01.pdf)

*For more information about child welfare outcomes, see:*

The child welfare outcomes website of the Children’s Bureau, which provides links to a variety of reports related to child welfare outcomes ([www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/cwo](http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/cwo)).

The Center for State Child Welfare Data website, which includes information on child welfare outcomes and quality improvement approaches (<https://fcda.chapinhall.org>).

The website for Kids Insight, an independent nonprofit organization that developed the Treatment Outcome Package, which measures child well-being (<http://kidsinsight.org>).

*For more information on quality review processes, see:*

The Annie E. Casey Foundation & the Center for the Study of Social Policy. (2011). *Counting is not enough: Investing in qualitative case reviews for practice improvement in child welfare*. Baltimore, MD: Author. Retrieved from [www.aecf.org/resources/counting-is-not-enough/](http://www.aecf.org/resources/counting-is-not-enough/)

The Annie E. Casey Foundation & PolicyLab at Children’s Hospital. (2014). *Implementing ChildStat: A how-to guide for child welfare and other client-serving systems*. Retrieved from <http://www.aecf.org/resources/implementing-childstat/>.

*For information on Results-Based Accountability, an outcomes management framework, see:*

The Fiscal Policy Institute website (<http://resultsaccountability.com/>).

## **PRACTICE #2:** Emphasize Human Resources, Training and Supervision

### *What does research say about the need to focus on human resources, training and supervision?*

Positive organizational climates can improve clients' receipt of services.

- Glisson, C., & Green, P. (2005). The effects of organizational climate and culture on the access to mental health care in child welfare and juvenile justice systems. *Administration and Policy in Mental Health and Mental Health Services Research*, 33(4), 433–448. doi: 10.1007/s10488-005-0016-0

Low turnover correlates to lower incidence of re-abuse and greater compliance with required time frames.

- Wagner, D., Johnson, K., & Healy, T. (2009). *Agency workforce estimation: Simple steps for improving child safety and permanency*. Madison, WI: Children's Research Center. Retrieved from [www.nccdglobal.org/sites/default/files/publication\\_pdf/focus\\_09\\_agency\\_workforce\\_estimation.pdf](http://www.nccdglobal.org/sites/default/files/publication_pdf/focus_09_agency_workforce_estimation.pdf)
- National Child Welfare Workforce Institute. (2005). *The relationship between staff turnover, child welfare system functioning, and recurrent child abuse*. Albany, NY: Author. Retrieved from [www.ncwwi.org/files/Caseload-Workload\\_1pager2.pdf](http://www.ncwwi.org/files/Caseload-Workload_1pager2.pdf)
- U.S. Government Accountability Office. (2003). *Child welfare: HHS could play a greater role in helping child welfare agencies recruit and retain staff*. Publication No. GAO-03-357. Washington, DC: Author. Retrieved from [www.gao.gov/new.items/d03357.pdf](http://www.gao.gov/new.items/d03357.pdf)

Training must be flexible, recognize different needs and levels of learning based on unit and tenure, and address the competencies that managers and supervisors need to lead.

- Rycus, J.S., & Hughes, R.C. (2000). *What is competency-based in-service training?* Columbus, OH: Institute for Human Services. Retrieved from [www.narccw.org/TRAINet/Resource%20Paper%201.pdf](http://www.narccw.org/TRAINet/Resource%20Paper%201.pdf)

The supervisory model should align with the practice model and the agency's views on the roles, responsibilities and expectations of supervisors. Supervision should mirror agency values related to working with clients. Also, effective coaching and learning occur when individual and group supervision time is protected.

- Hess, P., Kanak, S., & Atkin, J. (2009). *Building a model and framework for child welfare supervision*. Washington, DC: National Resource Center for Family-Centered Practice and Permanency Planning: National Resource Center for Organizational Improvement, U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved from <http://muskie.usm.maine.edu/helpkids/rcpdfs/BuildingAModelandFrameworkforCWSupervision.pdf>



Conceptualizing the supervisory role as coaching and mentoring improves outcomes beyond simple compliance tracking. Supervisors need easy access to data that are connected to both process and outcomes — ideally at the caseworker or child level — and the capacity to use data to enhance workers' skills.

- Hess, P., Kanak, S., & Atkin, J. (2009). *Building a model and framework for child welfare supervision*. Washington, DC: National Resource Center for Family-Centered Practice and Permanency Planning, National Resource Center for Organizational Improvement, U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved from <http://muskie.usm.maine.edu/helpkids/rcpdfs/BuildingAModelandFrameworkforCWSupervision.pdf>

Some public child welfare systems lose up to a third of their staff every year. Poor-quality supervision is one of the most cited reasons workers leave. The financial impact of high turnover is an estimated one-third of a worker's annual salary times the number of people who leave. A stable workforce leads to better outcomes for children — 75 percent of children with only one caseworker achieved permanency compared to only 17 percent of children with two caseworkers.

- Sudol, T. (2009). *Workforce issues in child welfare*. New York: National Resource Center for Family-Centered Practice and Permanency Planning. Retrieved from [www.hunter.cuny.edu/socwork/nrcfcpp/info\\_services/Sudol\\_Info%20Pack\\_Workforce%20Issues\\_Aug%202009.pdf](http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/Sudol_Info%20Pack_Workforce%20Issues_Aug%202009.pdf)

One child welfare agency increased teen exits to permanency from 40 percent to 54 percent over five years after implementing a supervision model aligned with the agency's practice model.

- Frey, L., LeBeau, M., Kindler, D., Behan, C., Morales, I.M., & Freundlich, M. (2012). The pivotal role of child welfare supervisors in implementing an agency's practice model. *Children & Youth Services Review*, 34(7), 1273–1282. doi: 10.1016/j.childyouth.2012.02.019

### *What materials, tools or websites can help agencies learn more?*

The Center for the Study of Social Policy. (2002). *Improving the quality of human services through results-oriented human resource management*. Washington, DC: Author. Retrieved from [www.cssp.org/publications/child-welfare/child-welfare-misc/improving-the-quality-of-human-services-through-results-oriented-human-resources-management.pdf](http://www.cssp.org/publications/child-welfare/child-welfare-misc/improving-the-quality-of-human-services-through-results-oriented-human-resources-management.pdf)

The North American Resource Center for Child Welfare website includes information on competency-based child welfare training ([www.ihs-trainet.com/training.htm](http://www.ihs-trainet.com/training.htm)).

The Workforce Planning Portal provides hands-on tools and resources for human resources ([www.cpsr.us/workforce\\_planning.html](http://www.cpsr.us/workforce_planning.html)).

### **PRACTICE #3: Develop a Broad Service Array**

#### *What does research say about developing a service array?*

In-home service models have been shown to increase reunification rates and decrease reentries.

- Child Welfare Information Gateway. (2011). *Family reunification: What the evidence shows*. Washington, DC: Author. Retrieved from [www.childwelfare.gov/pubs/issue\\_briefs/family\\_reunification/family\\_reunification.pdf](http://www.childwelfare.gov/pubs/issue_briefs/family_reunification/family_reunification.pdf)

In a national sample, access to services was a challenge for many agencies. More than one-quarter of child welfare directors reported inadequate access to children's mental health services; 55 percent reported inadequate access to children's substance abuse services. Inadequate access to the same services for adults was reported by 37 percent and 24 percent of directors, respectively.

- Casanueva, C., Horne, B., Smith, K., Dolan, M., & Ringeisen, H. (2011). *NSCAW II baseline report: Local agency* (OPRE Report #2011-27g). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from [www.acf.hhs.gov/sites/default/files/opre/nscaw2\\_local\\_agency.pdf](http://www.acf.hhs.gov/sites/default/files/opre/nscaw2_local_agency.pdf)

An agency service array should focus on keeping as many children growing up in families as possible, using group placements only for short-term, therapeutically focused care.

- Dozier, M., Kaufman, J., Kobak, R., O'Connor, T.G., Sagi-Schwartz, A., Scott, S., Shaffer, C., Smetana, J., Van IJzendoorn, M.H., & Zeanah, C.H. (2014). Consensus statement on group care for children and adolescents: A statement of policy of the American Orthopsychiatric Association. *American Journal of Orthopsychiatry*, 84(3), 219–225. doi: 10.1037/ort0000005. Retrieved from [www.apa.org/pubs/journals/features/ort-0000005.pdf](http://www.apa.org/pubs/journals/features/ort-0000005.pdf)
- Dozier, M., Zeanah, C.H., Wallin, A.R., & Shaffer, C. (2012). Institutional care for young children: Review of literature and policy implications. *Social Issues and Policy Review*, 6(1), 1–25. doi: 10.1111/j.1751-2409.2011.01033.x

Drug treatment programs with high levels of family-related or education/employment services had reunification rates twice that of programs with lower service levels

- Grella, C.E., Needell, B., & Shi, Y. (2009). Do drug treatment services predict reunification outcomes of mothers and their children in child welfare? *Journal of Substance Abuse Treatment*, 36(3), 278-93. doi: 10.1016/j.jsat.2008.06.010

*What materials, tools or websites can help agencies learn more about trauma-informed, evidence- and empirically based practices?*

A wide range of materials on trauma-informed child welfare practices are available at the website of the National Child Traumatic Stress Network ([www.nctsnet.org/](http://www.nctsnet.org/)).

The National Child Welfare Resource Center for Organizational Improvement maintains a website that includes service array materials and tools ([http://muskie.usm.maine.edu/helpkids/agency\\_col\\_servicearray.htm](http://muskie.usm.maine.edu/helpkids/agency_col_servicearray.htm)).

The Center for the Study and Prevention of Violence at the University of Colorado Boulder has a website with information on evidence-based programs called Blueprints for Violence Prevention ([www.colorado.edu/cspv/blueprints/index.html](http://www.colorado.edu/cspv/blueprints/index.html)).

The federal Substance Abuse and Mental Health Services Administration maintains a National Registry of Evidence-Based Programs and Practices ([www.nrepp.samhsa.gov](http://www.nrepp.samhsa.gov)).

The California Evidence-Based Clearinghouse for Child Welfare is an online, searchable database of programs designed to serve children and families involved in child welfare systems ([www.cebc4cw.org](http://www.cebc4cw.org)).

The Child Trends website, called the About What Works/LINKS database, has information on more than 650 programs that assess child or youth outcomes related to education, life skills and social/emotional, mental, physical, behavioral or reproductive health (<http://www.childtrends.org/what-works/>).

See Casey's case study, *A model for collaboration and results*, at [www.aecf.org/resources/a-model-for-collaboration-and-results/](http://www.aecf.org/resources/a-model-for-collaboration-and-results/)

**PRACTICE #4: Measure and Address Racial and Other Disparities**

*What does research say about measuring and addressing racial and other disparities?*

There can be unexpected and counterintuitive correlations between poverty and maltreatment disparity and victimization rates. In this study, data showed that black children experienced a somewhat lower victimization rate and a weak maltreatment disparity relationship in states with higher black child poverty rates.

- Wulczyn, F. (2011). Research is action: *Disparity, poverty, and the need for new knowledge*. Chicago, IL: Chapin Hall at the University of Chicago. Retrieved from [https://fcda.chapinhall.org/wp-content/uploads/2012/10/2011\\_research-is-action\\_disparity.pdf](https://fcda.chapinhall.org/wp-content/uploads/2012/10/2011_research-is-action_disparity.pdf)

It is important to understand how different approaches to measuring the effect of race have shaped practices and outcomes over time. A variety of perspectives are presented by:

- Dettlaff, A.J. (2014). The evolving understanding of disproportionality and disparities. In J.E. Korbin & R.D. Krugman (Eds.), *Child welfare handbook of child maltreatment, Volume 2* (chapter 8). New York: Springer Publishing Company.
- Morton, C.M., Occasion, K. & Simmel, C. (2011). A critique of methods used to describe the overrepresentation of African Americans in the child welfare system. *Children and Youth Services Review*, 33, 1538–1542. doi: 10.1016/j.childyouth.2011.03.018
- Bartholet, E. (2009). The racial disproportionality movement in child welfare: False facts and dangerous directions. *Arizona Law Review*, 51, 871–932.
- The Annie E. Casey Foundation. (2014). *Race for results: Building a path to opportunity for all children*. Baltimore, MD: Author. Retrieved from [www.aecf.org/resources/race-for-results/](http://www.aecf.org/resources/race-for-results/)
- Chapin Hall. (2011). *Race and child welfare*. Chicago, IL: Author. Retrieved from [www.chapinhall.org/research/brief/race-and-child-welfare](http://www.chapinhall.org/research/brief/race-and-child-welfare)
- Race Matters Institute. (2009). *Advancing better outcomes for all children: Reporting data using a racial equity lens*. Baltimore, MD: Author. Retrieved from <http://racemattersinstitute.org/resources/>

#### *What materials, tools or websites can help agencies learn more?*

A growing body of work describes how public agencies can improve measurement and understanding of disparate outcomes by race to frame municipal and agency decision making, policies and practices. Resources include:

- The Race Forward website, which includes two tools: The Racial Equity Impact Assessment (REIA) toolkit and the REIA for economic policies and budgets ([www.raceforward.org/](http://www.raceforward.org/)).
- Two Casey reports, including the *Race equity and inclusion action guide* and *Race for results: Building a path to opportunity for all children*. The first describes seven steps that can be used to infuse data on racial inequities into decision making. The second, a KIDS COUNT policy report, features the new Race for Results Index, which compares how children are progressing on key milestones across racial and ethnic groups at the national and state levels.
- Appendix 4, for a hands-on guide to measuring disparity.

## **PRACTICE #5: Use a Practice Model**

### *What does research say about developing a family engagement-focused practice model?*

A casework practice model describes what the agency believes about children and families and how staff should interact with families. It can be used to improve safety, well-being and permanency outcomes through increasing the quality and consistency of practice in the jurisdiction. Case planning and case management that are consistent with a practice model are strong predictors of positive permanency outcomes, and planning, case management and assessment are predictive of positive well-being outcomes.

- Antle, B., Christensen, D., van Zyl, M., & Barbee, A. (2012). The impact of the solution-based casework (SBC) practice model on federal outcomes in public child welfare. *Child Abuse & Neglect*, 36(4), 342–353. doi: 10.1016/j.chiabu.2011.10.009

When child welfare workers use family team meetings and engagement practices, timely reunification and guardianship become more likely over the long term as does placement with kin in the short term. Attention to permanence is critical throughout the life of a case.

- Pennell, J., Edwards, M., & Burford, G. (2010). Expedited family group engagement and child permanency. *Children and Youth Services Review*, 32(7), 1012–1019. doi: 10.1016/j.childyouth.2010.03.029

Well-implemented family meetings can be effective drivers of improved outcomes. The impact of one such meeting — Team Decision Making, or TDM — has been extensively analyzed. TDMs early in the case decrease rates of repeat maltreatment and increase timely reunification.

- Usher, L., Wildfire, J., Webster, D., & Crampton, D. (2010). *Evaluation of the anchor-site phase of Family to Family*. Baltimore, MD: The Annie E. Casey Foundation. Retrieved from [www.unc.edu/~lynnu/anchoreval.pdf](http://www.unc.edu/~lynnu/anchoreval.pdf)

Engagement is key; children and families are more likely to enter into helping relationships when workers use strengths-based approaches when working with them.

- Kemp, S.P., Marcenko, M.O., Lyons, S.J. & Kruzich, J.M. (2014). Strength-based practice and parental engagement in child welfare services: An empirical examination. *Children and Youth Services Review*, 47(1), 27–37.

### *What materials, tools or websites can help agencies learn more?*

- Child Welfare Policy and Practice Group. (2008). *Adopting a child welfare practice framework*. Montgomery, AL: Author. Retrieved from [www.childwelfaregroup.org/documents/CWGPPracticeFramework.pdf](http://www.childwelfaregroup.org/documents/CWGPPracticeFramework.pdf)

- National Child Welfare Resource Center for Organizational Improvement. (2007). *Understanding and developing child welfare practice models*. Workshop presented at 2007 Children's Bureau Conference for Agencies and Courts, Arlington, VA.
- Antle, B., Christensen, D., van Zyl, M., & Barbee, A. (2012). The impact of the solution-based casework (SBC) practice model on federal outcomes in public child welfare. *Child Abuse & Neglect*, 36(4):342–53. doi: 10.1016/j.chiabu.2011.10.009.
- The Annie E. Casey Foundation. (2012). *Improving practice to improve outcomes: Case study*. Baltimore, MD: Author. Retrieved from [www.aecf.org/m/resourcedoc/AECF-IndianaChildWelfare-2012.pdf](http://www.aecf.org/m/resourcedoc/AECF-IndianaChildWelfare-2012.pdf)
- The Annie E. Casey Foundation. (2012). *The Lifelong Families model: Implementation manual*. Baltimore, MD: Author. Retrieved from [www.aecf.org/resources/the-lifelong-families-model-implementation-manual/](http://www.aecf.org/resources/the-lifelong-families-model-implementation-manual/)
- National Child Welfare Resource Center for Organizational Improvement. (2011, Summer/Fall). Implementing practice models. *Child Welfare Matters*. Retrieved from <http://muskie.usm.maine.edu/helpkids/rcpdfs/cwmatters11.pdf>

#### **PRACTICE #6: Develop Competent Front-End Decision Making**

*What does research say about the efficacy of developing competent front-end decision making, with manageable caseloads, appropriate tools and accountability, and support for good decision making?*

Addressing child fatalities within communities and among children known to child welfare systems is a critical concern.

- The Commission to Eliminate Child Abuse and Neglect Fatalities was established in 2012 to develop a national strategy and recommendations for reducing fatalities across the country resulting from child abuse and neglect.
- For a list of organizations that focus on preventing child fatalities, see the Child Welfare Information Gateway's web page on child fatalities ([https://www.childwelfare.gov/pubs/reslist/rl\\_dsp.cfm?subjID=19&rate\\_chno=11-11223](https://www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?subjID=19&rate_chno=11-11223))
- An annual Public Information Officer Learning Collaborative provides a forum for communications staff in the juvenile justice and child welfare fields to learn from one another and from experts in communications. ([www.campaignforyouthjusticeblog.org/2013/05/2013-public-information-officer.html](http://www.campaignforyouthjusticeblog.org/2013/05/2013-public-information-officer.html))

There is a critical business case to be made for having caseload standards. When caseloads are not controlled, agencies experience high staff turnover rates, which fuels high, unnecessary recruitment and training costs.

- Social Work Policy Institute. (2010). *High caseloads: How do they impact delivery of health and human services?* (Research to Practice Brief). Washington, DC: The National Association of Social Workers Foundation. Retrieved from [www.socialwork-policy.org/wp-content/uploads/2010/02/r2p-cw-caseload-swpi-1-10.pdf](http://www.socialwork-policy.org/wp-content/uploads/2010/02/r2p-cw-caseload-swpi-1-10.pdf)

Inadequate staffing for investigations results in higher rates of maltreatment recurrence.

- National Council on Crime and Delinquency. (2006). *The relationship between staff turnover, child welfare system functioning, and recurrent child abuse*. Houston, TX: Cornerstones for Kids. Retrieved from [www.cpsr.us/workforceplanning/documents/06.02\\_Relation\\_Staff.pdf](http://www.cpsr.us/workforceplanning/documents/06.02_Relation_Staff.pdf)

Smaller caseloads are critical for implementation of best practices.

- Costello, T. (2004). *Final report of the investigation caseload standard workgroup*. Albuquerque, NM: National Resource Center on Child Maltreatment. Retrieved from <http://library.childwelfare.gov/cwig/ws/library/docs/gateway/Record?rpp=10&upp=0&m=1&w=+NATIVE%28%27recno%3D49707%27%29&r=1>
- New York State Office of Children and Family Services. (2006). *New York State child welfare workload study*. Rensselaer, NY: Author. Retrieved from [www.ocfs.state.ny.us/main/reports/WorkloadStudy.pdf](http://www.ocfs.state.ny.us/main/reports/WorkloadStudy.pdf)

Given the high stakes of child welfare investigations, it is essential to use evidence-based tools.

- Rycus, J., & Hughes, R. (2003). *Issues in risk assessment in child protective services* (Policy White Paper). Columbus, OH: North American Resource Center for Child Welfare, Center for Child Welfare Policy. Retrieved from [www.ihs-trainet.com/assets/RApdf.pdf](http://www.ihs-trainet.com/assets/RApdf.pdf)

Certain types of well-implemented family meetings can improve decision making. For example, it has been found that using Team Decision Making meetings before removal improves a case's trajectory.

- Usher, L., Wildfire, J., Webster, D., & Crampton, D. (2010). *Evaluation of the anchor-site phase of Family to Family*. Baltimore, MD: The Annie E. Casey Foundation. Retrieved from [www.unc.edu/~lynnu/anchoreval.pdf](http://www.unc.edu/~lynnu/anchoreval.pdf)

*What materials, tools or websites can help agencies learn more?*

Child Welfare League of America. (1999). Recommended caseload standards. Washington, DC: Author. Retrieved from <http://66.227.70.18/newsevents/news030304cwlac-aseload.htm>

The National Council on Crime and Delinquency's Children's Research Center website has information on front-end decision making and related tools (<http://nccdglobal.org/what-we-do/children-s-research-center>).

National Resource Center for Child Protective Services. (2007). *Safety intervention policy standards and agency self-assessment*. Albuquerque, NM: Author. Retrieved from [http://nrccps.org/wp-content/uploads/2010/11/Safety\\_Intervention\\_Policy\\_Standards\\_final\\_March2007.pdf](http://nrccps.org/wp-content/uploads/2010/11/Safety_Intervention_Policy_Standards_final_March2007.pdf)

National Resource Center for Child Protective Services. (2006). *Safety related information standards: What every CPS caseworker needs to know to make good safety decisions*. Albuquerque, NM: Author. Retrieved from [http://nrccps.org/documents/2006/pdf/Safety-Related\\_Information\\_Standards.pdf](http://nrccps.org/documents/2006/pdf/Safety-Related_Information_Standards.pdf)

**PRACTICE #7: Promote Expert Casework**

*What does research say about the need for excellent ongoing casework processes?*

Caseworkers must have low enough caseloads to enable them to provide frequent, high-quality visits, work closely with families and use effective family team meeting practices.

- New York State Office of Children and Family Services. (2006). *New York State child welfare workload study*. Rensselaer, NY: Author. Retrieved from [www.ocfs.state.ny.us/main/reports/WorkloadStudy.pdf](http://www.ocfs.state.ny.us/main/reports/WorkloadStudy.pdf)

High-quality, frequent visits improve the ability of child welfare workers to work with families and children. These visits enable the worker to establish and maintain relationships with children and families, which is essential for assessing and monitoring safety, family needs and strengths as well as providing supportive services.

- National Conference of State Legislatures. (2006). *Child welfare caseworker visits with children and parents* (Innovations in State Policy Brief). Washington, DC: Author. Retrieved from [www.ncsl.org/research/human-services/child-welfare-caseworker-visits-with-children367.aspx](http://www.ncsl.org/research/human-services/child-welfare-caseworker-visits-with-children367.aspx)



Frequent caseworker contacts with children and families are strongly associated with improved safety and permanency outcomes.

- U.S. Health and Human Services, Administration for Children and Families. (no date). *Findings from the initial 2001-2004 Child and Family Services Reviews*. Retrieved from [www.acf.hhs.gov/sites/default/files/cb/findings\\_from\\_the\\_initial\\_cfsr.pdf](http://www.acf.hhs.gov/sites/default/files/cb/findings_from_the_initial_cfsr.pdf)

Caseworkers with high caseloads tend to focus on the most serious abuse and neglect cases, thus reducing the frequency and quality of home visits.

- U.S. Government Accountability Office. (2003). *HHS could play a greater role in helping child welfare agencies recruit and retain staff* (Publication No. GAO-03-357). Washington, DC: Author. Retrieved from [www.gao.gov/new.items/d03357.pdf](http://www.gao.gov/new.items/d03357.pdf)

The National Survey of Child and Adolescent Well-Being found that two-thirds of 11- to 17-year-olds indicated that their last caseworker visit was more than a month ago. Of parents who had contact with a caseworker since the investigation, more than two-thirds of parents in intact families indicated that their most recent verbal contact was more than one month ago.

- Dolan, M., Smith, K., Casanueva, C., & Ringeisen, H. (RTI International) (2011). *NSCAW II baseline report: Caseworker characteristics, child welfare services and experiences of children placed in out-of-home care* (OPRE Report #2011-27e). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from [www.acf.hhs.gov/sites/default/files/opre/nscaw2\\_cw.pdf](http://www.acf.hhs.gov/sites/default/files/opre/nscaw2_cw.pdf)

Research suggests that frequent, quality visits between birth parents and their children in out-of-home care predict higher rates of reunification.

- Davis, I., Landsverk, J., Newton, R., & Ganger, W. (1996). Parental visiting and foster care reunification. *Children and Youth Services Review*, 18(4/5), 363–382. doi: 10.1016/0190-7409(96)00010-2

#### **PRACTICE #8:** Make Family Relationships and Permanence the Focus of Casework

*What does research say about the need to strengthen family relationships for children receiving services in-home, in out-of-home placements or who have exited a child welfare system?*

There are well-being and developmental benefits to living in families for children in out-of-home care.

- Barth, R.P., Greeson, J.K.P., Guo, S., Green, R.L., Hurley, S.H., & Sisson, J. (2007). Outcomes for youth receiving intensive in-home therapy or residential care: A comparison using propensity scores. *American Journal of Orthopsychiatry*, 7(4), 497-505, doi: 10.1037/0002-9432.77.4.497
- Children's Rights. (2011). *What works in child welfare reform: Reducing reliance on congregate care in Tennessee*. New York: Author. Retrieved from [www.childrensrights.org/wp-content/uploads/2011/07/2011-07-25\\_what\\_works\\_reducing\\_reliance\\_on\\_congregate\\_care\\_in\\_tn\\_final-report.pdf](http://www.childrensrights.org/wp-content/uploads/2011/07/2011-07-25_what_works_reducing_reliance_on_congregate_care_in_tn_final-report.pdf)
- Dozier, M., Kaufman, J., Kobak, R., O'Connor, T.G., Sagi-Schwartz, A., Scott, S., Shaffer, C., Smetana, J., Van IJzendoorn, M.H., & Zeanah, C.H. (2014). Consensus statement on group care for children and adolescents: A statement of policy of the American Orthopsychiatric Association. *American Journal of Orthopsychiatry*, 84(3), 219–225. doi: 10.1037/ort0000005. Retrieved from [www.apa.org/pubs/journals/features/ort-0000005.pdf](http://www.apa.org/pubs/journals/features/ort-0000005.pdf)
- Dozier, M., Zeanah, C.H., Wallin, A.R., & Shaffer, C. (2012). Institutional care for young children: Review of literature and policy implications. *Social Issues and Policy Review*, 6(1), 1–25. doi: 10.1111/j.1751-2409.2011.01033.x
- James, J.S., Zhang, J.J., & Landsverk, J. (2012). Residential care for youth in the child welfare system: Stop-gap option or not? *Residential Treatment for Children & Youth*. 29(3), 48–65. doi: 10.1080/0886571X.2012.643678
- Lee, B.R., Bright, C., Svoboda, D., Fakunmoju, S., & Barth, R. (2011). Outcomes of group care for youth: A review of comparative studies. *Research on Social Work Practice*. 21(2), 177–189. doi: 10.1177/1049731510386243
- Wulczyn, F., Chen, L., & Hislop, K.B. (2007). *Foster care dynamics 2000–2005: A report from the multistate foster care data archive*. Chicago, IL: Chapin Hall Center for Children at the University of Chicago. Retrieved from [www.chapinhall.org/sites/default/files/old\\_reports/406.pdf](http://www.chapinhall.org/sites/default/files/old_reports/406.pdf)

The length of time a child is in out-of-home placement can affect his or her chance for permanency.

- See Wulczyn, Chen, & Hislop (above).
- Ringeisen, H., Tueller, S., Testa, M., Dolan, M., & Smith, K. (2013). *Risk of long-term foster care placement among children involved with the child welfare system* (OPRE Report #2013-30). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from [www.acf.hhs.gov/sites/default/files/opre/nscaw\\_ltrc\\_research\\_brief\\_19\\_revised\\_for\\_acf\\_9\\_12\\_13\\_edit\\_clean.pdf](http://www.acf.hhs.gov/sites/default/files/opre/nscaw_ltrc_research_brief_19_revised_for_acf_9_12_13_edit_clean.pdf)

Placement stability affects permanency. Children who disrupt from placement are at an increased risk for subsequent disruptions. Placement instability is associated with longer stays in foster care, increased risk of reentry into foster care, poor school outcomes and higher need for mental health services.

- Carnochan, S., Lee, C., & Austin, M.J. (2013). Achieving exits to permanency for children in long-term care. *Journal of Evidence-Based Social Work*, 10(3), 220–234. doi: 10.1080/15433714.2013.788952
- D’Andrade, A.C. (2005). Placement stability in foster care. In G. Mallon & P. McCartt Hess (Eds.), *Child welfare for the twenty-first century*, New York: Columbia University Press.
- Rubin, D.M., & Hadley, T. (2004). Placement stability and mental health costs for children in foster care. *Pediatrics*, 113(5), 1336–1341.

Children in non-kin settings generally experience more placements than those placed in kin settings. The percentage of children in care for three or more years who experience more than three placements ranges from 30 percent of children in kin settings to 50 percent to 60 percent of children in non-kin settings. While working toward reunification, children should be placed with family whenever possible, as kinship care is generally more stable than other placement settings.

- D’Andrade, A.C. (2005). Placement stability in foster care. In G. Mallon & P. McCartt Hess (Eds.), *Child welfare for the twenty-first century*, New York: Columbia University Press.

The bond between siblings is frequently stronger and longer-lasting than any other bond, including with parents. This is particularly true for abused and neglected children who may have relied on each other to cope with trauma.

- Hochman, G., Feather-Acuna, E., & Huston, A. (1992). *The sibling bond: Its importance in foster care and adoptive placement*. National Adoption Information Clearinghouse. Retrieved from [www.elakeviewcenter.org/FamiliesFirstNetwork/FosterFamilies/Documents/SiblingBond.pdf](http://www.elakeviewcenter.org/FamiliesFirstNetwork/FosterFamilies/Documents/SiblingBond.pdf)

#### *What materials, tools or websites can help agencies learn more?*

The Annie E. Casey Foundation. (2009). *Rightsizing congregate care: A powerful first step in transforming child welfare systems*. Baltimore, MD: Author. Retrieved from [www.aecf.org/resources/rightsizing-congregate-care/](http://www.aecf.org/resources/rightsizing-congregate-care/)

North American Council on Adoptable Children. (2005). *A family for every child: Strategies to achieve permanence for older foster children and youth*. Baltimore, MD: The Annie E. Casey Foundation. Retrieved from [www.aecf.org/m/resourcedoc/AECF-AFamilyForEveryChild-2005.pdf](http://www.aecf.org/m/resourcedoc/AECF-AFamilyForEveryChild-2005.pdf)

## **PRACTICE #9: Meet Teens' Needs for Family and Other Supports**

### *What does research say about teens' needs for families and other supports?*

\*\* See references related to research on the benefits and challenges of kin care in the research and reference section of practice #10.

Teens experiencing and transitioning from foster care need help with three well-being domains.

- Mainspring Consulting and Youth Transition Funders Group. (2013). *A plan for investing in the social, emotional and physical well-being of older youth in foster care: Connected by 25*. Scarsdale, NY: Youth Transition Funders Group. Retrieved from [www.fostercareworkgroup.org/media/resources/FCWG\\_Well-Being\\_Investment\\_Agenda.pdf](http://www.fostercareworkgroup.org/media/resources/FCWG_Well-Being_Investment_Agenda.pdf)

The outcomes of children and teens in group care are often worse than in other interventions.

- Barth, R.P., Greeson, J.K.P., Guo, S., Green, R.L., Hurley, S.H., & Sisson, J. (2007). Outcomes for youth receiving intensive in-home therapy or residential care: A comparison using propensity scores. *American Journal of Orthopsychiatry*, 7(4), 497-505, doi: 10.1037/0002-9432.77.4.497
- Lee, B.R., Bright, C., Svoboda, D., Fakunmoju, S., & Barth, R. (2011). Outcomes of group care for youth: A review of comparative studies. *Research on Social Work Practice*, 21(2), 177–189. doi: 10.1177/1049731510386243
- See references related to improvements in children's well-being and development when they live in families in the research and reference section of practice #8.

Teens who age out of foster care have poor prospects, according to the Midwest Study of the Adult Functioning of Former Foster Youth. Only 58 percent graduate from high school by age 19; fewer than 3 percent have a college degree by age 24; only half will be employed at age 24; more than one in five will become homeless after age 18; and one in four will have contact with the justice system within two years of aging out. For young women who age out, 71 percent will be pregnant before age 21, with 62 percent of them becoming pregnant more than once.

- Chapin Hall at the University of Chicago. (2011). *Midwest evaluation of the adult functioning of former foster youth*. Information is from four reports of this longitudinal study. Retrieved from [www.chapinhall.org/research/report/midwest-evaluation-adult-functioning-former-foster-youth](http://www.chapinhall.org/research/report/midwest-evaluation-adult-functioning-former-foster-youth)

In 2012, more than 66,000 older youth were removed from home and entered out-of-home care. For 27 percent of these children, child behavior was the only reason for removal. Some agencies have found successful ways to prevent unnecessary out-of-home

placements for teens, meeting their needs with effective preventive services rather than out-of-home placements.

- The Annie E. Casey Foundation. (2015). *Too many teens: Preventing unnecessary out-of-home placements*. Baltimore, MD: Author. Retrieved from [www.aecf.org/resources/too-many-teens/](http://www.aecf.org/resources/too-many-teens/)

Of the 133,000 older youth who were in care on the last day of September 2012, 44 percent had been removed from home for two or more years. That year, about 23,000 older youth aged out of the child welfare system.

- U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2013). AFCARS Report (Number 20). Washington, DC: Author. Retrieved from [www.acf.hhs.gov/sites/default/files/cb/afcarsreport20.pdf](http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport20.pdf)

#### *What materials, tools or websites can help agencies learn more?*

The Annie E. Casey Foundation/Casey Family Services (2005). *An integrated approach to youth permanency and preparation for adulthood: A call to action*. Baltimore, MD: Authors. Retrieved from [www.aecf.org/m/resourcedoc/AECF-AnIntegratedApproachtoYouthPermanency-2005.pdf](http://www.aecf.org/m/resourcedoc/AECF-AnIntegratedApproachtoYouthPermanency-2005.pdf)

For information on providing health insurance to youth formerly in foster care, see:

Vestal, C. (2014, April 30). States enroll former foster youth in Medicaid. *Stateline*. Philadelphia, PA: The Pew Charitable Trusts. Retrieved from [www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2014/04/30/states-enroll-former-foster-youth-in-medicaid](http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2014/04/30/states-enroll-former-foster-youth-in-medicaid)

### **PRACTICE #10: Build a Healthy Caregiver Network**

#### *What does research say about the efficacy of finding, developing and supporting skilled caregivers, including kin and non-relative foster and adoptive parents?*

Children in kinship care may remain in care longer, but they often have fewer placement changes, experience equal or lower repeat maltreatment rates and experience more of a sense of family than children in other types of foster care.

- Gleeson, J.P. (2012). What works in kinship care? In P.A. Curtis & G. Alexander (Eds.), *What works in child welfare* (Rev. Ed.) (pp. 193–216). Washington, D.C.: CWLA Press.
- O'Brien, V. (2012). The benefits and challenges of kinship care. *Child Care in Practice*, 18(2), 127–146.
- Walsh, W.A. (2013, winter). *Informal kinship care most common out-of-home placement after investigation of child maltreatment* (Fact Sheet No. 24). Durham, NH:

Carsey Institute. Retrieved from <http://scholars.unh.edu/cgi/viewcontent.cgi?article=1188&context=carsey>

*Offering skills-based and other training can improve foster parent skills, reduce foster parent turnover and improve placement stability for children.*

Leslie, D., & Laurent, H. (2008). Effects of a foster parent training intervention on placement changes of children in foster care. *Child Maltreatment*, 13(1), 64–75. doi: 10.1177/1077559507310612

Chamberlain, P., Moreland, S., & Reid, K. (1992). Enhanced services and stipends for foster parents: Effects on retention rates and outcomes for children. *Child Welfare*, 71(5), 387–401.

Lindhiem, O., & Dozier, M. (2007). Caregiver commitment to foster children: The role of child behavior. *Child Abuse and Neglect*, 31, 361–374. doi: 10.1016/j.chiabu.2006.12.003

DeGarmo, D.S., Chamberlin, P., Leve, L.D., & Price, J. (2009). Foster parent intervention engagement moderating child behavior problems and placement disruption. *Research on Social Work Practice*, 19(4), 423–432. doi: 10.1177/1049731508329407

*What materials, tools or websites can help agencies learn more?*

For full descriptions of the following practice- and policy-related tools offered by the Annie E. Casey Foundation, see Appendix 1:

- *Building successful resource families practice guide*. Retrieve guide from [www.aecf.org/resources/building-successful-resource-families/](http://www.aecf.org/resources/building-successful-resource-families/) and its appendix from [www.aecf.org/m/resourcedoc/aecf-BuildingSuccessfulResourceFamiliesAppendix All.pdf](http://www.aecf.org/m/resourcedoc/aecf-BuildingSuccessfulResourceFamiliesAppendixAll.pdf)
- *Kinship data essential indicators*. Retrieve from [www.aecf.org/resources/users-guide-to-essential-kinship-data/](http://www.aecf.org/resources/users-guide-to-essential-kinship-data/)
- *Kinship Process Mapping*. Retrieve from [www.aecf.org/resources/kinship-process-mapping-full/](http://www.aecf.org/resources/kinship-process-mapping-full/) and [www.aecf.org/resources/kinship-process-mapping-executive-overview/](http://www.aecf.org/resources/kinship-process-mapping-executive-overview/)
- *Stepping up for kids: What governments and communities should do to support kinship families*. Retrieve from [www.aecf.org/resources/stepping-up-for-kids/](http://www.aecf.org/resources/stepping-up-for-kids/)
- *The kinship diversion debate*. Retrieve from [www.aecf.org/resources/the-kinship-diversion-debate/](http://www.aecf.org/resources/the-kinship-diversion-debate/)
- *User's guide to essential kinship data*. Retrieve from [www.aecf.org/resources/users-guide-to-essential-kinship-data/](http://www.aecf.org/resources/users-guide-to-essential-kinship-data/)

For information on model licensing standards, see:

- *Model foster home licensing standards* at [www.naralicensing.org/](http://www.naralicensing.org/)

## APPENDIX I: Casey Innovations, Strategies and Case Studies

For more than two decades, the Annie E. Casey Foundation has served as a convener, partner and strategic consultant to public agencies that are seeking to improve outcomes for children and families. We have helped develop a variety of *innovations*, *strategies* and *case studies*, some available publicly, some available only to clients of our strategic consulting work. Want to understand how Casey's Child Welfare Strategy Group can help your agency? Contact Tracey Feild at [tfeild@aecf.org](mailto:tfeild@aecf.org).

### Innovations

**Casebook.** Casey provided start-up resources for Casebook®, an innovative, Internet-based case management system designed to replace legacy SACWIS systems. It helps caseworkers do their jobs more effectively and enables administrators and supervisors to make better decisions. Casebook assures that no child or family falls through the cracks, both at the caseworker and management levels. It provides a user-friendly, mobile, updated and supported information technology system. Note: Federal funding for child welfare technology has recently changed to allow use of more modern commercial off-the-shelf products such as Casebook®.

- For more on Casebook, see [www.casecommons.org](http://www.casecommons.org).
- For more on the new federal funding rules, see U.S. Department of Health and Human Services, Administration for Children and Families (2013), *Program instruction (ACF-OA-PI-13-01): Waiver process for the use of federal funding for commercial off-the-shelf (COTS) software products*. Retrieved from [www.acf.hhs.gov/sites/default/files/cb/acf\\_oa\\_pi\\_13\\_01.pdf](http://www.acf.hhs.gov/sites/default/files/cb/acf_oa_pi_13_01.pdf)

### Strategies

Casey, in conjunction with partners in states and municipalities across the country, has developed three types of strategies — policy, organizational and frontline practice.

#### POLICY

**Every Kid Needs a Family.** Casey is working with state partners to promote policies and practices that reflect what research shows: that being cared for in a family is essential for children who have experienced abuse or neglect.

**Jim Casey Youth Opportunities Initiative.** This initiative works to ensure that young people age 14–25 make successful transitions to adulthood. The initiative works nationally, in states and locally to improve opportunities and increase youth engagement through their Success Beyond 18 work, Opportunity Passports™ and more. Find resources and learn more at [www.jimcaseyyouth.org](http://www.jimcaseyyouth.org).

## SYSTEMS

**Measuring child well-being and provider performance.** Casey provided start-up resources for Kids Insight, which is now an independent nonprofit organization, and helped adapt the Treatment Outcome Package, or TOP, to child welfare. TOP is a web-based tool that provides two system benefits:

- *A 360-degree look at child well-being.* TOP is an easy-to-use questionnaire filled out by children and adults important to them, including parents and caregivers, caseworkers and other professionals. It takes less than 10 minutes to fill out, is processed within minutes, has been psychometrically validated for children ages 3 and older, and can be used both to measure child well-being and changes in well-being over time. Reports drive richer conversations between caseworkers and children, bring kin and foster parent perspectives to the table and allow regular, detailed insights into children's strengths and challenges.
- *New options for managing performance.* TOP can provide data useful to match children with providers and improve provider performance. With TOP, agencies have access to data that helps them understand whether the agency's services and contracted providers are improving child well-being.

For more on TOP and Kids Insight, see <http://kidsinsight.org>.

**Fiscal strategies.** It is essential that an agency's fiscal incentives align with best practices; if they don't, children and families have poor outcomes and budgets soar. Casey has developed a number of effective fiscal strategies for individual agencies, using legislation, policy and practice changes to revise incentives, develop case rates, work with lead agencies and focus on performance-based contracting. In addition, the Foundation has developed a working paper that proposes national child welfare finance reform:

- *When child welfare works: A proposal to finance best practices.* The good news is that a focus on early intervention and permanence has contributed to a decrease in the numbers of kids in foster care. The bad news is that an arcane federal financing structure is complicating the prospects for further progress. This paper proposes updating and improving child welfare financing approaches, provides a policy framework and recommends specific reforms. Retrieve from [www.aecf.org/resources/when-child-welfare-works-a-working-paper/](http://www.aecf.org/resources/when-child-welfare-works-a-working-paper/)

**Data and quality strategies.** Many agencies now collect sophisticated data — but often struggle to prepare useful reports. Others need help improving quality review processes.

- *Data.* Casey helps agencies get control of their data by using its Outcomes Performance Management approach. The Foundation also provides training and coaching on using data to improve services designed to help children and families.



- *Quality review.* Casey supports two types of quality reviews, including:
  - *Qualitative Case Reviews.* *Counting is not enough: Investing in qualitative case reviews for practice improvement in child welfare* examines the practices of more than 20 jurisdictions, gathers insight from national experts and presents recommendations for improving this approach to child welfare practice. The report details key factors in implementing case review systems, including federal Child and Family Service Reviews, Quality Service Reviews and ChildStat reviews. Retrieve from [www.aecf.org/resources/counting-is-not-enough/](http://www.aecf.org/resources/counting-is-not-enough/)
  - *ChildStat.* ChildStat is a management accountability and quality improvement process that uses a unique combination of aggregate data analysis and case dialogue to drive positive outcomes for children and families. It draws on qualitative and quantitative information during a weekly review attended by executive leaders, field practice managers and quality improvement staff. The ChildStat forum is intended to foster a shared sense of accountability and systemwide problem solving about critical issues affecting child and family outcomes. Learn more in *Implementing ChildStat: A how-to guide for child welfare and other client-serving systems*.

**Reducing unnecessary group placement strategies.** More than 14 percent of children in out-of-home placements are in group settings, even though research indicates that these facilities should be used only for short-term, emergency care, not long-term living situations. Casey has tested approaches to reducing unnecessary long-term group placements. Publicly available resources include:

- *Rightsizing congregate care: A powerful first step in transforming child welfare systems.* Reducing reliance on group placements and expanding a community's service array has better outcomes for children and families and provides cost savings that can be reinvested in evidence-based family supports. Retrieve from [www.aecf.org/resources/rightsizing-congregate-care/](http://www.aecf.org/resources/rightsizing-congregate-care/)

**Kinship policy, practice and data tools.** Children who cannot live with their parents often do better living with kin, which is why an increasing number of children in the nation's child welfare system are now placed with kin (28.1 percent in 2013, up from 24 percent in 2009). Casey has a suite of tools and approaches to help agencies map their kin practices and understand whether or not their agency informally diverts children to kin. Tools also help identify and overcome policy, practice and data barriers to encouraging kin. Publicly available kin resources include:

- *The kinship diversion debate: Policy and practice implications for children, families and child welfare agencies.* This report explores different perspectives on diverting children from child welfare to live with kin when they cannot remain with their families. It identifies critical components of an effective kinship care system. And it presents the

insights of more than 50 child welfare and judicial personnel, advocates and researchers. Retrieve from [www.aecf.org/resources/the-kinship-diversion-debate/](http://www.aecf.org/resources/the-kinship-diversion-debate/)

- *Kinship process mapping.* Kinship process mapping offers child welfare leaders valuable insight into how agency practices engage extended family networks to care for and protect children who cannot safely live with their parents. Retrieve the full guide from [www.aecf.org/resources/kinship-process-mapping-full/](http://www.aecf.org/resources/kinship-process-mapping-full/) and the executive overview from [www.aecf.org/resources/kinship-process-mapping-executive-overview/](http://www.aecf.org/resources/kinship-process-mapping-executive-overview/)
- *Stepping up for kids: What government and communities should do to support kinship families.* This KIDS COUNT policy report summarizes the special role that grandparents, other relatives and close family friends play in the lives of children who cannot safely live with their parents. Given that 1 in 11 children lives in kinship care at some point before the age of 18, the report provides recommendations on how public systems, private agencies, faith-based organizations and communities can support kinship families. Retrieve from [www.aecf.org/resources/stepping-up-for-kids/](http://www.aecf.org/resources/stepping-up-for-kids/)
- *User's guide to essential kinship data.* This guide identifies several types of data helpful to agencies that seek to understand or improve their kinship care system. It describes the types of kinship data and essential indicators that should be tracked. A benchmark worksheet is included. Retrieve from [www.aecf.org/resources/users-guide-to-essential-kinship-data/](http://www.aecf.org/resources/users-guide-to-essential-kinship-data/)
- *Model foster home licensing standards.* Model licensing standards, developed by the National Association for Regulatory Administration with support from Casey, provide guidelines for states to update licensing and encourage the use of licensed kin and non-relative caregivers for children in the child welfare system. Retrieve from [www.naralicensing.org](http://www.naralicensing.org).

**Teen diversion strategies.** Too often, teens entering out-of-home child welfare placements are not victims of child abuse or neglect but need access to preventive, behavioral health services or family mediation. A large number — perhaps 40 percent — are now or will soon be involved with other youth-serving systems, requiring new interagency collaborations. Casey has developed a model based on best practices from around the country. Early results are promising. Publicly available resources include:

- *Too many teens: Preventing unnecessary out-of-home placements.* The nation's child welfare and juvenile justice systems were built to address specific issues: abuse, neglect and serious delinquency. But today, too many teens are being placed in these systems for unrelated reasons. They may land in these public systems because they can't get along with their parents. Or because of the teens' challenging behaviors, such as defying their parents, being truant from school, running away, abusing alcohol and drugs, or engaging in risky sexual or other activities that threaten their well-being

or safety. Recently Casey's Child Welfare Strategy Group explored why more teens are entering child welfare and juvenile systems and why so many of them are experiencing such poor outcomes. This paper provides an overview of CWSG's findings, with details on several effective local solutions that have had remarkable success working with young people and their families. Retrieve from [www.aecf.org/resources/too-many-teens/](http://www.aecf.org/resources/too-many-teens/).

## FRONTLINE PRACTICE

**Team Decision Making (TDM).** TDM is a collaborative family meeting practice used by child welfare agencies that includes family members in all decisions involving child removal, change of placement, reunification or permanency plans. TDM helps make better front-end decisions. It is a more effective way to approach the critical issue of placement for potentially at-risk kids compared to the traditional model of agency personnel telling the family what to do. TDM is currently being used in 14 states and jurisdictions and is currently being installed in Philadelphia and Arkansas. Publicly available TDM resources include:

- *Team Decision Making case study.* This publication examines how three jurisdictions — Cuyahoga County, Ohio; Denver County, Colorado; and New York City — have woven TDM into standard child welfare procedures to create better, safer outcomes for children. Retrieve from [www.aecf.org/resources/team-decision-making/](http://www.aecf.org/resources/team-decision-making/)

**Foster Family Recruitment, Development and Support (RDS).** Casey has developed a process agencies can use to implement child-specific and targeted recruitment strategies, strengthen foster family training and support and encourage positive relationships between birth and foster parents. Currently underway: Combining evidence-informed approaches to building foster parent skills in order to develop healthy foster parent networks that reduce placement instability and increase foster parent retention. Publicly available RDS resources include:

- *Building successful resource families practice guide.* Finding and keeping high-quality adoptive, kinship and foster families, known as resource families, has been a common struggle. The guide leverages Casey's experience and encourages best practices in working with adoptive, kinship and foster families. The guide includes a resource-rich appendix. Retrieve guide from [www.aecf.org/resources/building-successful-resource-families/](http://www.aecf.org/resources/building-successful-resource-families/) and appendix from [www.aecf.org/m/resourcedoc/aecf-BuildingSuccessfulResourceFamiliesAppendixAll.pdf](http://www.aecf.org/m/resourcedoc/aecf-BuildingSuccessfulResourceFamiliesAppendixAll.pdf)

**Family Search and Engagement.** Casey has developed pragmatic approaches to installing effective family search and engagement strategies in local and state agencies and often works with clients to improve their capacity to reach out to family from the moment a child enters care to improve rates of permanency and family connections.

### Case studies

*The Connecticut turnaround.* Connecticut's child welfare agency has made significant improvements. New policies and practices focus on asking more kin and other foster families. Results include a drop in group placements and an increase in kin placements. Retrieve from [www.aecf.org/resources/the-connecticut-turnaround/](http://www.aecf.org/resources/the-connecticut-turnaround/)

*Improving practice to improve outcomes: Indiana child welfare.* The Foundation collaborated with the state of Indiana to drastically refocus its child welfare practice. This case study outlines how the state built one of the nation's stronger child welfare systems. Retrieve from [www.aecf.org/resources/indiana-child-welfare/](http://www.aecf.org/resources/indiana-child-welfare/)

*Team Decision Making case study: Engaging families in placement decisions.* This case study provides a discussion of the importance of engaging family, friends and community in child welfare decisions regarding child removal, reunification and placement. Retrieve from [www.aecf.org/resources/team-decision-making/](http://www.aecf.org/resources/team-decision-making/)

*Back on track: Transforming Virginia's child welfare system.* This report tells how Virginia's leaders and Casey worked together to improve the state's child welfare system, reduce group placements, install a practice model and best practices and expand the service array, serving more children and saving \$100 million in just two years. Retrieve from [www.aecf.org/resources/back-on-track/](http://www.aecf.org/resources/back-on-track/)

*Fixing a broken system: Transforming Maine's child welfare system.* After a child fatality in 2001, Maine's child welfare services came under scrutiny. The state enlisted the Foundation to help create better decision-making processes, reduce reliance on congregate care and refocus practices on permanence. Retrieve from [www.aecf.org/resources/fixing-a-broken-system/](http://www.aecf.org/resources/fixing-a-broken-system/)

*A model for collaboration and results: How cross-agency collaboration helped Hampton, Va.* This success story describes how one city agency emphasized prevention and built a smart array of services and supports to help children and families. Retrieve from [www.aecf.org/resources/a-model-for-collaboration-and-results/](http://www.aecf.org/resources/a-model-for-collaboration-and-results/)

**APPENDIX 2: States That Have Extended Foster Care to Age 21 with Title IV-E Funding Eligibility Conditions**  
(as of 7/2014)

Twenty states and the District of Columbia provide extended care to young people who turn 18 while in the custody of a child welfare agency (see page 28). Recently, Missouri and Virginia have passed legislation to extend care; both are in the planning stage and have not yet submitted a federal plan. Ohio is working on legislation that is expected to pass in 2015.

**Alternatives**

Three states (Vermont, Delaware and Florida) use state, not federal, funds to extend care. Each state's program has aspects of extended foster care, but may not follow all federal requirements. Other states, such as Iowa, don't extend foster care but do have an aftercare program, with no judicial or administrative oversight.

**How many young people?**

Based on recent data reported by states and counties, it is clear that data from AFCARS 21 significantly underrepresent the number of young people receiving services and supports past the age of 18. For example, based on reports by county agencies in California and published in a 2013 report by the Children's Advocacy Alliance,<sup>1</sup> more than 7,000 young people between ages 18–21 voluntarily remain in foster care in California, while AFCARS reports just 3,474.<sup>2</sup>

1 Children's Advocacy Institute. (2013). *California's Fostering Connections: Ensuring that the AB 12 Bridge Leads to Success for Transition Age Foster Youth*. San Diego: University of San Diego School of Law. Retrieved from [www.caichildlaw.org/Misc/AB12\\_Report\\_Final.pdf](http://www.caichildlaw.org/Misc/AB12_Report_Final.pdf)

2 National Data Archive on Child Abuse and Neglect, AFCARS Foster Care File 2012, volume 1.

STATE*	MAX. AGE	HIGH SCHOOL OR GED	POST SECONDARY & VOC. ED	PROGRAMS TO ADDRESS BARRIERS TO EMPLOYMENT	EMPLOYED 80 HOURS MONTH	NOT ABLE TO PERFORM ACTIVITIES
Alabama	21	Yes	Yes	Yes	Yes	Yes
Arkansas	21	Yes	Yes	Yes	Yes	Yes
California	21	Yes	Yes	Yes	Yes	Yes
Connecticut	21	Yes	Yes	Yes	No	No
D.C.	21	Yes	Yes	Yes	Yes	Yes
Illinois	21	Yes	Yes	Yes	Yes	Yes
Indiana	20	Yes	Yes	Yes	Yes	Yes
Maine	21	Yes	Yes	Yes	Yes	Yes
Maryland	21	Yes	Yes	Yes	Yes	Yes
Massachusetts	21	Yes	Yes	Yes	Yes	Yes
Michigan	21	Yes	Yes	Yes	Yes	Yes
Minnesota	21	Yes	Yes	Yes	Yes	Yes
Nebraska	21	Yes	Yes	Yes	Yes	Yes
New York	21	Yes	Yes	Yes	Yes	Yes
N. Dakota	21	Yes	Yes	Yes	Yes	Yes
Oregon	21	Yes	Yes	Yes	Yes	Yes
Pennsylvania	21	Yes	Yes	Yes	Yes	Yes
Tennessee	21	Yes	Yes	No	No	Yes
Texas	21	Yes	Yes	Yes	Yes	Yes
Washington	21	Yes	Yes	Yes	No	No
W. Virginia	21	Yes	Yes	No	No	No

\* This list includes states with IV-E extensions of foster care, and the related eligibility categories, based on state legislation passed. All 50 states provide extended services to young people 18 and older through the federal John H. Chafee Foster Care Program. The level of services varies dramatically among states, with some providing robust post-foster care services, such as Iowa, and others providing very few supports.

### APPENDIX 3: Primer on Entry Cohort Longitudinal Data

*By Judith Wildfire, M.A., M.P.H.*

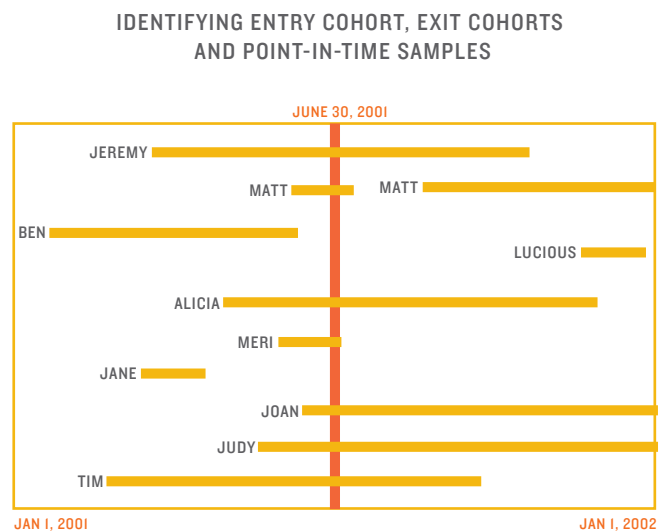
Becoming a high-performing child welfare agency requires a focus on outcomes. To focus on outcomes, agencies need to develop entry cohort longitudinal data (ECLD) to track system-level results for all children served by the agency. This document summarizes the benefits of ECLD and provides guidelines for developing an ECLD database.

ECLD tracks the placement experiences of all children who enter out-of-home placement by grouping children into entry cohorts defined by periods of time. Typically, agencies use calendar or fiscal year to define the entry groups. Individual child data begin at the point of initial entry into out-of-home care and track all placement experiences up to the time the files are created. Placement events tracked in the file include placement moves, exits to permanency and subsequent reentries, should they occur. These files are updated on a regular basis (at least semi-annually) to provide current information on the recent experiences of children being served by the child welfare agency and to continually add data files for new children who enter the system. Because every child entering out-of-home placement is included in the data files, ECLD provides unbiased estimates for placement outcomes and offers the best representation of system performance for children in out-of-home care.

While ECLD is optimal, many agencies and other groups still do not use it. Instead, many use exit cohort or point-in-time data. Exit cohorts group children by the time of exit from out-of-home care. This technique inadequately represents children who remain in placement for long periods of time. Point-in-time data include children who are in out-of-home placement on a particular day or during a particular period of time. This approach underrepresents children who exit placement very quickly and overrepresents children in placement for long periods of time. Both exit cohort and point-in-time data are considered length biased. Figures 1 and 2 provide examples of the three data groups.

Figure 1 represents the placement experiences of children in a mythical child welfare agency. Each line represents the time spent in out-of-home placement for one of the children served by the agency in 2001. The red vertical line at the middle of the chart identifies children in care on a sample day, June 30, 2001.

Figure 1



Source: Based on an exhibit originally produced by staff at the University of California Berkeley

Figure 2 summarizes information on each population group and demonstrates measurement differences that result from having different groups of children represent the performance of the agency. For this child welfare agency, there are 10 children who entered placement during 2001 (2001 entry cohort), eight children who exited out-of-home placement during 2001 (2001 exit cohort) and seven children who are in care on June 30 (point-in-time sample). The table below summarizes differences in gender characteristics for the three groups and differences in outcomes (i.e., length of stay as characterized by long and short stayers).

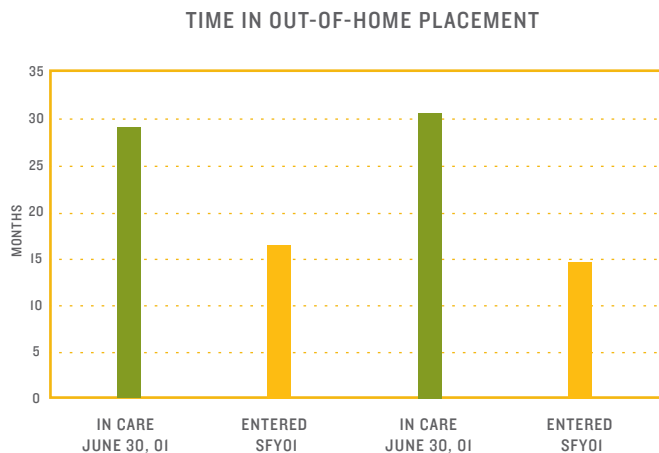
Figure 2

POPULATION DIFFERENCES			
	ENTRY COHORT	EXIT COHORT	IN CARE GROUP
WHAT COMMON CHARACTERISTICS/ EXPERIENCE DOES THIS GROUP HAVE?	ALL ENTERED CARE 2001	ALL EXITED CARE 2001	ALL IN CARE JUNE 30, 2001
NUMBER IN GROUP	10	8	7
% MALE	50%	63%	43%
% FEMALE	50%	38%	57%
% "LONG STAYERS"	60%	50%	71%
% "SHORT STAYERS"	40%	50%	29%
If asked by the governor of your state, "do children stay in care a long time in your agency," what data would you use to answer that question?			

### Representing system-level performance

Agencies are often faced with the choice of which group to use to represent system-level performance. As shown in the exhibits above, this choice has a direct impact on the measurement of child welfare outcomes. The impact of this choice on the outcome measurement for length of stay is presented in Figure 3. It compares months spent in out-of-home placement for point-in-time samples with months spent by children in an entry cohort. These data show striking differences in the length of stay for children, depending on the measure selected. Since ECLD includes all children served, ECLD best represents the performance of any child welfare system.

Figure 3



By comparing the experiences of entry groups of children over successive years, agencies can determine whether there are changes in outcomes for children served by child welfare. Exit cohorts and point-in-time samples do not provide clear referent groups, since children in these samples have generally entered placement across multiple years. Used in conjunction with outcome indicators developed for the federal Child and Family Service Review (CFSR) process, ECLD provides a good basis for developing benchmarks for program improvement plans if needed.



## Choosing entry cohort groups

To best understand its outcomes, an agency should develop ECLD for a minimum of five entry cohort groups. It should then develop a process for updating data every six months, adding information on recent placement experiences for children in the cohorts and new cohorts of children who have entered placement. Essential data elements needed to create ECLD include:

- The date each placement began and ended (if it has ended) and the type of placement
- The reason(s) for the initial placement
- The reason(s) for any change in placement
- The case's disposition (e.g., a permanent placement) when the child leaves custody (or when the last recorded placement ended — in some states an agency may have to compare custody data with termination data from the last placement to determine final disposition)
- A geographic indicator (e.g., zip code or geocoded address) for the neighborhood in which a child lived prior to out-of-home placement and for each out-of-home placement address
- The date that custody begins and ends
- The child's personal characteristics such as gender, race and date of birth
- A unique identifier that can be used to identify children
- The name of the agency providing placement services to the child
- The placement agency's facility and agency ID number
- A family identifier to identify sibling groups

After extracting these data elements from the SACWIS or legacy data system, reconfigure data into files that support outcomes analysis, usually at a spell level. A spell is the continuous period of time that a child is in out-of-home placement. If a child moved, a spell will include multiple placements. A child exiting out-of-home placement and subsequently reentering will have multiple spells (e.g., see Matt's experience in Figure 1).

The optimal file organization is one record per child per spell, with an indicator that identifies the initial entry spell for each child.

### **Pathways to ECLD**

Analysis variables that can be created from these extracted data include number of spells, number of placements, type of initial placement, length of stay, reentry indicator, time to reentry, permanency status and time to permanency. Depending on available resources and data management capacity, an agency may use one of four pathways to gain access to ECLD, including:

- Using agency IT and data analysis resources to create its own ECLD database;
- Joining the Chapin Hall State Data Center;
- Using the resources developed by a Fostering Court Improvements group to create ECLD from AFCARS data; and
- Creating a strategic partnership with a local state university and contracting with them to create ECLD.
- Adopt modern IT systems such as Casebook.

Figure 4 (on the next page) summarizes the pros and cons of each approach.

### **Conclusion**

Developing an ECLD database requires careful thought and planning but is a necessary step for agencies embarking on improvement efforts and seeking to ensure the best possible outcomes for the children and families they serve.

*Judith Wildfire is a consultant to the Annie E. Casey Foundation and owner of Wildfire Associates Inc.*

Figure 4: Pros and Cons of Different Approaches to Developing ECLD

APPROACH	PROS	CONS
AFCARS-based approach (Fostering Court Improvement, for example)	<p>Good blueprint for development exists</p> <p>A set of measures has been developed</p> <p>Cross-state comparisons are possible</p> <p>Requires less staff time for development</p> <p>A free toolkit is available from Fostering Court Improvement (additional services can be purchased). See <a href="http://www.fosteringcourtimprovement.org">www.fosteringcourtimprovement.org</a></p>	<p>Limited to AFCARS-reported spells</p> <p>Does not provide detailed information on all of a child's placement experiences because it is limited to AFCARS data items</p> <p>6-month update cycle</p> <p>Tying together with placement data adds extra cost</p>
Chapin Hall State Data Center	<p>Blueprint for development exists</p> <p>State-of-the-art ECLD design that includes custody spell and placement data</p> <p>Membership in the Chapin Hall State Data Center includes access to web-based analytics and technical assistance and support from Chapin Hall staff to use the database</p> <p>State-specific dataset and multi-state datasets are available</p> <p>Cross-state comparisons are possible using the multi-state file formats</p> <p>Requires less staff time for development than locally developed system</p> <p>For a more detailed description of the data center, see <a href="http://www.chapinhall.org/partners/CSFCAD">www.chapinhall.org/partners/CSFCAD</a></p>	<p>Local data items are harder to include than in a locally developed system</p> <p>6-month update cycle</p> <p>Annual subscription costs</p> <p>May be vulnerable to state defunding during times of budget constraints</p>
Locally Developed Database	<p>Can be designed to match data with agency practice</p> <p>Database can be updated more frequently (quarterly) for Outcomes Performance Management</p> <p>May be possible to include ECLD as part of the existing system</p> <p>If ECLD is built into existing processes, it is more likely that it will continue to be available over time</p>	<p>Requires more staff time to develop</p> <p>It may take a longer time before the database is ready for use</p> <p>There is no "blueprint" for development – a lot of technical and measurement issues will need to be resolved as they arise</p>
State University Partnership	<p>Can be designed to match data with agency practice</p> <p>Database can be updated more frequently (quarterly) for Outcomes Performance Management</p> <p>May be possible to include ECLD as part of the existing system</p> <p>University staff can serve as consultants to the agency in analysis methodologies</p> <p>Requires less staff time</p>	<p>Requires commitment of resources to the university</p> <p>May be vulnerable to state defunding during times of budget constraints</p>
Casebook	Casebook integrates ECLD in its data collection and analytic processes	

#### APPENDIX 4: Measuring Disparity: The Need to Adjust for Relative Risk

In the field of child welfare, several different calculations are used to assess disparity. The goal of using the calculations is to determine at which decision points within a system children of different races may experience inequitable outcomes. This brief will discuss two calculations:

- *The Disparity Index* (DI), which is appropriate for measuring inequity in victimization and entry rates, and
- *The Relative Rate Index*<sup>1</sup> (RRI), which the Annie E. Casey Foundation recommends using for placement type, exit decision points and other post-entry decision points, plus as a secondary means of examining entry disparities.

#### Calculating the Disparity Index

DI compares the likelihood of one group experiencing an event to the likelihood of another group experiencing that same event. For example, a DI can be used to determine whether black children are more or less likely than white children to enter foster care. The DI is calculated by dividing the rate per 1,000 children in the population for one racial group by the rate per 1,000 for the comparison racial group. A result less than 1 indicates the numerator group is less likely to experience the event, greater than 1 indicates they are more likely and equal to 1 indicates that the two groups are equally likely to experience the event. Table 1 provides an example using data from 2012.<sup>2</sup> It shows that black children are 1.81 times more likely than white children to enter foster care, while Native American children are 2.89 times more likely. The DI for white children is 1.00, denoting it is its own comparison group.

Table 1: National Disparity Indices for Foster Care Entry

GROUP	ENTRY RATE PER 1,000	DI CALCULATION	DI RESULT
White	2.91	2.91 / 2.91	1.00
Black	5.39	5.39 / 2.91	1.85
Native American	8.40	8.40 / 2.91	2.89

### **Drawbacks of the Disparity Index**

The problem with using DI to assess disparity for all decision points after entry is that disparity at the front end of the system can mask or inflate disparities at subsequent decision points. Calculating the DI uses the general population as the basis for the rate per 1,000, regardless of the decision point being assessed.

This may make sense when determining disparity in entry rates, but it is not as useful when examining disparity at points deeper in the child welfare system. For example, if you want to determine the disparity in exit rates, using the general population as the basis would mean including a large number of children who never entered foster care and thus could never exit foster care. The use of the general population for all decision points may result in a DI adding together the disparities present at all prior decision points. This makes it difficult to determine at which decision points disparities exist in order to target them for intervention.

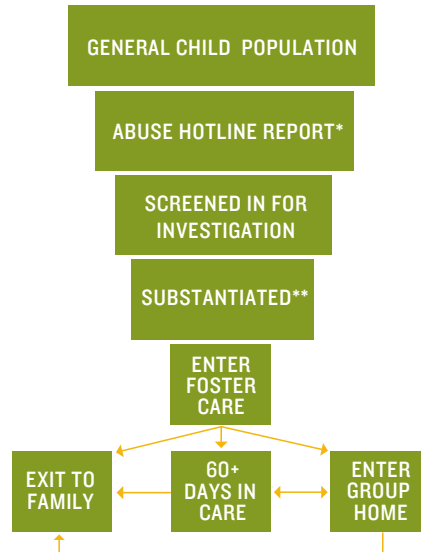
By comparison, the RRI adjusts for the relative risk a population of children has of experiencing an event, making it easier to discern which decision points are associated with disparity.

### **Calculating the Relative Rate Index**

The RRI uses the same mathematical calculation as the DI. However, the population used as the denominator to calculate the rate per 1,000 changes to reflect the number of children who are actually *at risk* of experiencing an event. For instance, to exit foster care, a child must have entered foster care at some point; the population of children served during the year would be used as the rate per 1,000 denominator.

When using the RRI, it is vital to correctly determine which population is appropriate to use as the denominator. Figure 1 (below) shows how the RRI creates a “funnel” that results in a smaller population at risk of an event the deeper into the system you look. However, the flow is not necessarily linear. “Entering foster care” can be the population for several events. Similarly, one event may have more than one possible risk population. For example, to answer the question, “What is the disparity in exiting to family?”, the population could be all children who entered during a time period, were served during a time period, were in group placements or were in care at least 60 days. The population chosen will depend on the question you seek to answer. If your analysis is focused on group placements, you will want to use the children in group placements as your population.

Figure 1: Graphic Example Representing the “Shrinking” Population for the Relative Rate Index



\*While limiting the population based on reports is ideal, it may not be possible as most systems do not have a reliable means of tracking race for reports that do not receive an investigation.

\*\*Not all systems require substantiation of abuse for a child to enter foster care. The funnel should reflect the requirements of the system being analyzed.

### Comparing the RRI and the DI

As Table 2 shows,<sup>3</sup> the DI and RRI give sharply different views. The DI makes it appear that black and Native American children are more likely to exit than white children. However, because the DI uses the general population number as its denominator for the rate per 1,000, the result includes the known disparity at entry (as shown in Table 1). When examining only those children who were served, and therefore could exit, the RRI shows that black and Native American children are slightly less likely than white children to exit.

Table 2: Comparison of DI and RRI on Exits from Foster Care Using National Data

GROUP	EXIT DI CALCULATION	DI RESULT	EXIT RRI CALCULATION	RRI RESULT
White	2.47 / 2.47	1.00	375.27 / 375.27	1.00
Black	4.98 / 2.47	2.02	350.55 / 375.27	0.93
Native American	6.97 / 2.47	2.82	354.85 / 375.27	0.95

### Important points to keep in mind

As with any measure, population size can influence the calculation. A location that has few Native Americans in the general population and only a couple such children in care may have a large RRI compared to whites. The decision on which groups to analyze should be based on the racial/ethnic makeup of your location. For example, if your area has a large Vietnamese population it would be important to calculate disparity for this group. Racial and ethnic groups are not evenly distributed throughout the country. When measuring agency performance compared to other systems, you should select a location that looks similar to yours in terms of general population makeup.

Lastly, the measure also is only as reliable as the data from which it is calculated. This goes beyond ensuring that workers check off race in your data system. Recent changes in the U.S. Census Bureau's methods for recording race and ethnicity highlight the fluid nature of such classifications. Research has found that racial self-identification and classification of others can be influenced by life events.<sup>4</sup> Quantifying the degree of disparity in your system is important, but such analysis should always be supplemented with the qualitative experiences of your clients.

1 Several other terms have been used by others to describe this type of measure, including adjusted risk index, adjusted disparity index and relative risk index.

2 Sources: 2012 AFCARS Public Use Files and 2012 KIDS COUNT Data Center.

3 Sources: 2012 AFCARS Public Use Files and 2012 KIDS COUNT Data Center.

4 Saperstein, A., & Penner, A.M. (2010). The race of a criminal record: How incarceration colors racial perceptions. *Social Problems*, 57(1), 92–113.





