

Improving Child Welfare

An Assessment by The Child Welfare Policy and Practice Group

*A Nonprofit Organization Committed to Improving Outcomes
by Improving Practice*

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Introduction

Child welfare systems throughout the country struggle to respond effectively to the needs of the children and families they serve. They are expected to make timely, accurate decisions about the protection of children, including choosing which children need to enter foster care to be kept safe and which children may remain safely with their parents. Child welfare systems must make prompt decisions about permanency, balancing the rights of families to keep their children against the needs of children for safe, stable and nurturing permanent homes. And for that group of children who unfortunately grow up in foster care, systems must assure that they have the supports and caring connections to assure that they grow up to be successful adults.

The National Landscape

A common characteristic of child welfare systems is that most achieve these goals at least unevenly, and in some cases poorly. The reasons for this lack of success are as complex as the families that are served. Many families that enter the child welfare system have challenging life circumstances. The incidence of the conditions of substance abuse, mental illness, domestic violence, poverty and hopelessness in their lives is well known. In responding to the families they serve, child welfare systems have to address these underlying conditions effectively to insure that children have the safety, permanency and well-being they deserve.

Despite these very difficult obstacles, child welfare systems help many of the children and families they serve. Most children are kept safe, most are returned home safely to families and do not re-enter the system and a growing number of children are placed in permanent settings, either through reunification or adoption. The greatest challenges for child welfare systems are a subset of the caseload that does not consistently experience such positive outcomes. This population has a number of similar characteristics, including:

- Multiple reports abuse and neglect;
- Multiple entries into the system;
- Unstable placements and frequent moves
- Placement in highly restrictive congregate settings
- Poor school performance
- Lack of permanency

A disproportionate amount time and effort of child welfare staff is spent is responding to the children and families referenced above.

In serving the children and families that are its mission, child welfare systems face an equally

Improving Child Welfare

difficult set of organizational issues and barriers. Nationally, in both public and private, non-profit child welfare agencies, the front-line work force is largely young, inexperienced and often inadequately trained. The caseworker role is an entry-level job with low salaries, limited promotional opportunities and a high level of stress. Caseloads in many states are too high to perform effectively. As a result, turnover is extremely high, especially in urban areas.

Child welfare systems tend to be fragmented, with many different independent agencies serving families, all with unique missions, approaches to practice and organizational capacity. Coordination failures are chronic. The services available to families are usually “categorical”, meaning that they are difficult to adapt to the unique needs of children and families. This is why, for example, you see parenting classes as the universal remedy for parents or anger management services as the intervention for many unhappy foster children. These remedies are the favorite system and court Band-Aid for many families and may have little relevance to the reasons they need help. Flexible supports and funds that can be individualized to meet needs are extremely limited and the use of informal community supports is uncommon.

Training is too often merely informational and procedural, providing few opportunities for caseworkers to actually see important skills demonstrated, to practice them or receive feedback about performance. Planning and intervention for children and families tend to be symptom focused rather than addressing underlying conditions. As a result, basic problems are not resolved and the same families are reported for maltreatment repeatedly or children experience disruptions over and over.

The quality of supervision is one of the most critical barriers to good practice. Supervisors may not have basic practice skills themselves, so they spend little time providing the modeling, coaching and feedback needed to develop novice workers into skilled practitioners. Supervisors also have such a multitude of tasks that many have little time to provide basic supervision.

And last, paperwork and administrative tasks consume much of the valuable time that is needed to work directly with families. Mistakenly, systems try to proceduralize improvement through rules and record keeping rather than building professional skills that lead to sound judgement.

Strategies for Improvement

In the face of the issues and barriers described previously, it is reasonable to ask, “So what would make a difference?” In fact, the solutions are sensible, common sense strategies that work. Unfortunately, they require enormous systemic change and the long-term will to see the complex change process through to its conclusion. Within such reform, there are a number of concrete steps that could begin to bring about more immediate change. It is on these strategies that this section will focus.

Strengthen Training Training needs to be skills based, not informational alone. Emphasis should be placed on engaging children and families, assessment, planning, teaming and intervention skills. Trainers themselves need mastery of the skills they are teaching to so they can model and coach the skills that they are teaching. If training becomes more skills based, all staff, especially supervisors, will need some level of retraining, not just new staff.

Institute a Family Team Conferencing Process The routine use of a family team conferencing process throughout the life of each case will help address many of the problems that impede good child welfare practice. The conferences provide a

Improving Child Welfare

forum in which the child and family can contribute to the case planning process, thus increasing the likelihood that the plan will be something that the family can commit to. A conference is a mechanism to create a lasting family team that will sustain the family over time. Conferencing improves the assessment process through its use of professional and non-professional members who can contribute to a better understanding of child and family needs. When all team members are together, coordination problems are diminished.

Create a Pool of Flexible Resources When family teams craft individualized plans for children and families, they need to be able to tailor supports and services to identified needs. If all of the funding is tied up in categorical resources, families are left with “one size fits all” solutions that often do not work. Caseworkers need to be able to match the right support to what each child and family needs.

Continue, Expand and Strengthen the Community Partnership Initiative The State is engaged in an effort to “roll-out” the Clark Foundation’s Community Partnerships for Child Protection Initiative that began in Jacksonville. This effort incorporates a number of the reform elements suggested in this paper. It will provide a useful springboard for system change if it has the depth to reach all staff.

Measure Quality As Well as Quantity As the saying goes, “You get what you inspect, not what you expect.” Child welfare systems generally measure quantity – usually examining timeliness of action, policy compliance and documentation. These have importance. However what the field tends not to measure is quality. For example, it doesn’t look to see if the family was meaningfully involved in the planning process, just if the plan (usually developed by the caseworker) was signed by the parent. Nor does it assess the quality of coordination, assessment or attention to progress toward goals. Some process for routinely “inspecting” quality is essential. The Qualitative Service Review process that The Child Welfare Group, in partnership with Human Systems and Outcomes is piloting in Florida should help address this need.

Hold Providers Accountable for These Same Practices Problems won’t be solved by exporting them without new expectations. If changes such as these are adopted, especially with the advent of privatization, providers should be expected to employ these same innovations. The Department will need to have its oversight capacity strengthened to assess and hold the provider community accountable.

Conclusion

Perhaps one of the best arguments for implementing recommendations such as these is found in a study of the effects of organizational culture on the quality of children’s outcomes. These same findings would apply equally to families as well. This study found the following.

The success that caseworkers have in improving children’s psychosocial functioning depends heavily on their consideration of each child’s unique needs, the caseworkers’ responses to unexpected problems and their tenacity in navigating bureaucratic and judicial hurdles to achieve the best placement and most needed services for each child. This requires nonroutinized and individualized casework, personal relationships between the caseworker and the child and a results rather than a process oriented approach. These findings suggest that agencies with higher levels of job satisfaction, fairness, role clarity, cooperation and personalization and lower levels of role overload, conflict and emotional exhaustion are more likely to support caseworkers’

Improving Child Welfare

efforts to accomplish these objectives.¹

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¹ Glisson, Charles & Hemmelgarn, Anthony (1998). The Effects of Organizational Climate and Interorganizational Coordination on the Quality and Outcomes of Children's Service Systems. *Child Abuse and Neglect*, Vol. 22, No. 5. 416.