

90 Day Project Report

Child Welfare Practice Models, Effective Practice Strategies and Resources to Support Implementation

This report was requested by the Sauer Family Foundation to assist the 90 Days Project in its work to improve and sustain the safety and well-being of Minnesota's children.

The purpose of this report is to:

1. Review the practice models of selected high-performing Minnesota counties and tribes to examine their strategies, methods and tools and why they are effective in delivering quality services to families and children. These counties were invited to contribute practice models and other strategies they have implemented.
2. Examine national child protection practice models used in selected states.
3. Compare the national models to Minnesota.
4. Examine the Minnesota DHS Practice Model and Competencies to determine how well these documents incorporate evidence based practices and align with other effective models. Determine what may be missing that could strengthen child protection and if the model and competencies cover all the bases of the "life of each case."

The identified resources and models of practice in this summary are not meant to be exhaustive and the Sauer Family Foundation does not endorse these resources or programs.

An Effective Practice Model Defined

The Child Welfare Policy and Practice Group defines a practice model as "the values, principles, relationships, approaches and techniques used at the system and casework practitioner level to enable children and families to achieve the goals of safety, stability, permanency and well-being."¹

Their brief details the elements of a practice framework and offers two examples of states adopting practice models to help guide agency reform and improve outcomes. (See appendix for Utah and Alabama examples)

<http://www.childwelfaregroup.org/documents/CWGPracticeFramework.pdf>

Minnesota State Models

¹ *Adopting a Child Welfare Practice Framework*. The Child Welfare Policy and Practice Group.

Anoka County

Anoka adopted the Signs of Safety model in 2009, but it is not required. The county does require that staff include a safety plan in their reports.

Anoka lacks a well-defined practice model that details how they will deliver services to children and family. They do list a number of practice tools to prevent placements.

1. Parent support outreach program (TOPS) – voluntary services for parents with children under age 12 with risk of child protection involvement
2. Teen outreach parenting services – offers same services as TOPS
3. Family assessment
4. Family preservation
5. Short-term voluntary case management and housing assistance
6. Strong achieving permanency framework

Note: the county's re-entry rates (15 – 20%) are higher than the federal mandate (9.9%) but lower than the states average.

Carver County

This county has strong practice expectations that all staff will utilize the full complement of the Signs of Safety model. They emphasize well-written safety plans that are transparent and available to families.

They also provide a Parent Support Outreach Program for parents with substance abuse issues, financial problems, potential domestic violence issues, homelessness and abuse and neglect. In collaboration with community services, specific kinds of help is available. It appears to be voluntary.

In addition, the Public Health Department offers a program called Carver Healthy Families. This is a voluntary home visitation program for parents having their first baby.

Caseload and Supervisor Information

Child protection workers carry an average between 10 and 14 cases. New workers average around 8 cases. Hiring of new staff has been helpful in reducing caseloads. Also, some caseloads are a mix of children's mental health, child welfare and child protection.

They added one new supervisor to child protection with a request for more in their 2017 budget. Currently, staff to supervisor ratio is 1:12. The state recommendation is 1:8.

Workplace Culture

The county implemented Signs of Safety using the PDSA model they acquired in a Breakthrough Series Collaborative. Staff were allowed to implement at their own pace and focused on an appreciative culture. They asked workers Solution Focused Questions and maintained a curious and inquisitive culture. This allowed the county to parallel group and individual supervision with the SoS model.

Management practiced along with their staff – they were vulnerable and transparent during the learning process. Successes were praised.

They began to learn what made things better for families and staff and from that knowledge was about to build expectations around the work. As an example, every family had to have a safety network with people the children felt safe with. These people knew and understood the agency’s worries about the families. In addition, it was required that every child protection case have a written safety plan that was observable and measurable.

Carver County did not receive additional funding. They used their training funds. As a result, their placement budget has been reduced and staff retention has increased. The county states that children are safer, families are happier and workers love their jobs.

Carver County Truancy Program

They have a detailed truancy prevention program on their website.

<http://co.carver.mn.us/departments/health-human-services/child-family/child-welfare/truancy>

Hennepin County

Hennepin County’s model is still in development. It includes a set of practice principles, a brief list of trauma-informed practice elements, a section on using data to make decisions and a CQI component, and a framework on child well-being. An appendix section includes Minnesota’s vision, values and strategic directions. The section also gives an overview of three practice strategies: Signs of Safety, Structured Decision Making and Family Group Decision Making.



Hennepin Practice
Model.draft.Sept201

Olmsted County

The attached document offers details about the county’s case work, caseload sizes, their supervision practice and their culture. It also includes a one-page practice model. This county’s funding comes from a mix of federal, state and the largest amount from county levy. They also offer emersion opportunities that allows participants to observe the RED Team work, group consult, CHIPS, etc.



OlmstedCounty.Pra
cticeModel.docx

More in-depth articles feature their use of differential response, the county’s Parallel Protection Process in high-risk court cases, and narratives describing ways of practice.

Differential Response in Child Protection: Selecting a Pathway

In this first article, the county describes how they created the RED team (review, evaluate and direct) to “provide both structure and process in review of alleged reports of child maltreatment, evaluation of the available information, and direction regarding the agency response.”² They engage three critical pathways in their child protection model.

1. Strong integration of domestic violence intervention (provides assessment that may result in provision of social services w/o formal finding of child abuse)
2. Alternative response (offers a family assessment process instead of a traditional forensic investigation.)
3. Traditional response (reports of sexual abuse, licensed facility reports, egregious and serious harm)

<https://www.co.olmsted.mn.us/cs/cspublications/Documents/CFSPublications/differentialresponse.pdf>

Integrating Domestic Violence Intervention into Child Welfare Practice

In this second article, they discuss in deeper detail step number one: domestic violence intervention.

<http://www.co.olmsted.mn.us/cs/cspublications/Documents/CFSPublications/integratingdvintervention.pdf>

Creating a Constructive Practice: Family and Professional Partnership in High-risk Child Protection Case Conferences

Olmsted developed a family case conferencing model as a justice intervention that uses alternative dispute resolution and family group decision making in the court context. **Parallel Protection Process (P3)** is defined in the PDF below. This article gives the background/context to the model, describes its use of a comprehensive risk assessment, lays out the format of the family case planning conference, and shares the results of case settlements over two years of using P3.

<http://www.co.olmsted.mn.us/cs/cspublications/Documents/CFSPublications/creatingaconstructivepractice.pdf>

Ways of Working in Child Welfare: A Perspective on Practice

This final article gives narrative descriptions of direct work with families as well as decisions made by the county.

² Sawyer, R., Lohrbach, S. *Differential Response in Child Protection: Selecting a Pathway*. Protecting Children. Vol.20. pp.44-53.

Ramsey County

Ramsey County's Comprehensive Family Assessment was first developed in 2007. An evaluation of this practice model has been done and the results can be found along with an overview of the model and training resources via this link. <http://cascw.umn.edu/community-engagement-2/research-projects-2/cfa/>

The County provided two PowerPoint training documents for this report:

The Golden Thread – Part 1



RamseyCountyTrain
ing.The Golden Thre

The Golden Thread – Part 2



RamseyCountyTrain
ing.The Golden Thre

Scott County

This county has identified Signs of Safety as its practice framework. It has a detailed guide for managers and supervisors with the expectation that they will integrate SoS throughout their system. Scott also has a brief placement philosophy and the county attorney's office and law enforcement have made commitments to those tenets. They are:

1. Placement is the last resort
2. May not place for reasons other than safety
3. Law enforcement must ask the question: What action can be taken to reduce/eliminate the current risk/concern without placing the child and must document what actions were taken to try to prevent placement.
4. Actions to prevent placement include, but not limited to: de-escalate the situation, call parent/relative/family friend, remove the parent-not the child, POP, Crisis Team, ESS/Central Intake.
5. Law enforcement is not required to remove a child from a school at school request unless the student is an immediate danger to self/others.

They also include in their framework toolbox a placement philosophy and process guide.



SofS Supervision
Practice Guidelines (



HHS Placement
Philosophy and Proce

Scott County Truancy Program

The Scott County Truancy Diversion Program is a youth centered community collaborative approach that involves Social Services, Community Corrections, County Attorney’s Office, Scott County Mental Health Center and Scott County Schools. The Diversion Program first assists the student, family and school in developing a support plan to improve school attendance. The best chance for success begins at the school level with the school offering support to the student and guardian. When the efforts between family and school are unsuccessful in increasing school attendance, the school may refer the case to the Scott County Attorney’s Office for intervention from the Scott County Truancy Diversion Team.

National Practice Models

Connecticut

Framework: Strengthening Families Practice Model

Core Strategies:

1. Family Engagement
2. Trauma–Informed Practice
3. Family Centered Assessments
4. Child and Family Teaming
5. Purposeful Visitation
6. Effective Case Planning
7. Leadership, Management and Supervision

Link to their four-page model description:

http://www.ct.gov/dcf/lib/dcf/regions/region_3/pdf/practice_model.pdf

Connecticut Taking Multi-Pronged Approach to Preventing Child Abuse (April 2016)

This is the systems reform announcement issued this year by Commissioner Joette Katz and Governor Malloy. It is a quick-read document that highlights

- 1) Child abuse prevention/intervention for children under the age of five
- 2) A safe sleep public health campaign,
- 3) Enhanced use of data including predictive analytics

The governor stresses that the reforms will require that there be a collaborative effort between child welfare, education, medicine and law enforcement.

http://www.ct.gov/dcf/lib/dcf/press_releases/child_abuse_prevention_month_2016_release_fnl.pdf

Early Childhood Practice Guide for Children Aged Zero to Five (April 2016)

This is a comprehensive guide for social workers. Note that there are two tables of contents. The second is the Appendices that offers a number of family and child assessments.

<http://www.ct.gov/dcf/lib/dcf/cccsd/pdf/ecpg-wappendix.pdf>

Iowa

The Iowa Child Welfare Training Academy is one of the most comprehensive in the nation.

Professional development and training opportunities offered are in alignment with the child welfare outcomes of the DHS model of practice in the Better Results for Kids Redesign and the seven outcomes from the federal Child and Family Services Review (CFSR). These outcomes include safety for children, permanency, academic preparation, skill development and well-being.

<http://iatrainingsource.org/>

The Blueprint for Forever Families, adopted in 2011, is also a part of the foundation for trainings and related services for front line providers. <http://www.iowacourts.gov/wfdata/frame2607-1396/File1.pdf>

Iowa's Child Welfare Model of Practice (January 2014)

https://dhs.iowa.gov/sites/default/files/CW_Model_of_Practice.pdf

Parent Partners is a practice model for parents who have experienced the child welfare system and are trained to mentor other parents as they navigate the system.

<http://dhs.iowa.gov/parent-partners>

<http://www.cebc4cw.org/program/parent-partners-iowa/detailed>

New Hampshire

The Solution-Based Practice Model was fully implemented in New Hampshire's Child Protection Services and Juvenile Justice Services by 2013. A certification process is in place for staff and supervisors to help increase fidelity to the model.

Practice Model Areas of Focus

1. Safety and Assessment
2. Family Engagement
3. Culture and Climate

The Children's Bureau provides a narrative to NH's adoption of this evidenced-based practice that appears to be similar to Structured Decision Making.

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=138&articleid=3601>

The "Practice" of Practice Models (PowerPoint)

This is a somewhat lengthy presentation made at a CWLA conference. However, it gives an informative and, by reading the presenter's notes under each slide, a thorough overview of choosing, implementing and evaluating practice models. It is included in this report because it looks specifically at **Solutions Based Casework beginning with Slide 33** and it gives a brief evaluation of New Hampshire's practice model and its use of SBC beginning with **Slide 51**.



cwda_practice_model_presentation_final

New Jersey

New Jersey's child welfare model was developed in 2007 as a result of poor child welfare outcomes leading to a mandated federal oversight. The link below is to the 2015 revised version.

http://www.nj.gov/dcf/about/welfare/case/DCF_CasePracticeModel.pdf

In November 2015, the state released a Sustainability and Exit Plan from federal monitoring. The link below is to that plan's page and includes:

1. A high level look at the principles and foundational elements of that plan.
2. A link to the full Sustainability and Exit Plan report
3. A press release that details the state's planning going forward.

The article highlights the work accomplished by the Office of Performance Management and Accountability with an emphasis on data reform and community engagement:

1. **Objective Data and Analysis to Drive Reform.** DCF now has the capacity to collect, analyze, and act on both quantitative and qualitative data.
2. **Implemented ChildStat.** This administration implemented a systems diagnostic tool to help DCF understand case specific information and community factors
3. **Monthly Qualitative Review Focusing On Community Feedback and Experience.** This administration launched the monthly qualitative review process, a qualitative case review in designated counties that includes interviews with families and community members, and later enhanced it by adding community partners to the review teams.
4. **The Data Fellows Program.** Through this program staff from throughout the entire Department participate in real data research projects, using real-time data, to inform policy and practice within DCF. This program is instrumental not only because it informs DCF policy and practice,

but because it created hundreds of data champions and experts throughout the department who use their knowledge to bring data-informed decision making to the local level. The program is now in its 4th annual cohort and has included hundreds of staff.

5. **Unprecedented Commitment to Transparency and Accountability.** The administration vastly expanded data transparency, demonstrating both a capacity to collect and analyze data in real-time and a capacity to be accountable to the public. Every month multiple data reports with the latest information on DCF's performance are published on the DCF website.

<http://www.nj.gov/dcf/about/welfare/>

Utah

Utah's model is very brief with straightforward and uncomplicated values and principles. It was developed almost 20 years ago and has remained virtually unchanged today. Components of the Utah practice model are:

1. Protection
2. Development
3. Permanency
4. Cultural responsiveness
5. Partnership
6. Organizational Competence
7. Professional Competence

<http://dcfs.utah.gov/about/practice-model/>

Building Workforce Capacity through a Child Welfare Practice Model: Lessons from the Field

This report was published by the American Public Humane Services Association in October 2012. Utah is one of the practice models examined. The report cites five organizational keys to practice model implementation and building its workforce capacity.

Key #1 Progress for the initial practice model development was made with the commitment of upper administration. They are expected to remain accountable and that accountability is maintained by all staff. Training is provided to all levels of the organization.

Key #2 Utah's practice model is embedded in training and the curriculum is built around the skills and values of the model.

Key #3 A Qualitative Case Review with a similar format as the federal CFSR reviews has been implemented "hand in hand" with their training program. They are committed to improving consistency of practice across the state.

Key #4 All key outcome indicators and annual reports are available on the DCFS website. This is a public commitment to transparency and monitoring work and outcomes of performance that are elements of the Program Improvement Plan.

Key #5 The practice model is there to serve as an anchor of practice and not be continually changed. “Whether it be training, QCR or other efforts to build staff capacity, Utah has continually improved their capacity building efforts based on their lessons learned, without changing the model itself. This process has remained consistent over the years despite multiple changes of leadership at the highest level of DFCS administration.”³

<http://www.aphsa.org/content/dam/aphsa/pdfs/OE/2012-10-Build-Workforce-Capacity-ChildWelfare-Practice-Model-Lessons.pdf>

Wisconsin

This state’s practice model summary lists their framework, clear outcome statements, values and principles, core strategies, organizational strategies, and the required skills.

http://dcf.wisconsin.gov/children/practice_model/pdf/practice_model_summary.pdf

Full practice model document is here:

http://dcf.wisconsin.gov/children/practice_model/pdf/wisconsin_practice_model.pdf

Minnesota Child Welfare County Models and Examples of Other State Models: A Brief Comparison

MN County	Has Written Practice Model	Primary Practice Tools Used	Additional Info
Anoka	No	Signs of Safety (not required)	Strong focus on placement prevention
Carver	No	Signs of Safety (Required)	Requires written safety plan for each family that is measurable Detailed truancy program
Hennepin	Yes (in progress)	Signs of Safety Structured Decision Making Family Group Decision Making	Model includes sections on trauma, using data, CQI and child well-being framework
Olmsted	Yes	Differential Response Family Group Conferencing Parallel Protection Process Rapid Response Signs of Safety	Utilizes RED team approach: review, evaluate and direct) Integrates domestic violence intervention Strong CQI component Understands the importance of data

³ Rubin, J. *Building Workforce Capacity through a Child Welfare Practice Model: Lesson from the Field*. (2012). American Public Human Services Association. Wash. D.C.

Ramsey	Yes	Comprehensive Family Assessment	Family assessment model has been evaluated
Scott	Yes	Signs of Safety	Managers and supervisors expected to promote Signs of Safety throughout the system Works closely with law enforcement to prevent placement
Examples of Other State Models			
State	Has Written Practice Model	Primary Practice Tools Used	Additional Info
Connecticut	Yes	Family-Centered Assessments Risk and Safety Assessments	Recently developed Early Childhood Practice Guide Conducting safe sleep campaign Working with Eckerd's Kids on data analytics
Iowa	Yes	Blueprint for Forever Families Parent Partners	Robust child welfare training academy
New Hampshire	Yes	Solution-Based Practice Model <ul style="list-style-type: none"> ▪ Family Development ▪ Restorative Justice ▪ Parallel Process 	Rollout of new model included input from youth and family consultants
New Jersey	Yes	Family and Youth Engagement Model	Strong data analysis and CQI
Utah	Yes	See Five Organizational Keys	
Wisconsin	Yes	Could not determine	Has a strong child well-being statement in its model

An Example of a Child Welfare Model in Canada

Ontario's Professional Child Welfare Standards (2016)

This is not written as a practice model or framework, but it is comprehensive. This interactive table of contents shows a list of eight standards from intake to case closure.

<http://www.children.gov.on.ca/htdocs/English/professionals/childwelfare/protection-standards/index.aspx>

Effective Practice Strategies

Signs of Safety

According to the Wilder Foundation, Signs of Safety is in use in twenty Minnesota counties. Their website devotes a page to the model and there are links to five reports on an evaluation they have completed. The site states that “The purpose of this evaluation was to understand how parents and caregivers experience child welfare services, determine whether elements of the Signs of Safety model could be discerned from parents' description of their experience, and assess the extent to which the worker’s application of the Signs of Safety approach lead to a positive overall experience.”

The latest piece of the evaluation completed in May 2015 looks at four MN counties and the effectiveness of SoS after case closure.

<https://www.wilder.org/Wilder-Research/Publications/Studies/Forms/Study/docsethomepage.aspx?ID=925&RootFolder=%2FWilder-Research%2FPublications%2FStudies%2FSigns%20of%20Safety>

Signs of Safety Supervisor Practice Fidelity Assessment: Field Test and Evaluation Report

Casey Family Programs completed a comprehensive assessment of SoS. The link is to the CFP website where the full assessment can be downloaded.

<http://www.casey.org/signs-of-safety/>

Trauma Informed Practice Models

CW360° Trauma-Informed Child Welfare Practice is a publication on the Center for Advanced Studies in Child Welfare website. The yet-to-be-released Minnesota’s Best Practices for Family Assessment and Family Investigation (draft May 2016) recommends the CW360° practice guide as part of its best practices and resources.

http://cascw.umn.edu/wp-content/uploads/2013/12/CW360-Ambit_Winter2013.pdf

The draft also recommends that workers read A Social Worker’s Tool Kit for Working with Immigrant Families – Healing the Damage: Trauma and Immigrant Families in the Child Welfare System.

<http://www.bettercarenetwork.org/library/the-continuum-of-care/foster-care/a-social-worker%E2%80%99s-tool-kit-for-working-with-immigrant-families-healing-the-damage-trauma-and>

Trauma Adapted Family Connections (TA-FC)

This program is run by the Ruth H. Young Center for Families and Children at the University of Maryland School of Social Work.

A link to their brochure is on their website. Page 5 of the brochure lists the assessments they use as part of their intervention work. They also offer information on secondary trauma for child welfare workers. <http://www.family.umaryland.edu/fc-trauma>

Head Start Trauma Smart

The model is a program at the Crittenton Children’s Center and is currently provided in Head Start preschool programs in 26 counties in the Kansas City metro area and across Missouri, and includes around 3,200 children annually. The link also includes a PBS video on how the model is practiced and a New York Times article about teaching children to calm themselves – a critical element in trauma-informed practice.

<http://traumasmart.org/>

This link provides at-a-glance outcomes of the model. http://traumasmart.org/wp-content/uploads/Trauma_Smart_Outcomes.pdf

Developmental Repair Model

This model is utilized in Washburn’s Day Treatment Program and has become a national intervention for working with young children who have experienced complex trauma. It was identified by Casey Family Programs as a promising practice in 2015. Dr. Anne Gearity, the developer of the model, states that primary research such as attachment theory, trauma and stress, social learning and neurobiological responses were used to build the intervention.

<https://washburn.org/wp-content/uploads/2015/07/WCCDevRepair-revised.pdf>

Minnesota High School Screens Students for ACEs to Develop Trauma-Informed Education

This is an article about work taking place at Paladin Career & Technical High School in Blaine, MN.

<https://acestoohigh.com/2015/04/09/minnesota-high-school-screens-for-aces-to-develop-trauma-informed-education/>

Selected Early Childhood Interventions

A Call to Action on Behalf of Maltreated Infants and Toddlers

Since the passage of the Child and Family Services Improvement and Innovation Act (2011), the Zero to Three website has developed an agency self-assessment tool to help states and counties include principles for infant and toddler development in their practice models. It is intended to be used with

families who have an open case with the child welfare agency and children who are in foster care/kinship care.

<https://www.zerotothree.org/resources/454-a-call-to-action-on-behalf-of-maltreated-infants-and-toddlers>

Family Engagement

Multidisciplinary Parent Representation Models

The Children's Bureau has a page targeting parent representation. It includes the link to a new report out of the Michigan Law School.

Strange Bedfellows: how child welfare agencies can benefit from investing in multidisciplinary parent representation (August 2016)

This strategy provides birth parents with a collaborative legal team made up of attorneys, social workers, and parent mentors that support and advocate for parents as they navigate complex child welfare and court systems in their communities.

<https://cbexpress.acf.hhs.gov/index.cfm?event=website.viewArticles&issueid=179§ionid=2&articleid=4797>

Miami Child Well-Being Court

The Research and Reform for Children in Court website has links to two documents about the Miami model.

1. Essential Elements and Implementation
2. A Handbook for Clinicians

<http://rr4cc.org/site/index.php/resources/miami-child-well-being-court>

Cass County/Leech Lake Wellness Court Band of Ojibwe

<http://www.wellnesscourts.org/files/Leech%20Lake%20Bamenim%20Anishinaabeg%20-%20Restorative%20Justice.pdf>

A process, outcome and cost evaluation report was published July 2014.

<http://npcresearch.com/wp-content/uploads/Cass-County-Wellness-Court-Process-Outcome-and-Cost-Evaluation-FINAL-FOR-OTS.pdf>

The Child Protection Clinic: A mixed method evaluation of parent legal representation (2015)

This evaluation report describes work at the William Mitchell College of Law with low income parents who require access to quality legal representation. The article states it is a social justice issue as well as a resource for improving the well-being of children.



Child Protection
Clinic.Woolman.pdf

Family and Community Engagement

This page on The Child Welfare Information Gateway examines family engagement and lists caseworker and agency behaviors, key elements and key practices in child welfare, juvenile justice, behavioral health, education and early childhood education.

<https://www.childwelfare.gov/FEI/practice-strategies/>

<http://www.cssp.org/publications/child-welfare/community-partnerships-for-the-protection-of-children/safekeeping-spring-2005.pdf>

Strategies to Increase Birth Parent Engagement, Partnership, and Leadership in the Child Welfare System: A Review (2012)

This publication is from Casey Family Programs. The page has a link to the full report and the executive summary.

<http://www.casey.org/strategies-and-programs-to-improve-birth-parent-engagement/>

Family Visitation Models

Minnesota Coalition for Targeted Home Visiting

Their Core Competencies practice page includes a number of resources for staff including a professional development framework, a guide for supervisors of home visiting programs, and a guide to strengthening parent and child relationships.

<http://www.targetedhomevisiting-mn.org/#!services/ch53>

This site also includes a portfolio of Minnesota home visiting programs. The detailed matrix (dated 2011) list a number of key elements including targeted populations and the counties where a model is available.

http://media.wix.com/ugd/73d635_113e1377fa5a4027ba1e894ce0b076ba.pdf

PEW Charitable Trust

Using Data to Measure Performance of Home Visiting: A new framework for assessing effectiveness (Oct. 2015)

This framework is one component of their information on family support and coaching programs.

<http://www.pewtrusts.org/en/research-and-analysis/reports/2015/10/using-data-to-measure-performance-of-home-visiting>

Here is the link to their complete home visiting campaign.

<http://www.pewtrusts.org/en/archived-projects/home-visiting-campaign>

Chapin Hall

Building a System of Support for Evidence-Based Home Visitation Programs in Illinois: Finding from Year 4 of the Strong Foundation Evaluation (2014)

The Strong Foundation's intention was to strengthen close to 200 evidence-based home visiting programs by focusing on three models:

1. Parents as Teachers
2. Healthy Parents America
3. Nurse-Family Partnership

http://www.chapinhall.org/sites/default/files/Strong%20Foundation%20Evaluation_04_13.pdf

Continuous Quality Improvement Resources

A Guide to Build Capacity for Child Welfare Using the CQI Process (2015)

This report by the National Association of Public Child Welfare Administrators captures several areas integral to a successful CQI process:

1. The CQI cycle and the role of evidence.
2. CQI implementation
3. Recommendations that include training, data management support and funding



A Guide to Build
Capacity for Child W

Lessons from the Field: Assessing and Improving CQI Systems in Child Welfare (2014)

https://ncwwi.org/files/Data-Driven_Decision_Making_CQI/Lessons_from_the_Field_-_Assessing_Improving_CQI_Systems_in_CW.pdf

CQI in County-Administered or Privatized States

The website of the Child and Family Services Reviews has an information portal that includes details on maintaining a CQI focus and process in those states such as Minnesota that are county-administered. They have a cost-free E-Training Platform that offers a CQI assessment tool, how to build a CQI framework, and how to monitor and sustain CQI in a county-administered state.

<https://training.cfsrportal.org/section-3-continuous-quality-improvement-cqi-child-welfare/2601>

Comprehensive Change Strategies

Gaining Buy-In from the Front Lines During Times of Change (2011)

This brief article from the Department of Health and Human Services gives an overview of steps to take during times of reform to include all workers in the effort.

<https://www.childwelfare.gov/pubPDFs/GainingBuy-InFromtheFrontLine.pdf>

Adopting a Change Strategy

A website geared towards for-profit businesses offers a straightforward change management strategy that could be adopted by a child welfare system. <https://www.prosci.com/change-management/thought-leadership-library/change-management-strategy>

Predictive Analytics

Preventing Harm to Children through Predictive Analytics (May 2016)

The American Enterprise Institute (AEI) hosted a webinar this year on using data to predict maltreatment in families. The first link is to a 3-hour long video that features two panels of child welfare leaders. A representative of Eckerd's Kids sat on the first panel to discuss the Eckerd Rapid Safety Feedback, a child safety tool now being piloted in several states. Dr. David Sanders gave his feedback on predictive analytics on the webinar's second panel. There is also a link to the transcript of the webinar on their page.

<http://www.aei.org/events/preventing-harm-to-children-through-predictive-analytics-2/>

Predictive Analytics: Applications for Child Welfare (January 2015)

In their Practice Digest, Casey Family Programs examines the definition and terminology of PA, the ethical issues that have been raised by risk-modeling and some of the research finding. There is also an

interview conducted by Dee Wilson with Dr. Emily Putnam-Hornstein and Dr. Barbara Needell on the use of population based data and practice implications.



Practice Digest
Predictive Analytics J

Implementation

Implementing Practice Models (2011)

<http://muskie.usm.maine.edu/helpkids/rcpdfs/cwmatters11.pdf>

Child Welfare Resource Center for Organizational Development

The CWRCOD wrote a detailed plan on developing a child welfare practice model in 2012. The table of contents is interactive.

<http://muskie.usm.maine.edu/helpkids/practicemodel/PMguide.pdf>

Implementation Science

Lessons Learned Through the Application of Implementation Science Concepts to Children's Bureau Discretionary Grant Programs

http://www.jbassoc.com/ReportsPublications/CB_ImpScienceReport_Final_012413.pdf

An Approach to Using Implementation Science and Child Welfare Expertise to Inform Change in Child Welfare (PowerPoint Presentation April 2013)

<http://www.cwla.org/wp-content/uploads/2014/12/2013Conf-ImplementationScience.pdf>

Building the Child Wellbeing Project: Practitioners' Perspectives on the Role of Implementation Science in Strengthening Post-Care Child Welfare Services

<http://www.childtrends.org/wp-content/uploads/2013/06/2012-18PostCareChildWelfare.pdf>