

California's Title IV-E Child Welfare
Waiver Demonstration Project
(Intensive Services)

Overview of Project and
Summary of Final Report
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Overview of Project

The Title IV-E Project is a collaborative effort:

- U.S. Department of Health and Human Services (DHHS)
- California Department of Social Services (CDSS)
- Participating counties
- U.C. Berkeley's Center for Social Services Research (UCB)

The Waiver permits the state and selected counties to waive federal and state restrictions on the use of Title IV-E funds in order to use funds flexibly to implement child welfare service innovations. Under this waiver authority, demonstration projects are required to be

- (a) Consistent with the purposes of Titles IV-B and IV-E of Social Security Act in providing child welfare services and ensuring safety, permanency and child/family well-being;
- (b) Cost-neutral to the Federal government, and
- (c) Independently evaluated.

This report summarizes results for the Intensive Services Component. Title IV-E funds were used to support new intensive services to permit children to remain at home, to return home sooner or to be placed in permanent family settings.

California's Intensive Services component included:

- Two counties (Fresno, Riverside) implementing ***Family Group Decision Making (FGDM)***, and
- Five counties (Alameda, Humboldt, Los Angeles, Sacramento, and San Luis Obispo) implementing ***Wraparound***.

FGDM involves meetings in which parents/caregivers are joined by family, friends, and providers of community resources to decide what is best for the children and families involved with the child welfare system. Fresno County used FGDM as part of their Voluntary Family Maintenance Unit, to help children at home avoid foster care placements. Riverside used FGDM for children already in foster care in order to increase the stability and permanence of their placements.

Wraparound involves the family, professionals and others in an ongoing planning process to provide the services necessary to assist the child and family in changing and/or managing the child's behavior and increasing the family's self-sufficiency. All five counties used Wraparound to stabilize children in foster care to prevent the placement of "high-risk" children and youth in more restrictive and expensive residential treatment placements or allow those in residential treatment to "step down" and return to the community sooner.

Both ***FGDM*** and ***Wraparound*** were designed to give family members a stronger voice in decision making, minimize the fragmentation of agency services, increase the ability of agencies to individualize services for each child and family, and better coordinate services among agencies and community organizations.

Evaluation Procedures

DHHS required the State to implement *a randomized experimental research design*, comparing children enrolled in services (the “treatment group”) to a comparison group receiving “services as usual.” For each county, the ratio of treatment to comparison random assignments was 5:3, so an eligible child had a greater chance of being assigned to the experimental group. UCB, the state’s external evaluator, made the assignments using automated procedures for each new referral.

DHHS also required that, at a minimum, the evaluation include

- (a) A **Process Study** that addresses the organizational and services aspects of the implementations, as well as the contextual issues that affected implementation and ongoing operations. This involved focus groups and surveys with county staff, managers, and contracted providers.
- (b) An **Impact Study** that addresses outcomes of child safety, placement stability, placement permanence, and child and family well-being. UCB analyzed administrative data from the statewide Child Welfare Services/Case Management System (CWS/CMS), and conducted two waves of well-being interviews in Alameda, Fresno and Riverside counties. County data and information could not be aggregated since each county had different programs and target populations.
- (c) A **Cost-Neutrality Study** that addresses the costs of the project to the Federal government.
- (d) In addition, a **Fidelity Study** measured whether or not these innovative services were implemented as originally intended. This involved observation of FGDM conferences, analyses of Wraparound services, and surveys of staff and clients in both the FGDM and Wraparound counties.
- (e) Also, there was an independent **Cost Study of FGDM** in Fresno County. With the assistance of Fresno County staff UCB collected data on the costs of staffing, formal services, and flexibly funded services used by the treatment and comparison groups.

U.C. Berkeley collected and analyzed data for all evaluation activities, except the Cost-Neutrality Study which was conducted by CDSS.

Summary of Findings--Family Group Decision Making

Enrollment

The Fresno enrollment of study children (excluding siblings¹) totaled 76 (49 treatment group and 27 comparison group).

The Riverside enrollment of study children (excluding siblings) totaled 63 (41 treatment group and 22 comparison group).

¹ Siblings were excluded from the analyses for both Fresno and Riverside.

Note: the number of enrolled participants used in each analysis varied. The Final Report shows breakdowns by demographics.

Process and Fidelity Studies

The Process and Fidelity Studies showed that:

FGDM was implemented with fidelity to the original objectives and philosophies of family conferencing

- (a) Families reported appreciating the intervention, and they developed collaborative relationships with county staff under circumstances that are typically adversarial
- (b) County staff felt that the intervention made a difference with their families
- (c) “Waivered” dollars were used to support extra staffing and flexible funding for families. Staff in focus groups reported needing more direction about the rules for spending “waivered” dollars.
- (d) In both counties (but more so in Riverside) FGDM was not well integrated into other agency departments and the community
- (e) In both counties after the initial conferences there was not enough follow up with families to ensure that the recommended services were carried out and adequately used

Impact Study (Outcomes)

The FGDM study looked at the following outcome indicators comparing the treatment and comparison groups:

Safety:

1. Substantiated maltreatments (both counties)
2. Removal from caregiver (Fresno)
3. Dependency declared (Fresno)

Placement stability (Riverside only): Number of placement moves

Permanence (Riverside only)

1. Type of exit from services
2. Time to achieve permanency

Child & family well-being (Both counties)

1. Health status
2. School
3. Emotional functioning
4. Family functioning

Summary of Impact Study results:

- (a) No difference between treatment and comparison groups in safety, placement stability and permanence outcomes².

² In Fresno, the treatment group showed a higher rate of substantiated maltreatment, 6 of 39 vs. none of 21 in the comparison group. This result was not statistically significant (actual $p = .08$, using $p \leq .05$ as the threshold) although the trend is worth noting. A larger sample would be required to confirm this trend.

- (b) There were some modest gains for the experimental group children in the areas of health, emotional adjustment, and one area of family functioning, however the survey sample was too small for statistical comparisons.
- (c) All in all, the treatment group *did no worse* than the comparison group

Fresno Cost Study

While the Cost Neutrality Study is primarily focused on the costs to Federal Title IV-E dollars, UCB conducted a study of costs in Fresno County to track and enumerate the costs of the treatment and comparison interventions at the County level. The Cost Study considers a larger variety of costs to the County (and, to some extent the State and Federal government) than does the Cost Neutrality Study.

Aside from showing the average cost of Family Conferences, results showed few differences in costs between the two groups for such items as caseworker time, numbers and types of client contacts, and child welfare services utilized. There were some statistically significant differences in the use of mental health services (the treatment group's child individual sessions cost more than those of the comparison group) and outpatient substance abuse services (the comparison group's services cost more than the treatment group). However, it was unclear how these differences might have impacted participants' outcomes.

Summary Discussion

The small sample in the FGDM study (due to late startup and the challenges of predicting utilization) may have lessened the ability of the analyses to find group differences, if in fact they existed. Also, the child welfare outcomes (as required by the federal Waiver) may have been too broadly defined to pick up any subtle differences in failure and success between the groups. It is likely that positive changes would be undetectable in such a relatively short amount of time in variables somewhat removed from the timing and scope of the intervention. Another potential factor explaining the neutral findings is that the comparison group children received caseworker interventions that resembled FGDM. However, UCB conducted surveys to measure the extent to which this occurred and concluded that this was not an issue.

Summary of Findings--Wraparound Services

Enrollment

The enrollment of participants in the Wraparound Study, by county, is shown below. The dates of inclusion for analysis were the child's date of enrollment through December 31, 2002.

County	Treatment	Comparison	Total
Alameda	133	79	212
Humboldt	12	4	16
Los Angeles	65	37	102
Sacramento	117	71	188
San Luis Obispo	4	3	7

Note: the number of enrolled participants used in each analysis varied. These totals do not include siblings or children referred by Probation (CWS/CMS data were not available for Probation children)³. See Final Report for breakdowns by demographics.

Process and Fidelity Studies

Summarizing the Process and Fidelity study results:

- (a) The implementation of the Demonstration Project varied between counties, but the Wraparound intervention model used in each was similar.
- (b) In Alameda County there was good adherence to the programmatic theories, values and objectives of Wraparound, as evidenced with the nationally recognized Wraparound Fidelity Instrument (administered only in Alameda County.)
- (c) There was a strong commitment by Wraparound counties to the Wraparound approach and implementation of the demonstration project
- (d) The implementation of Wraparound in child welfare led to tensions about the objectives: e.g. child safety vs. reunification; placement stability vs. less-restrictive care; the role of group home care vs. in-home care.
- (e) Recruitment and retention of specialized Wraparound staff was challenging
- (f) Wraparound required a higher workload for child welfare caseworkers
- (g) Adjustments had to be made to the “mental health model” of Wraparound which requires the active participation of an identified caregiver

Impact Study (Outcomes)

The Wraparound Impact Study analyzed the following outcomes in each of the five participating counties (only the results for Alameda, Sacramento and Los Angeles Counties were reported due to the extremely small sample sizes in Humboldt and San Luis Obispo):

Safety: Substantiated maltreatment

Placement stability:

1. Number of placement moves
2. Type of placement moves (“step up” and “step down”)

Permanence:

1. Types of placements (Family-based vs. institutional at enrollment and end of study)

³ Data analyses, therefore, do not include siblings or Probation-referred children.

2. Exits from care (due to incarceration and due to permanency achieved)

Child & family well-being

1. Behavioral functioning
2. Health status
3. School
4. Emotional functioning
5. Substance use

Summary of Impact Study results:

- (a) Overall, no evidence of increased child safety, placement stability, or permanence for children receiving Wraparound
- (b) A larger proportion of children in Alameda County receiving Wraparound were living in family-based environments at the end of the study
- (c) A smaller proportion of children in Sacramento County receiving Wraparound exited from the child welfare system due to incarceration
- (d) In Alameda County, where assessments of child well-being were conducted, youth respondents reported improved health status and emotional/behavioral adjustment. Caregiver respondents reported improved satisfaction with services.

Summary Discussion

There are a number of possible explanations for the neutral findings of the Wraparound Impact Study. First, the relatively limited time for program development and resolution of implementation issues may have resulted in program “immaturity” and an inadequate capacity to achieve the desired outcomes during the timeframe of the evaluation. Second, there was a wide range of child characteristics (e.g., age; out-of-home placement, including home) and target populations that, in combination with the sample sizes in each county, may have neutralized the efficacy of Wraparound and the evaluation’s capacity to capture differences between the groups. Third, the possibility exists that counties were able to provide Wraparound-like services to children and families in the comparison group⁴, resulting in similar outcomes between the groups. Finally, and perhaps the most likely reason for the neutral findings is the nature of the outcomes selected required by the Waiver. Wraparound is an intervention designed to improve the behavior of children through a variety of means, with the assumption that this will ultimately lead to changes in child welfare outcomes (safety, stability, permanency). It does not seem surprising, however, that positive changes would be undetectable in such a relatively short amount of time in variables somewhat removed from the direct intent of the intervention.

⁴ UCB tracked service use to determine whether counties provided “Wraparound-like” services to the comparison group children. Service packages appeared to differ between the two groups, however due to limitations in the data collected, the possibility that the comparison group children may have benefited from the innovations of Wraparound could not be completely ruled out.

Conclusions and Recommendations

Conclusions

Overall, the Title IV-E Child Welfare Demonstration Projects succeeded in accomplishing a primary objective of the federal requirements: that children and families fared no worse than if they had received services as usual.

How effective were the interventions?

- If success is measured by *positive improvements* in outcomes, we did not find FGDM to be efficacious in the demonstration projects. Although there was evidence of improved collaboration with families in the initial phases of involvement, FGDM did not seem to maintain the family's involvement with services beyond the initial conference plan. The overall issue was that the intervention was implemented and operated without enough integration into other agency and community activities.
- We offer a qualified endorsement of Wraparound. While the overall trends do not indicate a difference between the groups, there were statistically significant positive outcomes in Alameda (higher proportion of treatment group children living in family-like settings at the end of the study; some positive child & family well-being indicators) and Sacramento (a smaller proportion of treatment group children exiting due to incarceration).

Recommendations

Program Planning and Implementation

- (a) Improved integration of FGDM within agency and community
- (b) Maintain focus on collaboration in Wraparound programs
- (c) State can provide leadership for these issues, as is already underway with the Outcomes and Accountability System (the State's response to the Federal Child and Family Service Reviews)
- (d) More direction from State about fiscal issues, such as rules for spending "waivered" dollars

Improved Program Objectives

- (a) Programs need to address and measure progress of the intervening steps towards outcomes to ensure their achievement
- (b) Clearer criteria for enrollment into, and discharge from, interventions—the "at risk" category can be too broad. Systematic use of instruments to measure risk would help.

Staffing Recruitment and Retention

- (a) More resources towards recruitment of specialized staff
- (b) More resources towards training of new and continuing staff. Retention of good staff requires ongoing professional development.