Research-to-Results Brief

Child TRENDS.

BUILDING THE CHILD WELLBEING PROJECT: PRACTITIONERS' PERSPECTIVES ON THE ROLE OF IMPLEMENTATION SCIENCE IN STRENGTHENING POST-CARE CHILD WELFARE SERVICES

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OVERVIEW

This is the third brief in a series: *Building a Post-Care Service System in Child Welfare: Lessons Learned from the Frontlines of Implementation Science in Catawba County.* The first of the three briefs provided background information on the initiative that is the focus of the series -- the Catawba County Child Wellbeing Project. Both Brief 2 and this third brief examine the Project's use of implementation science – scientific methods that promote the uptake of research into routine practice settings – to help bring about systems change. While one of the co-authors of Brief 2 is a staff member of the Catawba County (North Carolina) Department of Social Services, which operates the project, that brief mainly discusses the Project's use of implementation science from the perspective of its technical assistance providers. In contrast, this brief discusses lessons learned from using implementation science in the Project from the perspective of the Catawba County Department. The lessons discussed in this brief fall into six areas: 1) using a ground-up process to plan the Project, 2) building the team infrastructure, 3) vetting and selecting interventions to use in the Project, 4) building agency infrastructure to support those interventions, 5) working with program developers, and 6) continuous program improvement efforts.

BACKGROUND

The Child Wellbeing Project is a research project partnership between the Catawba County Department of Social Services (usually called Catawba County Social Services) and The Duke Endowment to develop a continuum of post-care services for children who are exiting foster care to a permanent placement and for their families. The project is intended to determine if post-care supportive services improve the long-term well-being of children leaving foster care. The evaluation process will also determine if post-care services are cost-effective and can be replicated. The end vision is that children who have been adjudicated as abused or neglected and have been in the custody of the social services system and then receive post-care services will experience long-term success – with success assessed using child wellbeing domains in the North Carolina Family Assessment Scale G+R (which covers domains such as environment, parental capabilities, family interactions, family safety, and child wellbeing.).

The Child Wellbeing Project
Catawba County Social Services
in partnership with
The Duke Endowment

THE DUKE ENDOWMENT

nirn National Implementation Research Network

Catawba County Social Services is a county-administered social services agency, serving a population of approximately 157,000 county residents. The agency's Family and Children's Services Division, provides an integrated continuum of service, including mandated child welfare services (child protection, foster care, and adoption), voluntary services (including prevention, therapeutic foster care, and residential services), and child and adolescent mental health services (outpatient, day treatment, and intensive in-home services).

After an initial planning process, Catawba County Social Services and The Duke Endowment established a Design Team in late 2007 to oversee the planning and design of the Project. The Team included representatives from The Duke Endowment, Catawba County Social Services, and organizations providing technical assistance to the Project. Initially, Child Trends (Washington, DC) and then the National Implementation Research Network (NIRN) at the University of North Carolina, Chapel Hill provided intensive technical assistance focused on implementation science to assist Catawba County in developing the most appropriate continuum of post-care services and to assure effective implementation of those services.

NIRN used a multi-phased approach to information gathering, exploration, and installation of interventions. In the information-gathering phase, NIRN facilitated a series of focus groups with reunified, guardianship and adoptive parents and foster care/adoption social workers to assess the post-care needs of families. The greatest needs identified included: mental health needs for children, educational services/advocacy, material/financial supports, parenting education, ongoing support services, and social support and normalization of the adoption experience for adopted children. NIRN also provided a review of research and other literature about the post-care needs of families and about available evidence-based interventions to meet those needs. During the exploration phase, the agency developed six Implementation Teams of staff to review the information gathered over a six-month period and to recommend interventions to address the needs that had been identified. The work of these Teams culminated in recommendations to the Design Team about interventions to include in the array of post-care services that would be provided on a voluntary basis to children and families. These services were:

- Success Coach Service (a newly created enhanced case management service for families);
- Parent Child Interaction Therapy (an evidence-based clinical therapy for children ages 2-6 with disruptive behavior);
- Strengthening Families Parenting Program (an evidence-based parenting curriculum for families with children ages 6-11);
- Educational Advocate (a newly created position in the agency to focus on educational stability, continuity, and achievement for children entering and exiting foster care);
- Material supports (concrete services in the form of family assistance funds and reinforcements/incentives); and
- Adoption Support Groups (clinical groups for adopted children).

Once decisions had been made about using this array of services, NIRN worked with agency staff to assure the use of best practices for implementing them. This work included help installing implementation supports or "drivers" (see Brief 2 in this series for further details on Implementation Drivers). The drivers were intended to serve several purposes:

- maximizing the competence of staff providing the post-care services (for example, by using behavioral rehearsals in hiring post-care service staff;
- ensuring that post-care staff participate in skill-based training that involves staff in practicing and using new skills;
- developing coaching plans for all post-care staff; and
- creating hospitable organizational environments for the post-care services (for example, by instituting new policies or management strategies to facilitate the implementation of the services or by using data to drive decision-making and promote continuous program improvement efforts).

Technical assistance was also provided to help the Project develop and operationalize its Success Coach service.

LESSONS LEARNED

Large public child welfare agencies are often in the position of juggling multiple programs, mandates, and priorities. Efforts to engage, prepare, and support staff to implement new initiatives often suffer from lack of planning time, lack of clear alignment between the new and existing services or priorities, and lack of staff and consumer input into decisions and planning. Added to these challenges are the pitfalls associated with rolling out initiatives using top-down approaches or unrealistic timeframes, and with providing training without opportunities for staff to practice skills or be coached on the job. Moreover, in large public child welfare agencies the planning and implementation of new initiatives takes place in an environment of high demand, changing mandates, and high rates of staff turnover. The Child Wellbeing Project provided opportunities for Catawba County Social Services to use implementation science to make significant systems change while attempting to avoid many of these pitfalls. In the rest of this brief we describe the process we used to plan and implement the post-care service system and our experiences—both positive and challenging—in carrying out the work.

Ground-Up Process

The use of a ground-up approach was intentional. The approach was based on the value that managers of the agency and The Duke Endowment placed on making certain that the decisions of the Child Wellbeing Project's Design Team would be informed by clients who had experienced the child welfare system and by front-line staff who would be supporting and implementing the expanded service continuum.
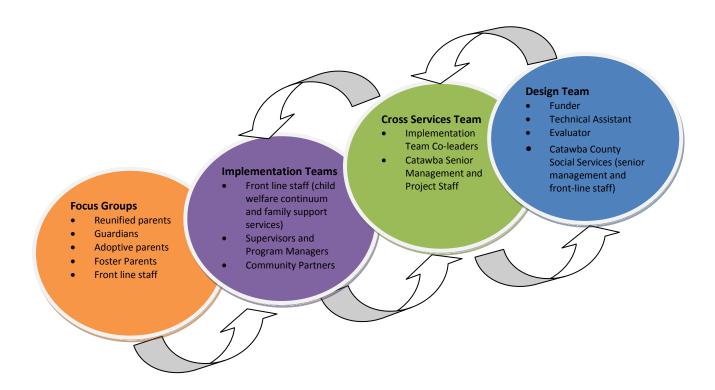
This ground-up approach started at the beginning of the project, with the use of focus groups that generated observations from reunified, guardianship, and adoptive families and from front-line staff about the most important needs that families have when they exit foster care. Results from the focus group indicated that these needs included children's mental health needs, educational services/advocacy, material/financial supports, parenting education, ongoing support services, and social support and normalization of the adoption experience for adopted children. The results, which informed the work of six Implementation Teams, in some cases challenged our assumptions. For example, we did not anticipate that families would identify educational support and advocacy as a need to the same degree that front-line staff did. But the fact that both families and front-line staff pinpointed this need resulted in the inclusion of an Educational Advocate in the Project's array of post-care services.

Another powerful example of the ground-up process was the active involvement of front-line staff on Implementation Teams that resulted in practitioner-informed decisions about how the Project would be structured and operated. And because interventions were recommended by people who "understand the work we do," the ground-up process created natural champions for post-care services. Cross-discipline teaming involved staff across the child welfare continuum of services – services that include foster care, child protection, residential care, school-based services, mental health, adoptions, and post-adoptions. This teaming allowed staff across disciplines and units at all levels of the agency to collaborate and share their expertise. The teaming also challenged staff to put aside personal agendas and move away from traditional thinking about how to serve families. The result was shared respect for and understanding of the various roles, expectations, and processes of different disciplines and units represented in the agency along with more respect for and understanding of the post-care experiences of families.

Building the Teaming Infrastructure
Catawba's approach to planning and implementing post-care services involved the Implementation Teams reviewing and recommending interventions that were *evidence-based* – interventions that have been evaluated and have evidence of effectiveness – and *evidence-informed* – interventions that are developed using evidence from research and practice. These interventions were also judged to have the capacity to meet the six areas of need that the focus groups had identified. Teams were led by co-leaders recruited from front-line and mid-level staff. The use of co-leaders was intended to help build leadership for the Project from within the agency. Also, since leadership duties for the Team were shared, the arrangement was also intended to assure the Team's work continued during times of high demands on staff time. Co-leaders handpicked staff to serve on their Teams – a practice that led to Team members having more commitment to the work and being more engaged than would otherwise been the case. One challenge that the Teams faced was that their co-leaders and members did not experience a reduction in their duties while attending weekly meetings. This challenge made it especially important both to have a time-limited exploration process and to have buy-in from supervisors to support the participation and process. Co-leaders also met together in a Cross-Services Team along with senior managers to coordinate plans, integrate decisions about Project interventions into the ongoing work of the agency, and trouble-shoot challenges that the Teams shared.

The graphic on the next page shows the membership of the various teams and groups involved in planning and implementing the Project:

Focus Groups
- Reunified parents
- Guardians
- Adoptive parents
- Foster Parents
- Front line staff

Implementation Teams
- Front line staff (child welfare continuum and family support services)
- Supervisors and Program Managers
- Community Partners

Cross Services Team
- Implementation Team Co-leaders
- Catawba Senior Management and Project Staff

Design Team
- Funder
- Technical Assistant
- Evaluator
- Catawba County Social Services (senior management and front-line staff)

Vetting and Selecting Interventions

The opportunity for Implementation Teams to vet interventions for the Project was a powerful contrast to the traditional way of doing business in which agency management or an oversight agency mandates a change in service provision. The vetting process was research-based, with teams reviewing a wealth of information, including results of focus groups and research about existing interventions addressing the six areas of need. Technical assistance staff from NIRN encouraged Teams to request any additional data needed to make informed decisions about interventions. For example, the Team addressing the need for ongoing support requested data about the primary reasons that contributed to children entering foster care. Team members thought that this information would help them understand what needs families had that might extend into the post-care period. Another Team requested data on adoption disruptions to get a feel for the level of support adopted children may need. This focus on data forced us to think critically about what we do and do not know and about what data we should be collecting. The focus resulted in using data to drive decision-making in ways that are rarely found in our day-to-day work, and for Team members the experience was an exercise in building leadership and engaging in big-picture thinking.

Using NIRN's standardized exploration tools, Implementation Teams engaged in a guided process to collect systematic information that enabled members to review and recommend evidence-based and evidence-informed interventions – a process that moved the Teams from reviewing interventions to selecting them. This guided process required us to answer a series of questions to determine services that would best serve the post-care population and best fit within the existing continuum of services. These questions focused on the level of evidence of effectiveness for the potential intervention, the extent to which the intervention was a good fit with current agency priorities and initiatives, the level of staff and

organizational capacity that would be needed to implement the intervention with high fidelity to its model, and the extent to which the potential intervention was replicable. Answering these questions allowed us to focus on integrating interventions with existing services and initiatives to build a better foundation for implementation.

Building an Agency Infrastructure to Support Interventions
Implementation Teams used the Drivers Framework (discussed in more detail in Brief 2) to assess organizational readiness to implement specific interventions and to identify the infrastructure that would be needed to successfully operate these interventions. As discussed in Brief 2, the Implementation Drivers (called Drivers because they "drive" implementation) are the core implementation components, or building blocks, of the infrastructure needed to support changes in practice, organization, and systems associated with offering new services – in this case, the array of post-care services provided by the Child Wellbeing Project.

The Project used both *competency drivers* and *organization drivers.* Competency drivers develop, improve, and sustain practitioners' and supervisors' ability to implement an intervention to benefit children and families. One example of competency drivers at work in the Project is the use of interview guides and interview processes focused on the criteria for selecting staff for specific Project positions and services. For example, the interview process for the Success Coach included a behavioral rehearsal in which candidates were asked to role-play a scenario and then redo a portion of it after having been given specific feedback. This exercise was intended to gauge how well candidates accepted and incorporated feedback, and how self-reflective they were able to be – important characteristics for the type of work they would be doing if they were selected to work in the Project.

The organizational drivers develop the organizational supports and systems interventions needed to create a hospitable environment for new programs and innovations by ensuring that the competency drivers are accessible and effective and that data are used for continuous improvement. Illustrating organization drivers at work, Catawba County requested and received funding for additional staff positions from The Duke Endowment – two temporary foster care positions at a time when caseload demands were higher than usual. This gave other staff the time they needed to participate in the Project exploration process and to build the organizational capacity necessary to prepare Catawba County to implement services.

Agency managers valued alignment between the new and existing services as essential in a large public agency where the work is shaped by many forces, such as changes in state policy, funding, and community initiatives. Senior managers were involved in the planning process, thus helping to assure that staff understood the context of the Project and its relationship to other agency initiatives, the long-term integration of core values, and alignment with other initiatives. This involvement of senior managers in the planning helped the agency to avoid or manage the "initiative fatigue" that often occurs when staff are confronted with new initiatives without much explanation or preparation. In another example of alignment the post-care unit paired with another unit providing voluntary services within the child services division to create a "Wellbeing Unit." A well-timed co-location of staff from several units (mental health therapists, adoption staff, and post-care staff) to one building next door to our main facility further supported alignment, allowing for staff collaboration and a better integration of post-care services into the agency's existing array of services.

Working with Program Developers

The efforts to examine evidence-based practices that occurred during the processes of exploring options for services and installing the Project connected Catawba County to other national experts, trainers, and program developers. This learning from experts increased the knowledge and skills of many staff, exposing them to best practices and trends related to service delivery. Agency staff who were involved in these processes now know that all evidence-based practices (EBPs) are not created equal; choosing an off-the- shelf EBP does not guarantee easy implementation or fidelity of the new Project to the model. However, by installing key implementation supports (implementation drivers) and putting in place activities and practices to maximize staff competence and organizational supports, we learned that we can improve our chances of successful model fidelity.

We also learned that it was important to be smart consumers of the evidence and to fully understand what resources the experts, trainers, and program developers would provide to ensure that the full range of implementation supports needed to operate the intervention with fidelity to the model were in place. For example, we learned that not all EBP program developers provide skill-based training, which, as noted, does more than offer information by allowing staff to practice new skills. Coaching and consultation of staff are also essential to help staff apply those skills in their daily practice. We learned that some program developers provide "training only" and do not support ongoing coaching or fidelity assessments to ensure that practice is competently sustained.

Implementation science gave us tools that helped us determine to what degree program developers were able to help install each of the drivers we needed (for instance, training or coaching). We were also given the tools to help us understand what structures we needed to put in place to help compensate for gaps in what a specific set of trainings could provide. For example, in implementing the Success Coach Service, we relied heavily on existing training designed for statewide Family Preservation services. While this training was skill-based and aligned with the type of in-home work Success Coaches provided, it was not specific to our new service. To compensate, we developed a strong coaching plan to make certain that staff who would be responsible for implementing the core components of the Success Coach model had the competencies needed to do so.

Ensuring Continuous Improvement of the Project

Effective implementation requires the ability to collect, analyze, and use data to promote processes of continuous program improvement and informed decision-making. To assure that our agency had the capacity to engage in continuous program improvement, it was decided to establish an Evaluation Coordinator position in addition to the position of Project Director. The Coordinator expanded or created data collection and reporting systems to accommodate new interventions. For example, the foster care database was expanded to capture and analyze the educational achievement levels and number of school moves for children in foster care. To assist with the process of vetting interventions, the Evaluation Coordinator also examined demographics of children entering and exiting care and the factors that contributed to children entering care.

Implementation teams developed Program Review Protocols to guide the periodic review of what is and is not working well for each Project intervention. As part of the protocol, Implementation Teams determine the specific metrics or data points necessary for the program review process, the specific timeframes for making improvements, and clear chains of responsibility to assure closed feedback loops. Once interventions were implemented, the Implementation Teams (now called Program Review Teams)

began to meet routinely to review the data and use them to inform improvements in the service and/or changes in the implementation process. For example, when the Success Coach Team determined that there were problems getting timely referrals to the Success Coach service, the Team recommended assigning Success Coaches to attend the agency's Child Protective Services/foster care blended team meetings to facilitate referrals to the service -- and with the approval of blended team supervisors, this recommendation was followed. In another example of using data to improve implementation, the Success Coach Team requested data that would help members dig deeper to find out more about the families declining the service. The Team determined that the families most likely to do so were adoptive families with children ages birth to 5 years. This led the Team to discuss new approaches for marketing the service to adoptive families.

CONCLUSION

The Child Wellbeing Project provided our agency with opportunities to make significant systems change using implementation science. While this process has been a tremendous undertaking, the use of what implementation science indicates are best practices yielded benefits for the agency. Armed with these best practices, Catawba Social Services is implementing an array of post-care services that is responsive to the needs of families, shaped by practitioners of the services, and aligned with the agency's existing services. The work that we are doing also assures our agency's ongoing capacity to maintain services that will have fidelity to the original model beyond the period of the Project's initial implementation.