A Suite of Collaboration-based Reforms Produces Impressive Outcomes

**Increased Child Safety:**
Six-month rates of child maltreatment recurrence dropped from 8.2% to 6.1%.

**Reduced Number of Children in Out-of-home Care:**
The number of children in out-of-home care was reduced by approximately 68%.

**Reduced Lengths of Stay in Foster Care:**
The average stay of children in foster care was reduced by nearly 15 months.

**Increased Numbers of Children Safely Reunified With Their Families:**
The rate of children being reunified within 12 months of removal increased by almost 20%.
Old Problems, New Solutions

In the late 1990s, Los Angeles County Department of Children and Family Services (L.A. DCFS) faced many of the struggles experienced by child welfare agencies across the country, and its outcome data confirmed serious systemic problems. In 1998, over 50,000 children were in out-of-home care. Nearly one in 12 (8.2%) children who were victims of a substantiated maltreatment report were victimized again within the next six months. When children were removed from their homes, only 33% were returned home within 12 months.1

A decade later, L.A. DCFS is a remarkably different agency, one that can claim substantial progress in its child welfare outcomes. The rate of child maltreatment recurrence, the number of children in out-of-home care, and the average length of stay in foster care have all decreased dramatically, making L.A. County a safer place for abused and neglected children. What has changed? And more importantly, how can these results be replicated in other child welfare agencies across the country?

The theme that has emerged in L.A. child welfare over the last ten years is collaboration. From a more traditional way of doing things—and unsatisfactory outcomes—L.A. changed its focus to evidence-based and innovative programs that work in concert and acknowledge the role of every player in a child welfare case: parents, caregivers, caseworkers, community partners, and, of course, children.

This special report details the comprehensive service delivery system that has revolutionized child welfare in L.A. County. But although this is a story about L.A., it is an example of what every child welfare agency can achieve. L.A. reduced reliance on out-of-home care by keeping more children with their families or reuniting them without undue delay. At the same time, they ensured child safety by making good decisions about which children needed to be in alternative safe environments and by providing the right services to families so that children could safely remain home or return home as soon as possible. When agencies select evidence-based programs, implement them wisely, and incorporate timely feedback for accountability, improved outcomes—and safer children—can happen anywhere.

The Elements of Change

When Marj Kelly was hired as Interim Director of L.A. DCFS in 2002, she quickly made two important decisions. The first was to find permanent homes for children who were currently in institutional care (and to reduce the agency’s reliance on institutional care in the future). The second change Kelly made was to introduce a structured framework for case management. L.A.’s implementation of the actuarial research–based Structured Decision Making® (SDM) system provided structured assessments to support caseworker decisions, thereby reducing possible clinical bias and creating a more level playing field for families.

The Structured Decision Making® Model

Child protective services (CPS) agencies need a reliable and valid method to estimate risk of future maltreatment. Without such knowledge, they cannot know which families will benefit most from their services. When CPS resources are directed to lower risk families, the result is depletion of resources with little impact on child safety. Conversely, there can be serious consequences when high risk families are not served. With a reliable and valid method to distinguish which families are at highest risk for future child maltreatment, a CPS agency can maximize the benefits of intervention for families who need help the most, and direct its often-limited resources in the most effective way. This simple notion is at the heart of the decision-support

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model known as the SDM® model. L.A. County is one of a growing number of jurisdictions in the United States, Australia, and Canada to use SDM assessments to guide key decisions from whether or not a report meets criteria for a child protective or alternative response to when to close a case.

Decades of research support the conclusion that, for complex decisions, structured frameworks result in more reliable and accurate decisions than clinical judgment alone, even for highly skilled professionals. Decisions in child protection are among the most complex, and the stakes are among the highest. Incorporating a decision-support framework like the SDM system creates a solid foundation for L.A.‘s child welfare practice.

The changes implemented by Marj Kelly established momentum which Dr. David Sanders, the permanent director hired in 2003, built upon. Sanders created a set of core goals for L.A. DCFS. He also provided clear expectations for staff at all levels of the agency. The goals Sanders identified were 1) increased child safety; 2) improved permanency; and 3) reduced reliance on out-of-home care.

Point of Engagement

Sanders and his staff were determined to deliver a faster, more streamlined child welfare response. The innovative new system—a multidisciplinary, team-based service delivery model called Point of Engagement (POE)—originated in L.A.’s Compton and Wateridge offices. POE refers to a set of specific strategies, including timely assessments; effective and timely transition from investigation to services; and involvement of teams of workers as needed, so that the lead worker can focus on building a positive relationship with the family. In the words of one L.A. social worker, POE changed how social workers relate to families. “We help [families] make decisions for themselves, not just listing out what they have to do to keep their children. We have more open communication with families, and family vulnerabilities are viewed differently. We’re working for the same goals—not being adversarial with families.”

POE emphasizes the role of local organizations and other community partners in offering services and aid to families, especially to those families with inconclusive child abuse and neglect findings, in order to help them stay healthy and out of the child welfare system.

POE also refers to a case management approach which simultaneously addresses child safety and strengthens family functioning. Rather than polemic debating over family preservation (which may compromise child safety) versus child safety (which may undermine family functioning), POE’s approach is to do both.

POE’s objectives were a natural fit with the SDM system. Guided by the SDM system’s data-driven structured assessments, workers can identify which children require out-of-home placement, who will benefit most from services, which underlying areas are most critical to address with services, and when children can be safely returned to their families.

Team Decisionmaking, Permanency Partners Program, and Concurrent Planning

To complement POE and the SDM system, Sanders and his executive team added three new components:

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3 The SDM system was developed by CRC. For more information about the SDM system, see www.nccd-crc.org.


Team Decisionmaking (TDM), Permanency Partners Program (P3), and a concurrent planning redesign. Each program contributed unique, necessary elements to L.A.’s new collaborative strategy. TDM’s meetings brought children’s, family members’, and community partners’ voices into placement decisions, case planning, and services. P3 widened the options for permanent alternative placements, while improved concurrent planning enabled workers and families to pursue multiple paths to permanency.

Team Decisionmaking (TDM)

While the SDM model identifies criteria that need to be considered at each decision point and provides the structure required to ensure greater consistency across workers, the Annie E. Casey Foundation’s TDM brings everyone to the table. For key placement decisions (e.g., can in-home services be used instead of a removal? Can a solution be found to prevent a placement disruption?), TDM brings together the worker, family, foster family, and key stakeholders. This collaborative approach provides a network of support for children and those who care for them.6

Permanency Partners Program (P3)

P3’s goal is to find legally permanent families for older foster youth who have languished in care. P3 began as a partnership between L.A. DCFS and the nonprofit Consortium for Children. P3 is staffed primarily by retired and part-time social workers who seek to find meaningful connections for these young people. Working together with the youth, the primary social worker, and members of the permanency team, the P3 social worker explores options like reunification with a parent, adoption, and legal guardianship in order to find older youth permanent homes.7

Concurrent Planning

The simple notion behind concurrent planning is to expedite permanency by preparing simultaneously for reunification and alternative forms of permanency. L.A. DCFS has refined this basic notion with additional ways to remove barriers to timely permanency.

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When Dr. Sanders moved on to his current position with Casey Family Programs, L.A.’s present director, Trish Ploehn, assumed leadership.8 Like Sanders, Ploehn used the transition to reinforce the positive momentum already achieved, and continues to build on progress.

Relationships With Community

L.A. DCFS knew that success would come through collaboration. Each of its main initiatives requires and supports building connections between the department and the community, including community-based and faith-based organizations and other nonprofit and government agencies.

Growing community partnerships resulted in the launch of the Prevention Initiative Demonstration Project (PIDP) in 2008. PIDP encourages collective responsibility for children by building on community networks to bring services, resources, and support more quickly and efficiently to families in need. “The goal is to help families and children by providing them with supportive services before their issues rise to a level needing the department’s direct intervention,” says L.A. DCFS Director Trish Ploehn.9

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6 For more information about TDM, see http://www.aecf.org/MajorInitiatives/Family%20to%20Family/CoreStrategies.aspx.


8 Joan Smith served as interim director prior to Ploehn being named director. Smith and Sanders spearheaded the effort to obtain a federal IV-E waiver, which allows the county to use federal funding flexibly and to reinvest savings realized by reducing reliance on out-of-home care.

The Impact of Collaboration

Increased Child Safety

One measure of child safety commonly used by the federal government is recurrence of maltreatment within six months. In 2002, of all children involved in an incident of substantiated maltreatment during one six-month window, 8.2% were substantiated again in the next six months. Six years later, this rate was reduced to 6.1% (Figure 1).

Reduced Reliance on Out-of-home Care

The number of children in out-of-home care on a given day in L.A. County in the mid-1990s was 50,000. By 2005, it had been slashed in half to 22,247 (Figure 2). Four years later, that number was reduced to 16,087, a reduction of nearly 68% from the mid-1990s (Figure 3). In part, this reduction came from removing fewer children in the first place; it also stemmed from returning children home without undue delay when their parents were ready for them to return, and from finding permanent homes for children who could not safely return home.

The average length of stay in foster care declined as well. In June 2005, children spent an average of 1,504 days in foster care (Figure 2). By March 2009, the average stay was reduced to 1,065 days, an overall reduction of nearly 15 months (Figure 3).

Improved Permanency

Children can achieve permanency in one of two ways: by returning home, or by achieving legal permanency with a different family. L.A. County reduced timelines for both paths. For children going home, it took 13.6 months to get there in 2002. By 2008, the average foster care stay before reunification was almost half a year shorter (Figure 4).

Data in Figures 2 and 3 were obtained from the February 2008 Executive Report produced by L.A. DCFS BIS section and L.A. DCFS CWS/CMS Datamart and History database.
In addition, the percentage of children reunifying within 12 months of removal has climbed steadily, from a low of about 30% (prior to March 2005) to nearly 65% (as of March 2008; see Figure 5).

When reunification is not possible, adoption is the alternative of choice for most children. The search for an adoptive home, and the required legal processes involved, can drag on, leaving a child’s future uncertain. In 2002, fewer than one in ten adoptions were completed within 24 months of removal. By 2008, nearly one in four (22.5%) were completed within the same timeframe (Figure 6).

Cost

Reducing the number of children in care and the average length of stay dramatically reduces the cost of child protection. For illustration purposes, if the cost per child per day of foster care is held constant at $50, then the cost for the 22,247 children who were in out-of-home care on the census day in 2005 and stayed in care an average of 1,504 days would be $1,672,974,400. In contrast, the cost for the 16,087 children in out-of-home care on the census day in 2009 who stayed in care an average of 1,065 days at $50 per day would be $856,632,750: a savings of more than three quarters of a billion dollars.

Monitoring Progress

A key aspect of improving child welfare practice in L.A. County has been monitoring child welfare outcomes. Accurate and timely outcome data act as the final, critical collaborator in the implementation of new practices, letting agency managers and supervisors know where changes are needed and where work is going well. Traditional child welfare information systems simply cannot provide information needed to monitor vital agency functions such as timeliness of investigations, caseworker contacts with families, or timely case plans. L.A. County relies on a web-based analytics service, SafeMeasures®. Using existing SACWIS data, SafeMeasures provides workers with near-real-time performance monitoring for their own
caseloads. Supervisors can track their units’ performance and help workers address issues before they turn into compliance problems. Administrators can track outcomes and compare performance across units. And although monitoring outcomes helps agencies improve performance and achieve outcomes, in the end, it is children and families who benefit.10

A Roadmap for the Future

The achievements illustrated in L.A. County stand in stark contrast to the bleak picture of child protection one might have when skimming the headlines. To be sure, there are other jurisdictions making progress which equals that described here. Just as certainly, though, no jurisdiction can lay claim to having “solved” the problem of child abuse and neglect. Despite the current economic downturn, or perhaps because of it, it is critical that child protection agencies have a clear plan for success.

As the positive changes in L.A. County have made clear, progress does not result from creating a catalogue of unrelated initiatives that do not interact with one another. Similarly, a single program is unlikely to provide enough impact to improve all child welfare outcomes.

When Dr. David Sanders focused L.A. DCFS on the goals of increased child safety, reduced time to permanency, and reduced reliance on out-of-home care, every administrative decision was made based on whether or not it would help achieve one or more of those goals. Sanders and L.A. DCFS carefully selected programs like the SDM system, TDM, and POE that not only contributed uniquely to improving outcomes but mutually enhanced one another.

The net result of L.A.’s reforms has been child welfare practice that emphasizes the valuable roles of social workers, families, and communities, along with systems that support and draw strength from those relationships. Whether a CPS agency needs to maximize limited resources or simply wants to improve outcomes for the children and families it serves, the story of L.A. County and the lives of the children who live there stand as an example of the power of collaboration to improve the safety and well-being of children.

10SafeMeasures was developed by CRC. For more information on SafeMeasures, see http://demo.safemeasures.org.