

Panelists:

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Jennifer Haight
Susan Smith
Donna Younkin

Please note: The following is a direct transcription and has not been edited.

Susan Smith: I'm Susan Smith of Casey Family Programs, and I will start with kind of a national perspective with kind of a little bit of a transition to our work in New Jersey and Donna Younkin will talk about New Jersey in particular from her position. They're leading this work. Joel Ehrlich from SafeMeasures will talk about the tool and its use in helping New Jersey with their Data-Driven Decision-Making and Jennifer Haight from Chapin Hall and her work in New Jersey too. We'll move in that order.

To starting with the national perspective, Casey is a national operating foundation that is committed to safely reducing the number of kids in foster care by 50% by the year 2020 and mainly by finding new foster routes to permanency for kids and keeping kids safely at home whenever possible. New Jersey has been a leader in that work compared to other. We work with 48 of the 50 states. New Jersey has reduced their number of kids in foster care by 40% since 2005 and at the same time it had better outcomes, improved time to permanency and safety for kids. Nationally that reduction over that time periods it's been a 24% for kids under-18.

Among the successful strategies in New Jersey has been the use of data and that's what we want to talk about today. It kind of increased ability to track outcomes and stay focused on what they're trying to do.

From my perspective, I've been working with a lot of different states around the use of data and New Jersey is always the example I use as the best in the country as far as using data to drive improvement. So, I think that what you'll hear from my esteemed panelists will be interesting and useful stuff.

I'm going to talk about some national data first and then I'll drill down to a lot New Jersey-specific information. First, there is a lot of variation across states. When we look any one, its one piece of the pie, this is removal rates per 1,000 kids across the country in all 50 states. DC is not included here because it's just the states. So you see this range from like 9% - 9 kids per 1,000 to just under two per 1,000, with New Jersey on the low end. New Jersey is the green bar on the far right, so in terms of the removal. This is the number of kids in 2010 that were placed into foster care per 1,000 kids in the population. But the national is at 3.4, huge range though.

The age is definitely a factor. It is really interesting because different states have different case mixes of ages in care and they have really different trajectories into permanence and trajectories out of care and into care. First, these dots are across – again,

across all states and those are babies, kids under 1, and what their removal rate is per 1,000. This group has the highest removal rate. But also a huge amount of variation per state with South Dakota up there about 20 per 1,000 that's 2% of kids coming into foster care in 2010 down on the low end to Virginia.

Then the next age the, 1 to 5 year olds, significantly less. Again, the 1 to 5 is pretty wide range, but still a lot lower than their babies and a lot more clustering, not nearly the variation across states. We still have South Dakota at about 12 per 1,000. It's kind of an outlier up there. But the 1 to 5 year old are clustering more. At the 6 to 15 year olds again a little bit lower and again more clustering. Then the 16 to 17 year olds get all over the map again. They have some very high states. That's really nothing more than the fact that the data that I am presenting here is from AFCARS files and for some states that includes their juvenile justice kids. So those ones that are up high, it's not telling anything really except for they include juvenile justice kids in their numbers. But it's still relatively low rate unless juvenile justice is included for 16 to 17. So then you're -- those dots now are the average. So when you look at the average removal rates, you're missing a whole lot of the variation by age particularly in the infant. It's pretty interesting.

Then again also nationally just to take the babies. Again, this is just under 1s and looking at them I am sorry, it's age across X-axis and the babies have the lowest -- I mean, they have the highest rate of removal, particularly African-American babies. So within that baby category, which you saw on the previous slide, have the highest rates of removal. African-American babies are quite a bit higher than a bit 20 per thousand.

Again, overall with baby that's 2% of the babies in the country in the year, African-American babies and very high rates of removal too for American-Indian and Alaska Native babies. So, age is a factor. Race is a factor. Again, this is national.

Then, I think, this is interesting too because we talk about the importance of babies. And we've been looking at these, past few slides we've been looking at the entries of kids who were coming into care. Now, this is looking at kids going out now on the other end. So kids that emancipate from care, this was emancipation in physical year 2010. 9% of those kids came into care for the first time and they were 0 out of 3. So, that percentage has been going down. The first time I presented this slide last year with '09 data and it was 12%. It still 9% came in touch with the system when they were very young.

Again looking more at the existing end of things, New Jersey is the green bar here. There hasn't been a whole lot of change over time. A case we tend to look at -- 2005 is the baseline because that's when we started for focusing our work in this way. There hasn't been much change in the percentage of kids that are exiting to permanency in that time. New Jersey has had a little bit of improvement. Most states have not improved. Most states have done worse and their increase in exists has been due to the fact that there has been a bubble of older kids that are emancipating from care. So it's not necessarily good exists. But New Jersey has been one of the smaller, one of the subset of states from these 18 states that have had positive movement in exits to permanency.

But still, not a kind of change. The difference, the change between '05 and the most recent year that we have data, which varies across the states is the difference between the red square and the line. So you see some improvement. Those states like Marline, West Virginia, North Dakota have had huge improvement in their exits to permanency but for most there is not much difference between those two.

So, you know we kind of use these data to look at where there might be opportunities in states where we should – where we were working in a particular state, we should be focusing our investment. Here this is just look at entries. I just wanted to show New Jersey has been pretty consistent with the national average. The black bar there is national and the green has New Jersey. This is reduction in the number of entries. It doesn't take into account anything else. So it's not that useful. But just if you believe me, Donna will back up that the safety measures in New Jersey in terms of repeat maltreatments, I think that we are improving at the same time.

But most states, the main point here is that most states have reduced their numbers of entries, including New Jersey. But New Jersey has reduced their entries by about 20%, but their overall kids out of home by 40%, which shows a whole lot of movement in areas. They're not just taking in fewer kids. The kids that are been in care for a long time and the kids that are in care are moving more quickly. So that's a good thing to see.

Then just as a quick kind of example of how we use data to drive the decisions that we make as an organization and it is going to follow kind of one particular area, which is – so we talked about the entries and we talked about high rates of entries among babies and talking to people in the states and other theories is that babies might be coming in at a higher rate than other people because their initial contact, their first contact in life is with a mandatory reporter and they will when they're born and there might be substance abuse laws that we have seen in some states if there is testing or immediate removal at the hospital. Most babies that come into care too, I should say, come into care when they're 0 to 3 months.

We could look this at letter this by month and they really are instant and their removals at birth for the most part. So I think you may be at substance abuse possibly and there is something to be leaned by that. So here we're looking at removal reasons across all states. Again, you see a huge amount of variation. Utah, 70% of their babies that come into care are first substance abused down to New Hampshire where very little Illinois, Wyoming none. There that's its policy here, because those are states that don't remove because of substance abuse. You're not supposed to as a worker say I'm removing a child because of substance abuse. It has to be something that parent did that was abuse or neglect not the removal reason. Other places automatically have a policy in the other way. But a huge amount of range.

Again, New Jersey on about 40%, so a little about the national average, but a kind of in the pack. Then, another theory around this is around just to take this deeper the short stayers. This slide is looking at kids who entered care during the first half of 2009 and then what percent existed care within three months because we are working with

AFCARS files we get kind of cross sectional we go to great measures to try to create entry cohorts from this one year file. This is a way of doing that. You have all kids who entered during the first half of the year. What percent existed within three months by age and it's not the babies. The theory was that maybe the babies were coming. They are being removed at the hospital and they were being brought, returned home quickly. Ignore the 17-year olds because they are emancipating as one of the reasons. But there is not much of an age effect outside the baby is being less likely to be returned home within three months. They actually have the longest lengths of stay.

Then the last slide just began to look at compare the states a little bit. Here you have the range of short stayers. Again these are kids who entered care during the first half of the year. What percent exited within three months by state. New Jersey is in the middle of a pack and you can see like New Mexico, Arkansas those states, Minnesota, South Dakota we definitely say we should be looking at substance abuse policy. I'm adding on because there short stayers are down, they have just a very high number of short stayers that might be effecting it. But New Jersey again in the middle.

This is looking at babies in particular again the same set of states. This is 0 to 3 years old. New Mexico, South Dakota, Arkansas removed their test babies in the hospital and removed them and then send them home all in the first month. You can that policy impact there and it can help. This is just kind of one example of how we can use this crude file to begin to look deeper at states and then began conversation with the people who are the panel who do the more in-depth work and actually looking at the state that can dig in deeper and Donna is going to take it from here and talk about her work and the work of New Jersey.

Donna Younkin: Good morning. I hope everybody awake. I am not good at standing here. So, we'll see how this goes. I like to move around. Can you all hear me okay. All right. We have lots of data courtesy of these folks and one of the things I am going to talk about today is we decided to use it and how we try to spread the work. I have a lot of slides. Some of them I'm going to go through very quickly. But I included them because it may have information some of you want so you can then go on to the website and get those slides and have that data with that information.

Let me tell you a little bit about New Jersey. We have the Department of Children and Families, this is actually was born in 2006. We became our own department and we have three divisions: Youth and Family Services, which does our child protection, adoption, foster care; Behavioral Health and Prevention and Community Partnerships.

New Jersey is a pretty small state geographically we got 21 counties and Youth and Family Services is basically one what I'm going to be talking about today their data and we have a SACWIS which was put in place from 2007 and we struggled with it but I am glad to say we are out of those struggles and you will see that that's actually one of things that positioned us to use our data. When someone into place we were ensured we'd ever to get that point. We have our struggles.

We have about 48,000 children under supervision right now. That's in-home and out of home and we have actually I think that count was that 7,100 children in placement. We've had a steady decline in placement but for about the last six months we been pretty steady around 7,100, 7,200 number.

Our high was about 13,000 kids in place back in 2004. Just a little timeline or little context for the use of data in New Jersey. Back in 2004 we did our first CSFR, we did our self assessment. We were like, oh my god what is this, right and how do we do that. We also had a lawsuit filed, the first lawsuit as I call it. We started to work with Joel from SafeMeasures and he'll talk a little bit about that. Our first phase of our SACWIS, our half line was rolled out at the first phase of SACWIS.

Well a real SACWIS system in the whole today, for field staff everybody happened in 2007, 2006 timeline. We had a new administration come in. A law suit was re-filed. We implemented SPIRIT and we transitioned SafeMeasures over to our SACWIS data. So, that was a big period of time for us. Then, more recently we really have been in the position to start to infuse data throughout the organization. We are using it as an executive management, we're using in our area director meeting, we're probably comparable from people's regional meetings and/or local manager meeting. We also fight for and attain a technical assistance project from the Northeast and Caribbean Implementation Center on using data and that's going to be a lot of what I talk about today how that's evolved.

We kind of went I say from a period of data collection to starting to build the data culture when our SACWIS system rolled out to really today trying to utilize data and build capacity at all levels of the organization and that's the fun part, that's really important.

SACWIS system for us was a struggle to implement but now that it's stabilized we really finding, it adds a lot of transparency to our system. People are using it, workers are doing direct input. It has really transformed our agency though there were moments when we weren't sure about that system. For those of you who are in new SACWIS system, I know Tennessee is one of them. You can get over it, it takes a while but you can get there.

We started to produce data for both our child and family service review as well as our Modified Settlement Agreement with SACWIS reporting on about 250 measures every six months, so we are keeping the data. We also started to have to utilize data at management level, and that was intentional. We got the other point where we said no more manual count because manual count is little different than the counts we are getting from the SPIRIT right, involved in there and people who were saying SPIRIT data is bad blah, blah, blah. We got to the point where there are no more manual counts. We are only using what's in the system, which make people to use the system. People began to trust it more. We really got to the point where people are using accountability read data.

If you are telling me that's not what you're doing we're not – if we need go back to the clean up your data. We do a lot of work around cleaning up the data. But we thought

and over most of that. Folks are really good any more about saying I see this problem, tell me how to fix it. We work a lot with our partners around trying to say okay, here is data that doesn't look quite right and we clean it up. But that's like a normal part of our business process anymore. It's not the leading concern and I say no the data is bad. So, that's a good step to get over when you're building your data culture.

We also use and you'll find very different data for different reasons and that's one of the good things about our partners. We get national data. We get local data, we get longitudinal data. Our system and our use of data are different people in the organization, different types of data, different levels and there is a place for all of it.

Joel will go into a lot of our local data and Jennifer is going to talk about our longitudinal data overtime. Are we okay?

So, let's just talk very simply about the type of data we use. We have point in time data, right, which is very simply tell me today how many kids are in placement 7,100, 7,200. Really interesting conversations around point in time data because people kind of get those numbers in their heads and they forget. We recently had a situation where somebody told the commissioner. We had 14,000 kids in placement in 2010. She was like, 'no, no, no' well we did because kids come and go, all right. 7,100 is the point in time but during the year we had about 14,000 kids come and go. So, those are different things we find, we have to clarify a lot of times. But it's good stuff.

There are places and times to use point in time data. We do process measures and a lot of people don't like process measures. They want to measure outcomes. But I have to tell you we have found when working with frontline staff, they love the process measures. It's their data. It's their work. It's their benchmarks. So, we do a lot of process measures. You'll see SafeMeasures helps us do that. It rolls up into the outcome measures. It helps us with our MSA requirement and then we do outcome data, the very big picture. Here comes David. Good morning David.

David: Good morning.

Donna Younkin: David is our partner from NCIC. He has been with us since the very beginning of our Fellows project. We also do outcome data. The median length of stay for children in placement compare one year to another. We talk about infant. Susan was talking about infants just like the rest of the country. We have infants come into placement at a higher rate. They stay longer. That's one of the things we're able to measure using our data.

Basically what we're seeing is to stay, there is no bad data. It's your data and it's very, it makes people do a self-assessment and makes them own it, it's transparent. People take pride in their data. We have found people competing about their data. When you start to put data all over the organization people can't help but see it.

We don't have a lot of staff doing our data work. We've managed to be able to build a partnership with the folks who are in the panel with me today so that we can leverage our capacity. I have six data analysts under me, not a lot of people. But we do use SafeMeasures which Joel is going to tell you about and show you more of to help us with our frontline data, which is on every worker's desk in the organization and every supervisor and it has a wealth of information that is up to date as of the night before and those reports have cross tabs and also it's a way you can sort the data. I've never actually counted how many reports. But we could produce 100s of reports but you don't have to call the worker can do it from their desktop or supervisor can do it from their desktop.

We use Chapin Hall to give us the longitudinal data. Jennifer produces data for us twice a year at the state-wide level as well as the county level. We have people that support us in our day-to-day work. We also have a data coordinator. This is his – geez and I've gave him new title. I have a person who has a lot of history in the agency who kind of has one foot in the data world and one foot in the practice world and he has become critical to sort of being the translator or the ambassador of the field. Those people if you can find them are invaluable. He really understands the data. He doesn't do the crunching. He doesn't do the analysis but he understand the work and he is able to translate it and so people feel very, very comfortable in talking to him, calling him and that's the key position for us.

I am trying to find some more people who have those skills because they are the ones who are going to make other people understand the work and as I talk later about our Fellows program. I think I actually have 100 of them in the pipeline to be developed. This is pretty cool stuff.

You see all those keys with the helpdesk. The helpdesk is like a key to having your state use data. When I took our SACWIS system, our helpdesk was run by the vendor, all IT people. The headlines literally in the newspapers were helpdesk unhelpful blah, blah, blah. The helpdesk we started to put in case workers and it has made an incredible difference to have help case workers handling the helpdesk.

We are four year into our system. The helpdesk calls every year just keep getting higher because staff knows that the helpdesk is there to help them. They have their favorite people on the helpdesk. They have a problem. They call. They don't hesitate. We've gotten to the point where our helpdesk, staff or the people who are testing new releases for our SACWIS system because they understand how the system works and they also understand what the field is going to have a problem with. Having a good helpdesk, helps you get good data in your SACWIS system. There are also the people that tell us if there is a problem with SPIRIT, SafeMeasures. They know the pulse of what's happening in the field and can tell whether it's one worker who is having a user or we've got a system glitch going on. Your helpdesk is a key piece of building a data culture in your organization.

We continue to do a lot in terms of building our data culture. We have started to share some of our data as part of CFSR pip with our courts very specifically. For example we

had one county who had a median length of stay of about 21 months compared to the rest of the state being closer to about 11 months. We gave every county, their median length of stay and when the judge in this county saw that he was at the far end of the extreme they went into overdrive to understand why and to make changes. They are just giving little pieces of data out not like big packets but here is your median, here is the state, here is how are makes a huge difference and it's what we have found people can understand. Little pieces of data are much more effective like getting people's attention and giving them 20 pages of charts.

We do child stat. We have done child stat for a year now. We've done child stat on system issues not cases. We visited New York and watched their process and came back and decided to do something similar but doing it on systems issue. This has been just an amazing process. We implemented family group conferencing, family team meetings and it's been hard to stick, right. We spend a lot of time training, stay up but people really weren't doing it and we kept saying why aren't you doing it and then we started child stat sessions, gave folks an outline of what data they should collect, where to get it from, where to go in SafeMeasures and they come back and they present what's happening in terms of doing family team meetings in their county.

They hated it at first, right. But they all said it was painful but wonderful to do, a really a strong self-assessment. In this past 12 months, we have seen folks really, really grow in terms of their comfort level of using data, of finding it. The first group that went was like really funny because they came back and said, we hated that we got picked first. We looked at the data. We knew the data was wrong. We knew we were doing family team meetings in our offices, we could see them. We saw them brining in info. We saw the families coming. You're wrong, you're wrong. So we set out to prove the data was wrong, right and they are like guess what, the data is right and they really like dug in and then try to figure out. So the lesson that they have all learned is that their perceptions need to be tested against the data and it's just when you talk to our area directors or local managers they really have changed how they look at things and think and question and examine. Our child stat has been phenomenal for the past year. It's going to be interesting to see what happens now when we go into individual cases. But using it to look at big system issues was a great experience.

Our monitor uses data. She takes data from SafeMeasures now and meets with our local officers about it. I don't know if you know that. So lots of people using our data in lots of different ways. We think one of the key things about getting your frontline staff to use data is having it available, right. Having yesterday's data on your desktop packaged up is key. Waiting 30 days to get a report is not so good. Having to request a report, not so good.

People want to own the data. We want them to. The data has to be able to personalize down to their level. When Joel talk, you'll see how SafeMeasures does that. We do all sorts of things. I am going to just skip because I think I've covered much of this already.

One of the key points though at the end I want to make is that there is a thing, it's too much data. We really try and highlight just one piece of data in a meeting or month or at a session. We don't try and pull or push out lots of data all at once. Our social workers tend to shut down if we give them too much. What happened was the NCIC implemented our Northeast Caribbean Implementation Center, David and folks put out a request and New Jersey decided we wanted to do something and we wanted do it around the opportunity to analyze, use, build capacity for data.

We weren't sure what we wanted to do and to be honest in the first months of the project we struggled a bit with what to do and one of the original concepts was to train every frontline supervisor in the agency on using data and then god that didn't happen because that would have been – we wouldn't feel so good about our project, right.

I am going to skip over the pain of our first few months of our...

Speaker: Good idea.

Donna Younkin: Good idea. We call it a left turn we made. What eventually happened with our NCIC project is we decided we're going to start by finding out who else was using data and how they were doing it. Linda Mitchell and Peter Watson were kind enough to agree to an interview with myself, one of my staff and Julie Atkins from the NCIC and we ended up with them telling us about states in the country where they felt they were either doing good quantitative or qualitative work and we setup a series of interviews with about 10 states as I recall and talk to them about what had they done, what had they learned and that turned out to be invaluable in terms of us structuring what became known as Fellows project or Managing By Data.

We heard other states talk a lot about having a data champion in their office, about doing a lot mentoring and coaching around getting people to use data. They talked a lot about tying it to supporting the case practice model which was very important. We were rolling out a case practice model. We wanted the data to go along side that and support it. We wanted to link it to child and family outcomes at the local level. Susan showed the state wide data and the national data which was really good stuff but when you start to talk different line stuff about the data you need to disaggregate it down to the local level. So that became very important to us and we wanted to personalize the data. This is your unit. This is your work. This is your office. This is your county.

We did a little write up on our findings and there is the website. You can get that. It's a quick paper, it's not long. Our Managing By Data project which has sort of become known as the Fellows program. It is an approach that builds internal capacity throughout the organization to use data to measure and improve performance and what you really find out is it's not just using data, it's building a quality assurance capacity.

This is our logic model. I shouldn't get skip right over. The DCF Fellows program. It's a 100 staff who became Fellows through a competitive process. They have 18 courses, an 18 months course session, one course a month for 18 months. It's designed to connect

data analysis qualitative assessment. They are actually not doing the data analysis. We are giving them a lot of data that sort of prepackaged and then they kind of take it to the next level. What does it mean. What else do we need to know? How to analyze it?

Well let me just say, one of the things is we're not just trying to make them data analyst but we are also trying to make them managers and leaders. That's been a big part of our curriculum with them. We want them to be the next group of the people in the agency who teach others about data and by picking a 100 folks who are mid level in the organization there are folks that are going to be there for years. The skills we have given them sort of, its planted a seed for this to sustain in the organization.

The Fellows really, we do a lot of work as team work. We want them to learn how to work with others in our course. We're doing a lot of coaching and mentoring. The instructor spends a lot of time with them outside of class teaching them about their data, helping them understand answering questions. While these people are in class at least a day a month, they are probably doing another day of work outside the classroom on projects they are working on and consulting with their teachers. It's fairly labor intensive. We have five groups of 20 going on at a time for total of about 100 people. We've had about four people dropout since the beginning. But big emphasis in the beginning of commitment.

The seminars are basically divided up into three 6-month models. The first is sort of becoming knowledgeable consumers of data, trying to like start them on very basic demographics, a lot on safety data. Really just orienting them to what we're going to be talking about. The next six months is much more on utilizing data to manage change, more and more variables. We're working a lot on parent child visits in this module which means you are looking at how performance is happening with the contract agency or if our own staff are doing the work or relatives are involved. Starting to look more at a system work and then the last six months will be big picture, lots of systemic issues.

The curriculum is a work in progress. But we've found its building blocks. We've found out staff didn't have enough excel skills. We have to build them an extra day of excel training for them. We're putting more excel training in everyday in every class like 10 or 15 minutes.

The curriculum has basic outlines. These are the classes that have been delivered so far. Every class has home work, every class some presentation. Lots of use of videos, lots of team building, lots of small groups. We are planning to video tape some of the classes this fall so people can see what's going on. I can do a whole workshop on just the classes, right. But this gives you an idea of some of the topics. This is the curriculum ahead. If you go to the website you'll see some of the courses that are planned. We have one group. The first group of 20 is like almost a month of head of the rest of the classes and that allows us to go back and change the curriculum if we needed after the first class has seen it.

Utilizing case studies has been like a super thing. They love case studies. Molly, who does most of the training, has found some great case studies that we've used. We do home work and presentations. Bringing in management for the presentations has been just superb. The agency has supported this from top-down in the beginning. My goodness, we're going to have to quick. Five minutes.

I'm going to go. Well, these are some of our Fellows. Let me just talk a minute. Molly is always doing numerators over denominators. That's what they are doing. It's like the big joke. But, whenever they present we have some executive staff or senior staff there and we're making the data real. We're using it, the managers come out. They want to hear it. They ask their fellows to do presentations in the office. Having that buy in has been critical. This is some of the stuff that the fellows themselves have figured out.

This was like in the first three sessions they put together charts. They went in and looked at demographic data and they came back in and presented it. They were so proud of themselves because I've tell you the first class some of them didn't get that a pie chart had add up to 100% and staff. It was pretty scary. I was like freaking. I was like, oh my god. But they have done really good and they are understanding that you have to look at your own county. They are very big into disaggregating data down to different levels. They are looking at comparing themselves to other states.

I put this slide in here because they understood that they really didn't want to look at the state wide average because things differ tremendously in our state from month-to-month. Our referrals go way down in the summer and in October and March they are sky high. They are getting those concepts, which is like just incredible to me. They are like, I am like so proud of my Fellows. They are like really cool.

This is funny. This is like looking at whether things change by supervisor if supervisor performance is different. But the reason this is funny is the system because it's the real supervisor's names which everybody thinks at folks. This person took the Phillies team then substituted every Philly person for one of the supervisors in his area to show, but to show the different levels in performance right. They are not afraid to go in and say, we got different levels of performance with different levels of supervisors.

All right, keys to implementation. We built on promising practices. We've had a leadership commitment from day one. A lot of stakeholder involvement from managers, supervisors. We were ready. The big thing I like to say is we were ready. There was an organizational climate that was ready to the Fellows program. We have an effective partnership which people will talk about. We spend a lot of time on operational details. I spend a lot of time sort of behind the scene supporting this program. We do a lot of frequent monitoring, coaching. What I want to say to you is having this successful program for us is way more than the training curriculum. There is a lot of stuff supporting this. We get calls from states wanting the curriculum. It's way more than the curriculum.

We did a lot of work around stakeholder support. The most important thing I think we did is at the beginning of our fellows program. Molly, who is the trainer went to every area office and met with the area manager and the locals office managers and said, “here is your data, here is what looks good, here is what doesn’t look so good, we’re going to need to pick a project for you fellows. Think about what you want area director. What’s going to help you” I’m going to buying from them on work the folks were doing. That was more important than our advisory committee. It just made a big difference and those managers and area directors continue to come through the presentations and stay involved.

I think I’ve covered some of this. Okay, big key, live data. We use real data in the course. People get their own data. Sometimes we’re creating it for them. Sometimes we’re pulling it from safe measures. But this is in a prepackage set of data. Everybody is using real data, their own cases. It takes a lot of work to prepare it, to know it, to know it better than the fellows who are using it. But it has made a difference, an incredible difference. I would say that if people try and replicate our curriculum at any point do try and use your own data. Don’t do package data set.

This is a big issue. When we started the fellows program everybody was concerned including me that we would emphasizing quantity over quality and that everybody would be looking for MSA compliance, totally needless fear. Folks have started to use the data to do quality assurance work in a way we never envisioned. They really used the data to say this doesn’t look right. This seems to be trending wrong. This is a bright spot. This office is doing something really well. Let’s figure out why that is and then let’s dig in and read the cases and talk to the people. This is really turned out to be a project that’s a lot about strengthening qualitative work at the local level using the people on the ground, in the field to look at the data and say, we need to go and dig and find out more what’s going on and they are very good about doing it. I just wanted to give you an outline of some of the projects that the fellows are looking at to give an idea of where they are concentrated their efforts and the types of work they are doing.

Multiple referrals. Some of our offices have really high rates of referrals coming back in. Some of the offices and some of the Fellows are going in and trying to understand why that is.

They are looking at who is making reports, what’s happening with those reports. What was the case status of their reopens? Why are they reopens? How long did it take for them to be reopened? Our institutional abuse unit has a very low substantiation rate. Who is reporting? What’s happening with our substantiation rate? That rate is like 2 or 3%. People are concerned that’s too low.

How long does it take us to get out? Most offices do really well in terms of getting out on investigations but a few are not. They are trying to understand why they are not. Children with long stays in placement, we have two counties that are looking at this. One county has a lot of teenagers. One county has a lot of young children. It’s going to be really interesting to see if they figure out why that is.

Here is an example of one county that some of the work they are doing. They are looking at cases that came back in for investigation. They've got a hypothesis. This is one of the things we teach them. Think about why that maybe happening and then we're going to go in and explore. These are the reasons. This is their own work of what they are doing. This is what they found in their initial data analysis, right. Lots of cases coming back in a very short period of time. This is their slide, their work. We would never do this, right for them down to this level. This empowers them to go in and take the story of our and figure out what's going on.

This is some more of their thinking. They haven't finished their project but they are trying to understand and what I like is they are talking about how it relates to the case practice model. Are they doing enough engagement? There is a lot of concern about an allegation based system. We have for taking reports. We're probably going to change that and the fellows are giving us ideas about how to do that.

What we've found so far is that the fellows have been able to point out the need for more Spanish speaking staff. We're linking them to services and contract needs. We are changing some of our contracts. They are using data to show way we need to make those changes. They say things like I think differently now. I don't have data to back this up. This is a bright spot. Our whole vocabulary has changed and age and say, and that's like really cool just to see people who aren't even in even in the Fellows program picking up some of the ideas.

We have quality improvement really at the local level now. The program has really spurred a lot of interest in comparison, understanding data, talking to other folks. We're little interested in seeing what the next steps are. We've had a huge learning curve for six months, seven months into this course. I'll be interested to see if the fellows sustain their learning curve for the next seven months. I think they will. They are incredibly motivated group of people. Having them compete and apply to be fellows turned out to be brilliant because we have folks who want to do this work. If we had gone and trained every supervisor I am sure we wouldn't have the same level of enthusiasm. I am like the proud mother of these 100 folks because they are really cool and they are so into it and they are fighting about the data and I really never thought I would see that day.

Joe likes to talk about. I use to say, "nobody was paying attention to the data" then they all started calling for the data and there are days when I think, oh my god I think I like it better when nobody was paying attention. But really at the end it's fun. They are using the data they wanted.

We're talking about when the program ends in June. How we're going to continue to support our fellows? We want to figure out how to make this training part of our ongoing training for our staff and we want to think about how we have others replicate this or build up on it. That's a very, very short presentation on our Fellows program, which I can go on forever. But it is very cool and we would invite people to come and see it to see them do the presentations is just mind blowing and we are going to try and video tape

some of it. Hopefully, we'll have it for people to take a look at and as we do stuff we'll posting it on the NCIC website.

Joel is going to show you some of the really cool data.

Joel Ehrlich: I sat up and Michael told me midnight and it's like, not to do. That meant that I came up with a new slideshow but add in a couple of slides one is pretty obvious because I had got to get it. I had some breaking slides though, some part of it.

By the way I am the SafeMeasures technology expert. Anyway Donna made a lot of promises about SafeMeasures and on the cool data and the thing was that I had a real theme I want to jump into which was the idea of process management. I am really going to show you very little of SafeMeasures. I am going to show you one example. I go through the slideshow of some work we're doing but again, it's to get back to the idea and you'll hear this more deep about the idea a lot.

Before I jump into talking about what I mean by process measures I have to also clarify, I was at a session yesterday very interesting one done by NCIC folks. Actually I was out and just the IC folks around the country and they were talking about a process measure and the idea was developing a measure or metric for seeing you had really done a good implementation of a comprehensive practice model. I just want to bring that and I highlighted is because I'm going to use the same word process measure but I mean a different thing, it just one of the weaknesses of the English language that we are using the same words and talking about something slightly different, alright.

Let me go ahead and jump in. Okay, first about CRC that's the Children Research Center. We were founded in the early 90s. We really are the National Council on Crime and Delinquency which has been around since about 1906, one of the oldest criminal justice organizations in the United States. We got into the field of child welfare though that didn't really play well. Actually out of our office, our office is run by child welfare social worker. I work at the Madison office our organization is based in...

Our organization is based in Auckland but our Madison office does primary child welfare, that the management in our office is primarily child welfare. I've been doing child welfare stuff really for SafeMeasures going all the way back to about 1989. But we provide consulting services for public child welfare agencies. We help them manage their case loads better. That's really the business we are in. That brings us to SafeMeasures and SafeMeasures is back in about 1998-1999, we are sitting around and we were doing what we would always done back in the paper-based world which was we're sort of behind the curve. The paper based world was going away but we are generating management reports basically showing what people were doing, what they were not doing for case implementations. What needed to get done? What they could work on in the next six months.

A group of three of us sat around and said well, there has got to be a better way. We're doing these things and we actually worked very hard to producing these reports, big fat book. We go out, we schedule one meeting with our clients. We go out there and we'll go through what's going on and then we start all over again and 12 months later or six months later we do the same thing and the data is old. How actionable is it? Can we do something dynamic? And so that was really was a genesis of SafeMeasures. The SafeMeasures was the idea, let's try to present information that's the same thing that you would have done in the old book stat reports but get it back to people in a way that was useful to everybody from the top of the organization, highly aggregated, right down to fully disaggregated for people who are running up at the line for line stuff, alright.

In this timeline, we've got a lot of California stuff. But getting back to what Donna had, we have a SafeMeasures. I don't see the SafeMeasures date for New Jersey because we have 2003. Yes, you had 2004 in your slide, yeah. We came into SafeMeasures and there was both the pending lawsuit coming up at the time and there were a couple of child deaths. Although one boy died and another one who was starving in the basement of a house and the state of New Jersey got a lot of criticism from the New York Times about multiple contacts with this family. Those boys were in the system. I think they were foster children or adopted children. They were not.

Donna Younkin: One case was birth children, the other case was adopted.

Joel Ehrlich: Anyway when we came it was really a period of turmoil and the experience in New Jersey at the beginning wasn't really that great because we are brought in sort of as an emergency basis to do something but there was no leadership and there was no real plan other than we have to tighten up our standards and when we came in tightening up the standards, in my opinion was exactly the wrong thing because the agency at the time was suffering a crisis of competence. It wasn't that the standards were poor it's that the data was bad, there was high turnover, there was poor morale, there were things that needed to be fixed to be able to make the agency work better and the very first response was we're going to make sure that everyone get seem that within in 24 hours. Let's go from a standard that we're already not meeting and go to a more impossible standard.

Over many years later this is, now eight years later I can say probably that was a just a temporary thing. When bad things happen people go into panic mode because now we do see high morale. We see excellent leadership, we see really a huge increase in agency competence and I would attribute that to leadership within the agency, excellent leadership. When Donna came in we are throwing spaghetti against the wall for about a couple of years where we're just sort of not hearing anything, we're trying to put reports up and I think Donna must have come around 2005, is that right.

Donna Younkin: Probably about that, yeah.

Joel Ehrlich: Yeah and then the world started to take sort of acceptable shape. All right. What is SafeMeasures? You're seeing there is sort of a view of the classic menu screen that anyone comes in and sees. SafeMeasures really is, all that is just dynamic reporting

from a web interface. Any one goes on to using their browser, Internet Explorer. I've already done five minutes and I've only gone through two slides and from the desktop they can go and they can go see information. It is simple. We are team of experts. We are not diligent business intelligent software. We are compared to Cognos. Cognos is a display tool but the analogy is if you want to go at it and by the way you can do this stuff with Cognos what we do in SafeMeasures. The idea is I can go out and I can hire a team of staff to produce a newsletter and I can go and get or at least the printing equipment and produce my own letter, do my own analysis or I can go ahead and I can subscribe to someone who is going to write the newsletter for me and I'm not going to do anything besides have them take care of it. That's our models.

We're basically out there doing something there are other tools that do this but we're actually providing the full service. We're not licensing software. We're providing new information and trying to get it too very quickly.

Donna Younkin: Working alongside of you.

Joel Ehrlich: I'm working alongside.

Donna Younkin: I mean there is a people component and a partnership.

Joel Ehrlich: Okay, so the idea and I said, the idea what we're doing with safe measures is that supervisors, managers and administrators have given easy access to current, accurate and transparent, administrative data. You'll allow them take ownership of it and hence Manage By Data. Donna, you too Manage By Data. Ultimately helps agencies to achieve its mission and to ensure need clients are better served. That's the goal of what we're doing here.

Then these are couple of users say of SafeMeasures screens that go really quickly. Basically we're saying here currency, this is an ironic screen because what I want to do with currency is we'll show you that this data is that we provide a date of when we got the data cut three days ago and we analyzed it two days ago or yesterday, the day before and it won't show the data on the screen. But I do show you a couple of screens that show you the bottom images or default picture that shows a timeline and a pie chart and anyone of those pies you can drill and you can get a list actually see the underlined cases and you can pick that pie chart to start it any level of agency, right from the top for the whole state, at a county level, at a supervisor level, at a worker level with 30 cases, alright. So anyone can see exactly what's going on, alright.

And again this is repeating the idea of drill down. The whole idea of owning the data which Donna brought up and I'd like to reiterate is people can take ownership of the data when they can actually see it, our agency is performing at 80% compliance on this. I am being told at 70% and I can go look at the cases and how they counted. That actually rather than making people feel threaten it actually creates a whole bunch of buying. They can actually see why they are being counted and they get an opportunity to complain.

Well complaining is really an important part and I think that I have to get used to taking criticism. It's an ongoing challenge. But Donna helps with that a lot. What I want to show you here though is that what I call the reconciliation loop. The notion again was SafeMeasures, the idea is normally what happens when you actually want to do reporting is you develop analysis, that's at top on box. You review the work with some stack holders and then release it to the users and it's a vertical diagram. That's the end of the story.

People just see the output and they have to live with it. What SafeMeasures adds in by adding this ideas of transparency is that users have an opportunity to find issues and they actually to get complain about them, report them back and the team confirms the issues it comes right back to us. SafeMeasure reports are dynamic, that are living analysis, living data. If there is something wrong and we can never find everything until user come in and tell us about the new answers of practice. We go and make the changes and we get the changes out of possible within a few days when they are complex changes, it might be a month or we not spring around. We are basically responding and acknowledging the problems and getting them back in and half the time the problems are imagined, the other half the time the problems are built in and the other half to go to three halves or we really did make a mistake. Again, I'm the data guy there. So, one and a half, one and a half, one and a half I really got the stats too as you can see.

All right. So anyway what I wanted to do is I'm going to talk about the idea what process management is coming back to that I started that with that idea, okay. And here is a common policy declaration goal. We want to reduce length of time children used to spend in out of home care, okay, standard outcome measure or outcome idea I should say. There are several measures underneath that.

Well, that's nice finding Danny, and we want to manage to a standard that actually will do things and we actually know about that the permanency well-being – and the stability measures out there, all right and we'd like to see those increase. But the question is at some point the agency has to figure out what it's going to do, all right. This is the aspect to process and Donna, one minute, I'm going to have to – well just I'm might stretch a little bit.

Donna: Too good.

Joel Ehrlich: Yeah, right.

Donna: It's great.

Joel Ehrlich: And okay. So back into the boil, in the late 90's when the first outcome measures were published and the federal governments said we're going to look at outcomes. We're not going to worry. This is really a political thing. We're not going to guide process; we're not going to tell states what to do. We're interested in report cards, states can figure out what to do, okay. There was a period there were people forgot they still had to figure out what to do. And what happens is that the outcomes just kept on

getting handed down from the feds to the states to the county workers to – right down to the worker level make this better, all right. That’s not really true anymore with the pips and sips. There really is a really active engagement and trying to figure out what we’re going to do. But at some point it still comes to that you have to make some decision about what you’re going to do, ultimately we want children to be better off. We have to have a theory of what we’re going to do, okay.

And so by taking a look here and we might be sitting around in discussions over a period of months and working on our pip or working on a specific goal we might say well let’s see we need to reduce our case loads, increase to prevent wise visitation, increase parenting skills monitoring. We want to do more family team meetings et cetera. At some point if we’re really doing these things someone is going to do a study and see if we really are making children better off, because that’s a big question, are children better off at the end of the day. Well, to get there the agency has to do it has to take action and what we want to do, what the idea, our notion of process measure is, are you monitoring effectively, the actions, the things that people are doing. You will not be able to tell directly from these whether or not children are better off. That’s your theory. You will need some research; you’ll need outcome researchers to take it to get to that next level. But you can’t tell what you are doing; you can’t tell whether you got there if you can – if you don’t know the idea of what you are doing, okay.

So, in this particular example, I wonder, I said lesson theories and so we want to increase our – I wanted to do supervise visitation, that’s the second bullet. I said we’re going to take a look at that and focus. And so here is a picture of a standard safe measures menu and I highlighted some areas here that I think might have to something to do with making children better off and you have to do with. Well, the areas I want to focus on of these are the parent child visitation, which I think is the third bullet. But these were some ideas of some things we might want to do to make children better off, all right, in the permanency area.

So anyway, we take a look at these things, these are unsafe measures, these are just – these are various process managers and here is the agency action looking at parent child visitation, we want to increase it. Now I chose this one because that yellow line shows really very, very good improvement. I mean I don’t know if you really think about it, most of the parent child visitation is kind of one of those real hurting cap type of problems. And in New Jersey they want to do this four times per month, get the parents and children together.

But you got children in multiple placements, you got foster care providers who are often income and have jobs, they have to get to, it’s tough to get them in. I don’t know if you know how this is usually set up, but you actually block out a room for a couple of hours at a local office and there are some toys in there and you hope you can get out one together all at once. It’s not easy to do. And then you got the parents who basically know because the children have been removed that there are serious issues in that household, there are going to be mental health issues, there are going to be income issues, there is going to be various family stresses over break up and over boy friend, what not.

And so being able to guarantee that everyone who promises that they were going to get there, but the call was going to work?

You are going to find the kids where they are supposed to be is very, very difficult, okay. I think it's one of those things it's impossible to ever get to a 100%, but here at the New Jersey said "you know what we're going to do, we're really going to pay attention to this." And I think that I really wasn't going to show lot of stats. This one, my green bar is highlighted back in July of 2010 where we showed a no contact rate for the month of about 54% and I believe that by – they really started an effort in January of 2011 – beginning in 2011, they really started paying attention to this and looking at the numbers they got down below 30% for no contacts.

So, this is showing that they are actually working on this and using safe measures you can see and you can drill and you can actually go to the list, you can compare the offices. I can go down lower, I don't want to, because I don't want to show any names of individual supervisors or workers you can compare supervisors, workers, see how they are doing, all right. This is one of the drill downs of comparisons. This is showing the area of office comparisons without being sorted and also using the whole data before they had actually done any work. I did not use the current on that particular display, Okay.

And using safe measures we want to clarify the practice, so the help always tells you exactly how we computed these measures and if anyone hits a link we go all the way back and show where and there, this pure data system, they had to input this data that we counted. So, that means workers when they say "I did the stuff" they can look at the health, they can look here then they can go into the SACWIS they can go oh! I didn't document that correctly, very frequent and the call goes away.

All right, so then it almost finished you, last two slides here talking about this. This is actually a child welfare evaluation conference and I was talking about the idea of process management in general where we fit in, but I also want to talk about where we fit in from an evaluation perspective, okay. And so in this diagram it's another one of these loops, I love loops. We talk the idea of policy, which can mean exogenous event like a child death can drive things outcome base research studies, which new ideas within the field, ideas of how of getting evidence driven case practice model whatever, okay. Ideas will drive some kind of policy declaration, all right. Policy declarations lead to implementation directives. Very often an agency ends there or goes from implementation directed directly into training all right, which I don't show in this grid, I don't want to.

But that means that there is a short circuit on around that process measure you go right back to an outcome based research study to see how you did. You have no idea of what he did anything, you have no idea whether they changed case practice, you have no idea whether you changed the culture. What you do know is you actually made a declaration, you trained people and you cross your fingers. Well, we want to get beyond that. We want to see if we actually did try to change practice change culture, can we do that and so the last slide. I guess it was a good idea to come out of the slides. Oh, I didn't come, oh

I did, okay good. I basically just want to show how the idea was in this case because of my partners up here is that Chapin Hall does longitudinal research, all right.

Donna: That's true. We do.

Joel Ehrlich: And that information comes back and it gets spread back to the agency, which we will make some policy declarations, all right. Also policy declarations based on research not just Chapin Hall, but in this example I'm using Chapin Hall from anyone it comes back to the state legislature, the MSA, court monitor, will basically say you got to do something. Donna then gets a hold of that. She makes the implementation directives and then where we fit again is are you meeting your directives, are you actually those task based items that actually talk about work being done on this system that people have to be accountable for, are you doing it. And we're trying to sit in there and fill that niche. And I believe last slides leaves with my name. I did not show you a lot of the safe measures, images. I can go through that after the session, otherwise I would like to turn it over and if you have any questions obviously we'll answer them at the end.

Speaker: All right. So, the good news is that my presentation is a little bit shorter and that a lot of my collages already said a lot of things that I was going to say, so I think we still have a lot of time for question.

Donna: That's because we worked together, so.

[Overlapping conversation] [01:08:10]

Speaker: I work with Chapin Hall and what we do is we're passing research through specializing and building knowledge to improve the lives of...

Donna: Children, sorry.

[Overlapping conversation] [01:08:30]

Speaker: And specifically we focus on working with administrative data that we collect from jurisdiction states counties mainly. And organizing that data into analytic files that we can then use for various purposes, all of which support our overall goal of building knowledge and supporting our customers in their efforts to improve the life of the children and families in the communities that they are serving.

For this particular project, what we are doing is we're using the administrative data to inform this continuous quality improvement cycle with respect key child welfare outcomes that are important to the state and to various stakeholders within the state. Our engagements within New Jersey, Chapin Hall's in general and mine in particular dates back a long time since prior to with the DCF, prior to the SECUWA system about the time of the initial children's rights case and there was this as Joel alluded to a little to a lot of attention being paid to then divest in our DCF.

The one thing that is common is Donna has been – I have been working with Donna for the full 10 years, I've been working with Chapin Hall and with New Jersey. So there has been a lot of consistency, there has been a lot of attention and there has been a lot of emphasis on gathering, organizing and using the vast amount of data that these administrative systems store and collect. So, in over this course of the ten years we work with the child welfare panel, we work with the various different leaderships.

Donna: Folks who've come and gone.

Female Speaker: Come and gone, but Donna thankfully has stayed. And we have sort of landed in a place where we produce on a regular basis as Donna alluded to outcome reports that report on key measures relating to safety and permanency and to turn itself extent well-being, but mainly safety and permanency for children in the child welfare system in New Jersey. So I wanted just to offer and I think that you all have heard this by now that the outcome data that we produce the sort of a counter balance to the process data that Joel has alluded to, which is a dynamic, timely set of information that sits right on the SECUWA space, data system is basically live. What we're trying to do is show change overtime, which by definition takes time. So we create these longitudinal data files allow us to look from one time period to another to see whether efforts that are being made as a part of this new case practice model or the initiatives that the state has developed are being implemented in a way as that affects the outcomes overtime.

The best way for – in our view for producing this kind of information is to develop a longitudinal file and take the time to watch change unfold. And in doing so adding the detail and the new ones that helps understand the relationship between what you're doing and what you see in the outcomes. So that – and Susan talked about this too, the real importance that being in tune to the variation with in a system. So we spent a lot of times looking at variation by place, variation by age and there are a lot of other things that we do do that I'm not going into today. Well I can, if you ask me that a later.

So I just want to focus on one thing, well this duration example which is a key permanency outcome. The idea is that children are better off their in permanent homes. Ideally they won't come into out of home placement, but if they do the goal is to return them to a permanent family as quickly as possible and insure that they are safe. It's a critical measure in the federal CFSRs, it's a critical measure in the modified settlement agreement, it's an important goal for every case worker supervisor who encountered a child or a group of children who are in crisis and need to achieve stability and permanency. So we focus on that a great deal.

In fact, if you are paying really close attention, as I'm sure you will, you'll see that my numbers match Donna's—which I love—which is good. So this is just a good straight duration measure for three consecutive entry coverts, you group the children who entered for the first time when you look, which is about 75% of children entering care children who have never previously been in a care. It's a very unambiguous straight forward way to measure duration, because you are not combining them with children who've had precious child welfare history. So this is again a one way to structure an outcome

measure that helps you understand the impact of the things you are doing on the outcome you are interested in this case durations.

So this shows that from 2005 through to 2007 and the bar graph is the same as the chart here. A slight decline in duration, meaning that in 2005 and it took just under a year for half of children who entered in 2005 to exit care. And in 2006 that went down slightly to about 11 months that went down by almost a month and; and in 2007 it went down again to about 10.5 months, so 10.5 months for children who entered care in 2006 for half of them to exit care. When you disaggregate this 2007 number a little bit and we're looking at the 2007 which if you recall the time line is about the time I think that – what is the time of the new case practice model was on roll. So it's a time, a period – at the beginning of the period of innovation and a lot of focus or renewed focus in New Jersey on the case practice model and moving children to permanency.

Then in 2007 if you recall so there was I think just under a 10 month, it was the ten and half a months of the median, but when we just aggregate it by age, you can see and this is what Susan was saying as well, that a baby children who entered as babies took almost 18 months for half of them to leave – way higher than the median. One to five year old is that ten and a half months, it's a child who's 12 year olds, eight and a half months and 13 to 17, six and a half months. So, there is a lot of variation that's directly associated with the age of the child at entry. This is something that will help figure out where you want to start making your investments.

You can also – and we do as Donna said, just aggregate this by counts. So this is the same year, 2007 I just removed the decimal point because it gets too confusing. So this is the same data, but how long does it take half of the children to leave us is the first column and the second column is how long does it take infants to leave. Because what we realize or what I'm hoping you realize as I go by this is that if you want to reduce duration overall and you see when you disaggregate by age the infants by far use the longest – take the longest time to exit, then if you want to reduce the variation you can focus on that group of children who are most likely to be pushing the average up, right it makes sense.

And when you go to make that effort you have to know in addition where you want to focus. So this is this helps to guide that. You can see that even though and Donna alluded to you there is a lot of variation among the counties, this is the state here in the middle there is the 11, there is the 18th, this is the median for everyone and 18 is the median for the babies. So you can see that there is a lot of variation in the counties, so you might not choose to focus say in Hunterdon, which is a small county, so you probably wouldn't anyway. But where the median is 8 months that's not where you want to make your investments, but you might choose to focus say in Warren, which is I think also a small county but for the sake of argument and to focus there.

So, I just want to take a moment to reiterate some of the things that my colleagues have already said. So here – this is an example of an outcome measure. This is how we produce. It's SECUWA's data, the NJ sphere data; we transformed into longitudinal file

and then queried in a way to produce this standard report every six months basically in this fashion. How does that relate to what all of my colleagues were talking about. Well I like this table because it's very straight forward and the outcomes are what I was just showing you, what I was talking about. That's what we're looking to see some change.

But as Joel said, it's not going to happen just by will. The outcome of the meeting is not going to be increased because you decided that's what you wanted to do. It requires investments in the process of care of what are we doing and how do we do it. The quality of that care, how well are we doing it, is it connected to some evidence based practice that we know is going to have the effect that we're looking for that is really going to safely get children home faster and how are those initiatives managed. The management of service delivery is not on the bottom, because it's the no man on the totem pole as a word it's on the bottom because it is the bed rock of everything that you do. If you do not have that leadership and a good plan that's well executed, well understood by those who are responsible for deploying to agency resources then nothing will happen. And if you hear nothing else today and you can see from what Donna described is a very careful, well executed plan that has buying in from the key critical core leadership all the way down to the local offices. If you don't have that, in my view you're not going to have any success.

This is a little bit more complicated and it's essentially a variation of what Joel has said, it's just putting that traffic in the CQI sort of cycle of continuous improvement contacts like. So you do have the other theory of change that's well understood, well-articulated well planned out and when you make and before you actually implement those changes you have to have a sense of what you are starting point is, let's say that median in 2007. And then you have to let – you have to relate your theory of change of what you are going to do to what you expect to happen to the measure that you are paying attention to and then you let enough time pass to actually measure it. If you want me to go down this road talk to me later. But that's a little problem with some of the federal measures is they don't actually allow you time unto watch change happen from a starting point – from a clear starting point to a clear finish point without dragging in some other pieces with you pull it out of the door, sorry.

Okay, so you undertake to do those thing, you'd let time pass and then you monitor to see if, are you doing what you said you're going to do, are you doing the way you said you're going to do it. This is why the process measures are so important actually. And having a lot of different data sources to let you evaluate the different things it seems like a lot of information, as Donna said, they gather it, they organize it. There are some people who are attentive to it but they don't let out in manageable those. So it's important though to make sure that you are paying attention to all the different areas, it's like the pilot in a lot of diets. They are all important, but they are not always the ones as far as I know.

So then you go back and see after a reasonable period of time how effective, where are we? So let's say for the sake of argument that we had a new practice plan in place in 2007. There are one of the things we're focusing on was reducing duration for children we served, that we understood that when we were going to do that infants required a lot

of attention and our case practice model introduced new strategies for working with children. And families to encourage either timely reunification or more expeditious adoption, because often infants end up on the adoption track. If you did all those things and what's more, you did that in particular places where you knew you had a specific problem, you would expect to see an effect.

And what this slide shows is that effect, this is for just the infants by county and now you have the 2007 median, the 2009 median when its available and some infants who entered in 2009 in some counties 50% of the infants had not exited by the end of 2010 ,which is when you data ends. And there you'll see a blank. But most counties did and you can see maybe if you had supersonic vision, what you would see the change column shows a lot of red negative numbers and that's where there is negative change, duration went down in these specific counties.

What affect overall the disc particular – well did focusing on infants particularly have on the overall state median? Well, they continue to go down. This 2009 number shows the median for all the children who entered in 2009 how long does it take for half of them to exit care, nine and a half months. So from 2007, 10.6 and in 2009 9.5 that's a one month decrease and it's a continuation. Let's be clear the trend that was already in place. But we can relate what happened in 2007 to a particular set of activities and I would suggest and you can also relate what happened earlier to a different set of activities, but we can Donna to talk about that. I did go back and see and a lot of that was teenagers actually. Whereas in 2007 to 2009 a lot of it was babies, totally different strategies, similar effect, reducing duration.

So this is my concluding slide, I think and we had a different order. So we're actually not going to turn to measure in these elements that messes, but I just want to reiterate that outcomes – change in outcomes we talk – as Joel said, we talk a lot about it. But the end – New Jersey managing by data initiative neither starts nor ends at outcomes. It has sort of, its eye in the price; all of these efforts that Donna described go to serve a very particular goal, which is to improve outcomes for children and families served by New Jersey Department of Children and Families. But the effects that we see are the consequence of a lot of different kinds of initiatives all of which are supporting in some way or another not only by strong leadership and a solid idea, but lots and lots of data. Unfortunate of which is this outcome data. I would say we're going to turn to the process data next, but Joel did that, Joel already did that so.

Joel: I could say one thing. I didn't actually say my own definition of process with a data, which was just – it's the data we're reporting on the work that's being done.

Female Speaker One: Right, so someone else, so we have some time for questions. So I'm going let Susan be the question filter.

Susan: Oh, thanks.

Undefined Questioner: I think our definitions of process are really similar at looking process of case management and I was involved in the development of that process measure with the implementations center and we're just looking at the processes of implementing large scale system change projects. But looking at the activities I think we are talking about the same thing. I had a question for you Donna and maybe I should direct this to Dave, but I don't know, we're going to be talking about it this afternoon, but the organizational readiness and you talked about culture and climate and talked about morale. And census is a session on data I'm going to ask you for the data behind that. Did you guys actually – did you have a major cultural climate, where there things other than morality that you looked at or was it just a sense that we're ready to get this thing moving on to on data and open up to you or David or whichever, just to get this.

[Overlapping Conversation] [01:24:56]

Donna: Hello David.

Speaker: I'm going to date myself by alluding to being there and I have the privilege and actually there was a lot of stuff and discussion within the agency that formally we could get. It's not only what Donna's brought up and all the staff were engaging all of them being as you said, now we're getting calls and very close staff and people are all over the state wanting to report not only the everyday work, but what goes on in the classes. But the – in my mind of just the involvement and the support – and the on-going support of leadership throughout their organization is so palpable. To the extent that when Julie Atkins [phonetic] [01:25:36] and I had the pleasure of I guess going to attend one of these classes online. We were told beforehand, the members of leadership, the executive team, pretty routinely attend these things and we went down there and were introduced to the Deputy Commission and few other folks, great. And to be honest you involved in using the suites in that.

Well, not only were they not sitting in the back they were asking questions and the fellows were asking questions to them as if it was a class. So, it wasn't just something passed down that that I think the willingness and just everyone really engaging and supporting in such a clear way that it was very clear from leadership again at the level. that they wanted not only for people to be able to communicate and ask these questions. And the leadership did step backwards to ask the questions on what's going on. So, but I think it was that sort of assessment that one country will serve it also as an improvement.

Donna: I think the observation, if you came to these classes and you see these folks with the data, the interaction is just – there is no way to capture it that's why we're probably going to need to video tape it.

Unidentified Questioner: Yeah.

Donna: Having stakeholder involvement by really taking the data out to them in the beginning and setting the feature that that's made an incredible difference.

Unidentified Questioner: I think my question will be if we wanted to go into another state and do this, how would we know if they were ready as an organization. Is there – what would we need to look at, is leadership most important, is role of mid-level management buy-in, most important.

Donna: I think there – one of the things is clearly, we have the data ready, right. We had data all of them.

Unidentified Questioner: Right.

Donna: That wasn't being used effectively, right. We had tons of data that we use to monitor. Some for the CSFRs but it wasn't being used at the front lines. We have still reputation sort of the readiness, I'm sorry. We're having the data available and I don't think you need a lot of data to honestly do that, right even if you have little pieces, is a good place to start, because you can't deal with all of that at once. But then I think sort usually one of the things we talk about is you have an advisory committee, right when you're starting a project. We had an advisory committee it was good. But I think the real strong part of us became and we went through probably four commissioners as this project rolled out, right.

We told the commissioners about it, they were there, but – and they supported it. But it was really getting the buying of the folks sort of the higher level area directors, local office managers and saying “we're going to train your staff we're going to take their time, you are not noting be happy because they are not going to be in your office and they're going to be working on these projects, right, but you are going to get something out of this and you are going to get something thing out of this right away. And you are going to be able to sort of direct a little bit of what kind of work they're going to be doing.” So giving them some immediate feedback and again, using their live data, it was a real process and I think that not having a CAN curriculum was like you know a false set of numbers, was the big thing for us.

Unidentified Questioner: It is the follow-up to one of the aspect to that is as I think positive data that was really even back there to work and a very live word to get office. That was on the local offices and it probably taking tool in terms of culture and the timing and actually from an active evaluation point of view from lots of local evaluators and I have had a discussion, how do we capture that, our guts tells that that's going on and we can measure that, right.

Speaker: That would be where we're going and one of our state projects we're actually doing that before and after on the culture and climate and seeing after we do these wonderful things and we get the stakeholder – the internal stakeholder engagement and external stakeholder buying that we're going to the culture and climate with state agency again and see we're bringing to that change, so it's bringing the meeting.

Donna: And I – don't under estimate the fact that we you know set up this process where we got people and the fellows program who wanted to be there and you know even some

of them were skeptical at the beginning sessions like we're here about, we'll see where this goes, we're not sure this isn't one more new initiative, but all that's gone away. But really doing it competitive, the fellows came in thinking they were really special people, right and then they get started. The first few months some of them were like you know and they – there is all sorts of tales [phonetic] [01:30:21] about this, but they thought oh, my god what did I get myself into, right. They were like overwhelm and they were – they went from up here to down here and now they are starting to come up.

And what I really, really like is we had this exercise that said at the end of this process where you're going to be, whether you're going to be at 18 months and one of them – one of the groups said “you know it's like kids going through school, we're e the new kindergarteners getting on the bus” and we're all excited and then it's like oh, my god we hate school. And then it was like we graduated but they've really see their role, so they put on their picture, the school bus going back to the beginning and they are the teachers for the next generation in our agency around the data. They really have taken on the role of they are special people who are going to teach others and carry thus forth. And you know to have a 100 people in the agency, mid-level staff who're going to be there, most of these people have been there 10 years or more, are going to be there over the next 10 years. We planted a seed in our agency for the data work to grow. So it's been pretty cool. Other questions?

Female Speaker Two: We're out of time.

Donna: We're out of time.

Female Speaker Two: Right.

Donna: But if people want I'm sure Joel, safe measures is cool and I'm sure we could do a whole session on how we're using the data...