# Capacity Building Projects: The Role of Tailored Services in Fostering Reforms in Child Welfare Systems

**Evaluation of the Capacity Building Collaborative** 

# Introduction

This evaluation brief describes a major federal investment to support child welfare systems across the nation, with individualized technical assistance (TA) intended to build capacity in their systems. Improved capacity should enable state and tribal child welfare agencies and courts to successfully undertake the practice, organizational, and systemic child welfare and court reforms necessary to implement federal standards and achieve better outcomes for children, youth, and families as measured in the Child and Family Service Reviews (James Bell Associates & ICF, 2020). In 2014, the Children's Bureau restructured its technical assistance and formed the Capacity Building Collaborative (the Collaborative) (James Bell Associates & ICF, 2020). The Collaborative comprises three Capacity Building Centers (the Centers):

- The Center for States serves state and territorial title IV-B and IV-E public child welfare agencies and has the largest scope of work and funding.
- The Center for Tribes serves title IV-B and title IV-E tribal child welfare agencies and organizations.
- The Center for Courts serves state and tribal Court Improvement Programs (CIPs).

The Collaborative defines organizational capacity building as an ongoing, evidence-informed process intended to develop a system's potential to be productive and effective. Capacity can be built by applying the child welfare system's human and organizational assets to achieve both current and future goals. Organizational capacities exist along five dimensions: resources, infrastructure, knowledge and skills, culture and climate, and partnership and engagement.



Jurisdictions across the country have been engaged in work with the Centers for the past 7 years through different Capacity Building projects, which are targeted to address a particular child welfare issue (e.g., improving workforce recruitment, development, and retention; creating continuous quality improvement (CQI) systems; preserving family connections; delivering trauma-informed services; improving legal representation and ensuring quality hearings; tackling equity concerns such as disproportionality and disparity). Nonetheless, because projects are still underway in many states, tribes, and court systems, any related transformations have not been well publicized to date. This brief offers readers a glimpse into the workings and operations of these capacity building projects and the targeted areas and topics being addressed. A unique aspect of these projects is that Centers do not impose a predetermined approach to assist jurisdictions with reform efforts; rather, these projects aim to meet the jurisdictions "where they are" in terms of specific goals, interest, and readiness to implement a change initiative. This brief describes for the child welfare field how Centers work with and support jurisdictions to make desired changes in their systems, and it includes a summary of the commonalities as well as differences among the projects implemented.

The Centers engage in tailored services to increase knowledge and skills of child welfare or court professionals and foster improvements in organizational capacity and performance. Tailored services offer customized support to meet the unique capacity building needs of individual states, tribes, or CIPs. Six projects spotlighted in this brief demonstrate how tailored services offered to jurisdictions by the three Centers help support jurisdictions as they strive to build capacity along all five aforementioned dimensions: resources, infrastructure, knowledge and skills, culture and climate, and partnership and engagement.

As TA providers, Centers partner with the jurisdictions, assess their strengths and needs, and develop a workplan for jurisdictions that decide to engage in services. Capacity building service strategies support improved existing child welfare practices and implement new programs, practices, and processes. Four of the major strategies the Centers utilize to support jurisdictions are coaching, consultation, facilitation, and tool development (Richards & Barbee, 2022).

#### Four Major Strategies (Richards & Barbee, 2022)

**Coaching**: A process that supports the improvement of specific skills/practices and focuses on performance-based outcome(s). Includes observation, listening, questioning, reflection, feedback, prompting, modeling, and practice. Coaching can be individualized or provided to a group, with feedback tailored to performance.

**Consultation**: A collaborative, problem-solving process that requires outside or independent expertise (e.g., in child welfare practice, change management, evaluation) to support and inform the jurisdiction's comprehension, completion of a task, and/or resolution of a specific concern or topic.

**Facilitation**: Carrying out and/or helping to develop a specific process for a group to achieve a goal, make a decision, or resolve a dispute.

**Tool development**: Collaboration with a jurisdiction to develop customized tools or products, including manuals, guides, worksheets, spreadsheets, templates, instruments, and training or reference materials that summarize, record, and/or communicate information.

# Overview of Tailored Services Projects

Through tailored services projects, the Centers work with jurisdictions to identify their needs and build their capacity to make organizational changes and practice improvements. These interventions may improve outcomes for children, youth, and families.

**Topics.** The Centers use a common list of topics to identify and classify projects based on the area(s) they address. Centers can use this information to categorize other projects focused on the same topic, or they can use the data to support their strategic planning, such as prioritizing the development of resources related to the topics most frequently addressed. For the purposes of this brief, topics were grouped into common areas that fell across five general domains:

- Safety
- Permanency
- Well-being
- Child welfare infrastructure and systems
- National reporting

Exhibit 1 shows the topics of the 242 projects the Centers worked on between October 1, 2020, through June 30, 2022, by domain and by Center. On average, projects for the Center for Courts and Center for States addressed two to four topics, while projects for the Center for Tribes addressed five topics. Each Center had projects across all domains, but the topics most often cited varied by Center.

- Of the 87 Center for Courts projects, most addressed the domain of child welfare infrastructure
  and systems, with the greatest number of projects focused on CQI systems; cross-system
  collaboration; quality representation; quality and timely court hearings; and workforce
  recruitment, development, and retention.
- The 136 Center for States projects addressed a range of topics, with many projects clustered
  around the domains of child welfare infrastructure and systems and well-being. The most
  frequently addressed topics included Child and Families Services Review (CFSR)/Program
  Improvement Plan (PIP) or Child and Family Services Plan (CFSP)/Annual Progress and
  Services Report (APSR); CQI systems; engagement and involvement of family, parents, and
  youth; and workforce recruitment, development, and retention.
- Of the 19 Center for Tribes projects, the greatest number focused on the domain of child welfare infrastructure and systems, and frequently addressed the topics of CFSP/APSR, information systems, and cross-system collaboration.

Exhibit 1. Topics of Tailored Services Projects, by Domain and by Center

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Topics <sup>a, b</sup>	Center for Courts n = 87	Center for States n = 136	Center for Tribes n = 19	Total <i>N</i> = 242			
Domain: Safety							
Assessment of safety and risk	10	12	2	24			
Placement prevention/in-home services	4	14	4	22			
Indian Child Welfare Act	5	2	5	12			
Placement decision-making	1	5	2	8			
Child protective services	0	6	2	8			
Domain: Permanency							
Permanency planning	11	7	2	20			
Preserving family connections	5	6	2	13			
Foster care/out-of-home services	1	8	3	12			
Adoption and safe families act	9	0	3	12			
Adoption/guardianship/tribal permanency services	3	3	2	8			
Relative/kinship care	1	6	1	8			
Fostering Connections Act	4	0	3	7			
Resource family supports/placement stability	1	5	1	7			
Domain: Well-being							
Family engagement	10	22	3	35			
Family/parent involvement (organizational level)	2	20	1	23			

Topics <sup>a, b</sup> Youth involvement (organizational level)	Center for Courts n = 87	Center for States n = 136	Center for Tribes n = 19	Total N = 242		
,	1	18	1	20		
Culturally responsive services	2	10	2	14		
Child well-being: physical, emotional, educational	5	8	1	14		
Family well-being	3	9	1	13		
Youth development/independent living	3	4	1	8		
Trauma-informed services	1	3	3	7		
Domain: Child welfare infrastructure and systems						
Continuous quality improvement system	44	40	3	87		
Child and Family Services Review Program Improvement Plan (CFSR/PIP)	12	57	0	69		
Cross-system collaboration	25	19	6	50		
Workforce recruitment, development, retention	16	18	2	36		
Child and Family Services Review Annual Progress and Services Report (CFSR/APSR)	0	26	10	36		
Quality and timely court hearings	24	2	2	28		
Information systems (statewide or tribal)	9	8	10	27		
Quality representation	23	0	1	24		
Agency responsiveness to community	1	9	2	12		
Case review system	3	3	1	7		
Foster and adoptive parent licensing, recruitment, retention	0	5	2	7		
Service array and resource development	2	0	4	6		
Domain: National reporting						
Adoption and foster care analysis and reporting system	0	2	4	6		

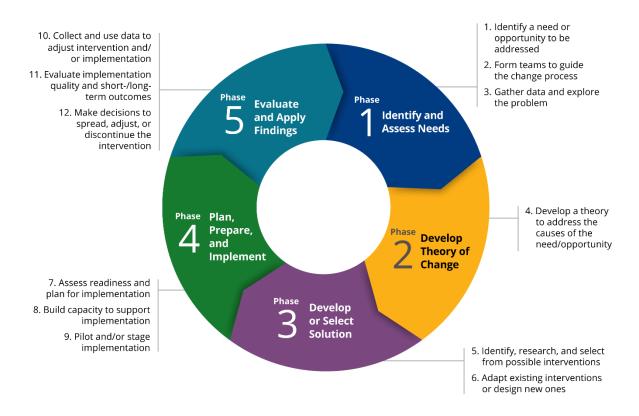
Source: CapTRACK online tracking system data from October 1, 2020, through June 30, 2022. Notes:

**Change Management and Implementation Approach.** To maintain consistency across jurisdictions, the Centers use a similar approach to deliver services. These services are guided by a research-informed approach to change management (CM), implementation, and CQI. As exhibit 2 shows, this CM and implementation approach has 5 phases and 12 steps (James Bell Associates & ICF, 2020).

<sup>&</sup>lt;sup>a</sup> Projects can address more than one topic, so the sum of topic areas exceeds the total number of projects.

<sup>&</sup>lt;sup>b</sup> The following topics were addressed by fewer than a total of five projects and are not shown: *Safety:* Preventing Sex Trafficking and Strengthening Families Act (3); *Permanency:* Family First Prevention Services Act (4); reunification services (3); Multi-Ethnic Placement Act (3); tribal permanency projects (1); post-permanency supports (1); *Wellbeing:* Services for LGBTQ (0); *Child Welfare Infrastructure and Systems:* Tribal Title IV-E Capacity Building Grants (4); comprehensive child welfare information system (2); *National Reporting:* National Youth in Transition Database (1), National Data Archive on Child Abuse and Neglect (0).

**Exhibit 2. Change Management and Implementation Approach** 



The Centers work with jurisdictions where they are in the CM process; this can mean focusing services only in one or two steps or remaining engaged with the jurisdiction throughout the process. The Centers record and track the primary step(s) on which they are working with the jurisdiction, which provides a common mechanism for measuring and assessing progress in meeting CM and implementation goals. Information on the steps and phases where Centers concentrate their services also offers important data on where jurisdictions are in their system's change efforts: Are most projects in early implementation, when jurisdictions begin to explore the problem and identify needs? Are they mid-implementation when jurisdictions devise or select possible solutions? Or are they in later implementation, when jurisdictions pilot and stage the solution and employ evaluation data to make adjustments? Exhibit 3 displays the percentage of total projects (N = 242), by the primary CM phase(s) that Center services addressed. As shown, most projects received support to identify and assess needs and develop or select solutions, but less than 20 percent of the projects received services to plan, prepare, and implement those solutions.

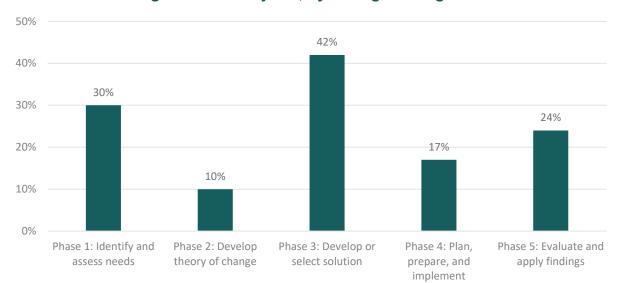


Exhibit 3. Percentage of Total Projects, by Change Management Phase<sup>a</sup>

# **Project Spotlights**

The Overview section details the topics as well as the CM phases that services addressed across Centers. Although these data are important to understand the collective nature of services, they do not explain how Centers specifically work with states, tribes, and CIPs to support their change initiatives. To bridge this gap, this section highlights six projects (two from each Center). Selected in consultation with the Centers, these projects exemplify the types of work provided. The "Project Spotlights" use data from the Center's online service tracking system and interviews with Center providers to detail when, where, how, and why projects were conducted and their potential impact on outcomes.

<sup>&</sup>lt;sup>a</sup> Center services can address more than a single phase, so the total percentage exceeds 100.



# Project Spotlight: Pennsylvania-Specific Judicial Academy on Reasonable Efforts

#### Overview

The Judicial Academy on Reasonable Efforts<sup>1</sup> is a 2-day virtual training designed by the Center for Courts with three goals: to build the capacity of judicial officers to understand reasonable-efforts findings in child welfare cases as a legal mechanism, to understand their implications and impact, and to determine whether reasonable efforts have been made. The Judicial Academy uses innovative and interactive techniques, including <u>Liberating Structures</u>, hearing simulations, breakout rooms, and chats.

The Pennsylvania CIP requested assistance from the Center for Courts in codeveloping and delivering three state-specific Judicial Academies to build the capacity of its workforce to make meaningful, specific, and legally compliant reasonable-efforts findings, as required by Title IV-E. The CIP was also interested in learning how to develop and deliver Judicial Academies and similar trainings on its own in the future. The ulitmate goal of this project is to improve safety and timely permenency by improving court decisions related to reasonable efforts.

#### **Project Activities**

The Center for Courts engaged the CIP in the following activities:

- The Center held videoconferences at least monthly with CIP and regional office staff to plan the execution and evaluation of the Judicial Academies.
- The Center worked with CIP staff to build capacity on use of the state's videoconferencing platform and Academy requirements.

**Jurisdiction:** Pennsylvania CIP, Region 3



**Dates:** January 2021–January 2022

**Topics:** Permanency Planning; Preserving Family Connections; Assessment of Safety and Risk; Quality and Timely Court Hearings; Workforce Recruitment, Development, and Retention; and Adoption and Safe Families Act

**Domains:** Safety; Permanency; and Child Welfare Infrastructure and Systems

Change Management Steps: Adapt existing interventions or design new ones (step 6); build capacity to support implementation (step 8); stage implementation (step 9); and evaluate implementation quality and short-term outcomes (step 11; see exhibit 2)

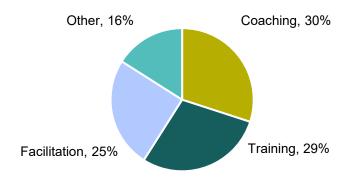
<sup>&</sup>lt;sup>1</sup> The "general" Judicial Academy is a constituency training to a region of CIPs that involves multiple jurisdictions.

- The Center tailored training to align with Pennsylvania laws on reasonable-efforts requirements, judicial roles and procedures, and language used for court hearings.
- The Center developed four simulations to give Academy participants the opportunity to practice making reasonable-efforts findings and created guides for participants and faculty.
- Prior to each Academy, the Center convened a "train the trainers" session with CIP staff and faculty.
- In October 2021, the Center co-delivered with Academy faculty 3 Academies to 79 participants: 47 judges and 32 hearing officers.
- The Center administered pre- and post- knowledge assessments and an anonymous survey to Academy participants, analyzed the results, and reported findings to the jurisdiction.
- The Center held debriefings with CIP staff and Academy faculty.

#### **Center Services**

The Center provided to CIP staff 56 direct service hours<sup>2</sup> focused mainly on coaching, training, and facilitation (see exhibit 4). The Center worked with the CIP to tailor the Judicial Academy to meet state-specific guidelines and build the team's capacity to conduct this training and future ones. The work performed in this project was in phases 3, 4, and 5 of the CM process: develop or select solution; plan, prepare, and implement; and evaluate and apply findings (see exhibit 2).

**Exhibit 4. Service Hours, by Strategy** 



**Note:** N = 56 direct service hours

#### **Outcomes**

Academy participants demonstrated significantly increased knowledge of reasonable-efforts findings, according to the results of pre- and post- knowledge assessments and surveys. At the close of the project, Court Improvement Programs (CIP) staff reported better capacity to conduct similar trainings and identified changes in their approach to training. Since then, the CIP has incorporated aspects of what they learned in other training efforts in Pennsylvania. The CIP is working to create a virtual session on reasonable efforts for attorneys in early 2023.

<sup>&</sup>lt;sup>2</sup> Defined as direct contact between Center staff and the jurisdiction team.

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### **Project Spotlight: Safety Decision-Making**

#### Overview

This project has two components: the Court Observation Project (baseline study) and the Court Observation Safety Decision-Making Follow-Up Study. In May 2020, Washington CIP requested assistance from the Center for Courts in developing and implementing an evaluation plan for a hearing quality project that focused on safety decision-making. The impetus was the CIP's collaboration with the child welfare agency on the state's PIP for round 3 of the CFSRs. One of the PIP strategies to improve permanency was to develop, understand, and articulate consistent language regarding the child welfare agency safety framework and to implement changes in caseworker and court practice related to it. With support from the Center for Courts, a multidisciplinary team created an evaluation plan to assess hearing quality related to safety practices in identified project sites (seven counties). The evaluation gave baseline data to the PIP workgroup on practice within the courts on safety decision-making, to inform planning for trainings and practice change efforts for Washington. The Center produced a baseline evaluation report in March 2021. The Washington Court Improvement Training Academy designed a series of intensive cross-system trainings and action plans

Jurisdiction: Washington CIP, Region 10

Dates: May 2020–June 2022

Topics: Assessment of Safety and Risk; Cross-System
Collaboration; Child and Family Services Review/PIP Process

Domains: Safety; Systemic Areas; Child Welfare infrastructure and Systems

Change Management Steps: Gather data and explore the problem (step 3); collect and use

data to adjust intervention and/or

implementation (step 10)

(Safety Summits) based on the baseline findings. These Safety Summits were implemented in project sites between October 2021 and May 2022. This training intervention sought to promote a common understanding and language regarding safety threats and safety planning and to encourage inquiry and discussions that will ultimately result in better outcomes for children and families.

The Court Observation Safety Decision-Making Follow-Up Study evaluated the impact of the Safety Summit trainings by comparing baseline court observations to observations following the trainings. The study assessed whether agency and court personnel were discussing safety at hearings and using common language regarding safety threats and safety planning. Three to five months after the training, the Center for Courts collected follow-up data from four of the original seven sites three to five months post training to compare practice to the baseline hearing quality assessment. The Center delivered the follow-up study evaluation report to Washington CIP in June 2022.

#### **Project Activities**

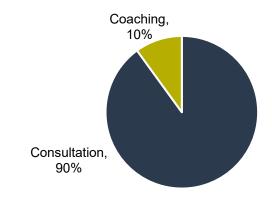
The Center for Courts engaged the CIP in the following activities:

- The Center conducted two sessions of a virtual CQI workshop on hearing quality; CIP staff, child welfare agency staff, federal staff, and others attended.
- The Center worked with the jurisdiction to devise a theory of change for how creating a shared understanding and language of safety will ultimately contribute to achieving more timely permanency.
- The Center created the multi-method baseline evaluation plan and instruments with input from the jurisdiction team. Instruments included a structured court observation instrument, a structured case-file review instrument, and online surveys for stakeholders and parents.
- The Center collected administrative data from the child welfare agency.
- The Center collected court observation and case-file review data for the baseline and follow-up studies; analyzed all data; wrote reports of the baseline and follow-up evaluations; and shared these reports with the jurisdiction team.
- The jurisdiction team created a one-page infographic on key findings from the follow-up study and <u>final summary report</u> of Washington State's Safety Summit Project.

#### **Center Services**

The Center provided CIP staff 15.5 direct service hours<sup>3</sup> focused mainly on consultation (see exhibit 5). The work performed was primarily in phases 1 and 5 of the CM process: identify and assess needs and evaluate and apply findings.

**Exhibit 5. Service Hours, by Strategy** 



**Note:** N = 15.5 direct service hours

#### **Outcomes**

The Center provided Washington with baseline and follow-up evaluation reports. Baseline data helped to refine training. The follow-up study findings demonstrated statistically significant changes in practice to how safety information is discussed and shared. For example, participation in Safety Summits was shown to yield more shelter care hearings with a discussion of all safety items, such as efforts to prevent removal, specific safety threats, vulnerabilities of the child, conditions for return, and justification for supervision of family time.

<sup>&</sup>lt;sup>3</sup> Defined as direct contact between the Center for Courts staff and the jurisdiction team. Most services for this project were indirect service hours. A total of 347 indirect service hours were provided across the two project components, consisting primarily of Center staff collecting and analyzing data and writing reports.



# **Project Spotlight: Strengthen Engagement and Inclusion of Relatives**

#### Overview

In 2019, New Mexico data indicated that the state lacked policies, processes, or consistent practices that help to maintain relative relationships for children in care. The state identified three root causes for this dearth: limited resources, inconsistent early efforts to identify and engage relatives, and lack of recognition of the multiple paths for relative involvement. New Mexico requested support from The Capacity Building Center for States (CBCS) to implement improvements to their relative care processes and practices. This support included coaching state employees as they tested the components of the Relative Care toolkit, assisting with the analysis and interpretation of test findings, and using those findings to inform training and policies. In 2021, the CBCS continued to deliver coaching and consultation on the implementation of the Relative Engagement Suite of Tools. This work focused on testing each tool; determining the additional training, coaching, or practice guides that were needed to ensure consistent and effective use of the tools; and sustaining efforts to improve kinship care and kinship engagement. Three previous projects laid the foundation for the work highlighted in this profile; what is presented here is from the two most recent projects.

These projects sought to create tools to implement and monitor practice policy changes; to build related agency knowledge and skills; and to shift agency culture and climate on working with relatives. Specifically, the purpose of these projects was to increase the skills of the Children, Youth, and Families Department (CYFD)

**Jurisdiction:** New Mexico Children, Youth and Families Department, Region 6



**Dates:** October 2019– September 2021

**Topics**: Family Engagement; Preserving Family Connections; Relative/Kinship Care; Family/Parent Involvement (organizational level); Youth Involvement (organizational level)

**Domains:** Permanency; Wellbeing; Child Welfare infrastructure and Systems

Change Management Steps: Form teams (step 2); gather data (step 3); assess readiness and plan for implementation (step 7); build implementation capacity (step 8); pilot implementation (step 9); and collect and use data (step 10)

and boost its ability to use the state's Relative Engagement Suite of Tools (family finding, genograms, icebreakers, etc.) to improve engagement with relatives, promote connection between

children and their extended families when children are in care, and increase the number of cases in which children who are removed are placed with kinship providers.

#### **Project Activities**

The Center for States engaged the New Mexico CYFD (project team) in the following activities:

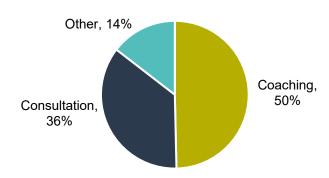
- The project and Center teams created workgroups on training and coaching, practice and tool
  development, and relative support and engagement. Workgroups received coaching from the
  Center throughout the project.
- The project and Center teams held a 2-day onsite kickoff meeting where a team charter was
  reviewed and revised, and workgroups planned for implementation, identified capacity supports
  needed, and considered readiness.
- The Center held discussions, brainstorming, and coaching sessions on recruitment, engagement, inclusion, incentives, support, and empowering of relatives and youth as a part of the Relative Engagement and Support workgroup. Included was the facilitation of a discussion between relative/foster parent partners and agency staff on concerns and misinformation about the department's shift in supporting relative placements and maintaining family connections.
- The project team received from the Center coaching and support on authentic and sustainable family engagement.
- The project and Center teams discussed statewide messaging and interventions for community partners, including foster parents, around supporting relative placements and maintaining connections.
- The project and Center teams debated coaching models at the organizational level and individual levels.
- The project team defined the term "fictive kin" and drafted policy and procedures around this definition.
- The project team discussed the search tools used for locating relatives and held listening sessions on the search tools.
- The state team revised and conducted usability testing on the Relative Engagement Suite of Tools and wrote an implementation guide, policies, procedures, and forms for the tools as needed. The state team then trained staff on these tools and planned for expansion and sustainability.
- The state team created a Relative Engagement guide for the workforce. This document contains strategies for how to engage relatives early in the case, how to communicate with the courts, what the shift is, and why it is important. This guide includes engaging with tribal families.
- The state team revised trainings for new employees and foster parents. Team members wrote practice guides.
- The state team held virtual trainings with placement workers to develop their skills and knowledge around relative placements, licensing standards, and their role in developing relative

- connections, including co-parenting. The state team also hosted "train the trainer" sessions on the Relative Engagement Suite of Tools.
- The state team conducted surveys to understand how to engage relatives. In response, team
  members developed, administered, and analyzed measures of organizational readiness. The
  state team held focus groups and listening sessions with investigators, supervisors, workers, and
  parents to gather feedback on usability testing.

#### **Center Services**

The Center provided to New Mexico CYFD 86 direct service hours, and most of the work came in the form of coaching and consultation (see exhibit 6). The Center targeted phases 1, 4, and 5 of the CM process: identifying needs; plan, prepare, and implement; and evaluate and apply findings.

**Exhibit 6. Service Hours, by Strategy** 



**Note:** N = 86 direct service hours

#### **Outcomes**

Across the many change management implementation steps addressed during these projects, the largest amount of time was spent on assessing readiness and planning for implementation. Several capacities were built along the way, including child welfare practice, policies/operating procedures/protocols, and community and cultural group engagement/participation/buy-in.

When the Strengthen Engagement and Support for Relative Families workplan closed, practice, policy changes, and tools were in place and had begun to be implemented. Children, Youth, and Family Department staff's skills and their ability to use the state's Relative Engagement Suite of Tools had increased. In addition, state leadership committed to prioritizing the review of the Usability Summary report and coordinating with project leads to continue to move this work forward and follow through on recommendations. Overall, a good foundation was set for sustained work, and the state team had leadership support to further progress and be an agent of change.



# Project Spotlight: Promoting Consistency of Safety Practice Through the Use of a Thorough, Quality Initial Assessment

#### Overview

After approval of their CFSR PIP in March 2020, Colorado identified "ensure safety of child(ren)/youth through a thorough, quality initial assessment, and actively engage families identifying and addressing safety issues throughout the life of a case" as a priority strategy. The state requested from CBCS support to understand how other states are doing on this CFSR outcome; to know what safety and risk tools are being used in safety decision-making; to strengthen existing tools; and to implement changes.

The Center focused on building state and county staff knowledge and skills to promote consistency of safety practice throughout the life of the case. The project team formed a workgroup, whose members supported by the Center TA liaison and subject matter expert, updated the state Family Safety Assessment tool, and achieved the targeted items of the PIP. Federal staff, specifically the central and regional offices' CFSR units, worked hand in hand with the state and Center teams to ensure that the work being done in this project aligned with federal expectations.

The goal of the project was to enhance a safety assessment process/tools while also building the capacity of a diverse group of agency staff and stakeholders to both sustain this work and also have the knowledge, skills, and experience to embrace future initiatives.

**Jurisdiction:** Colorado Department of Human Services, Region 8



**Dates:** October 2020–December 2021

**Topics**: Assessment of Safety and Risk; Child, and Family Services Review/Program Improvement Plan Process

**Domain:** Safety and Child Welfare Infrastructure and Systems

Change Management Steps: Gather data (step 3); identify, research, and select intervention (step 5); adapt intervention or design new one (step 6); assess readiness and plan for implementation (step 7); and collect and use data (step 10)

#### **Project Activities**

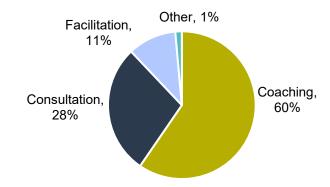
The Center for States engaged the Colorado Department of Human Services (project team) in the following activities:

- The project and Center teams convened a Safety Assessment PIP workgroup, whose members identified a goal and drafted both a charter and a timeline to accomplish activities.
- The project and Center teams examined current Family Safety Assessment tool utilization data with an eye to fidelity and to review the current training curriculum for using the tool in the field.
- The project and Center teams identified issues with the implementation, policy, and practice of the current Family Safety Assessment tool by reviewing utilization data, specifically fidelity, and developing, administering, and analyzing a caseworker survey to understand what works well and what is a barrier to consistent use throughout the life of a case, but particularly with their youth-in-conflict population.
- The project and Center teams reviewed safety assessment tools being used by other states.
- The project and Center teams developed a logic model and theory of change.
- The project and Center teams used the survey and fidelity data to brainstorm solutions such as
  enhanced training, supervisor coaching and field support, and enhancing instructions on the
  definitions and application of the tool in case practice. Feedback was solicited by a wider
  audience.
- The project and Center teams conducted individual focus groups with supervisors as well as with current foster youth and caregivers to understand what is working well in Family Safety Assessment overall, and what needs to be enhanced.
- The project team updated and piloted new safety assessment tool instructions.
- The project and Center teams discussed data and metrics to understand how to know that the
  quality of safety assessments is improving. This effort included piloting and testing CQI feedback
  loops through the PIP counties' supervisors Community of Practice teams.
- The Center coached and consulted on safety assessment development and implementation.
- The Center provided consultation to build capacity of project leads and their leadership team on how to provide implementation support to the county leads.
- A Center subject matter expert met with and coached the state team on PIP implementation
  regarding safety across the Change and Implementation spectrum, from teaming through
  sustainability, with an emphasis on Intervention Selection/Adapting refinements and adjustments
  to the assessment tool.

#### **Center Services**

The Center gave to the Colorado
Department of Human Services 70.5 direct
service hours; most of the work came in the
form of coaching and consultation (see
exhibit 7). The Center targeted phases 1, 3,
4, and 5 of the CM process: identifying
needs; developing or identifying a solution;
plan, prepare, and implement; and evaluate
and apply findings.

#### **Exhibit 7. Service Hours, by Strategy**



**Note:** N = 70.5 direct service hours

#### **Outcomes**

During this project, most direct service hours (78%) were spent working on building the state's knowledge and skills around safety and risk. At the close of this project, the targeted Program Improvement Plan (PIP) items had been achieved, and the state had the internal capacity to continue this work without the Center. The Safety Assessment PIP workgroup planned to meet regularly to gather and review information, discuss and make decisions, and track and adjust workplan activities. Sustainability was further boosted by the development and review of a team charter covering critical implementation needs. The acheivement of these outcomes hinged on the strong comittment from the state; close partnership and successful alignment between the state, Center, and federal teams; and clear and consistent communication across all teams.



#### Overview

In October 2020, Ho-Chunk Nation contacted the Center for Tribes to request assistance in developing a traumainformed, comprehensive, community-based prevention program focused on keeping children safely in their homes<sup>4</sup>. Through the assessment and work planning process, the teams from Ho-Chunk Nation Social Services and Child and Family Services (CFS) and Center for Tribes staff determined that the first step toward creating such a program was to increase workforce knowledge of trauma. The project team determined that it was important to provide support and training to (1) address CFS staff trauma and healing, and (2) increase knowledge of CFS staff and the wider community on Ho-Chunk Nation's experience of historical trauma and resilience. Building knowledge about the effects of trauma, trauma-informed practices, and the importance of self-care was viewed as foundational to future work.



Project implementation began in May 2021 with a

Secondary Stress and Self-Care training delivered virtually to Ho-Chunk Nation CFS staff by a team from the National Native Children's Trauma Center, University of Montana. This instruction was followed by five Self-Care Gatherings facilitated by the Center for Tribes from May through June 2021 for Ho-Chunk CFS staff. A final training, open to child welfare staff, stakeholders, and community partners, on Trauma and Resiliency in Tribal Communities was provided by the National Native Children's Trauma Center in July 2021. Afterward, the Center for Tribes and Ho-Chunk team began discussing future tailored services to develop a trauma-informed family preservation/prevention model. That work began as a new project in February 2022 and is ongoing.<sup>5</sup>

<sup>&</sup>lt;sup>4</sup> This profile was informed by the 2022 Capacity Building Center for Tribes report *Ho-Chunk Nation child and family services and the Capacity Building Center for Tribes collaboration report.* 

<sup>&</sup>lt;sup>5</sup> In October and November 2021, Ho-Chunk Nation CFS leadership and staff participated in the Tribal Child Welfare Leadership Academy and Tribal Child Welfare Practice Path—two targeted services provided by the Center for Tribes. Thus, although there was a gap of 5 months between tailored services projects, during that time Ho-Chunk CFS continued to be engaged in targeted services to develop culturally based, trauma-informed skills to serve children and families.

#### **Project Activities**

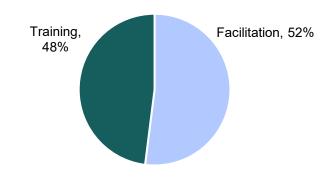
The Center for Tribes engaged Ho-Chunk Nation Social Services and CFS in the following activities:

- The Center provided a 4-hour Secondary Traumatic Stress and Self-Care training virtually to about 30 Ho-Chunk Nation CFS staff.
- The Center facilitated five 1-hour virtual Self-Care Gatherings, which focused on secondary
  traumatic stress and self-care. About 20 CFS staff members participated in each session. A
  series of virtual breakout rooms allowed participants to discuss such topics as resiliency, selfregulation skills, debriefing strategies, and the value of reconnecting. The Center and CFS staff
  met to discuss Ho-Chunk staff taking over the planning and facilitation of the Self-Care
  Gatherings.
- The Center delivered a 3.5-hour Trauma and Resilience in Tribal Communities virtual training session to more than 300 participants from CFS, stakeholders, and community partners. The CFS team marketed the training to the community and incorporated heritage preservation into it, while the Center Team helped with technology and trainers from the National Native Children's Trauma Center.
- The Center convened a final implementation meeting to debrief, discuss the evaluation process for the project, and consider ideas for future tailored services.
- The Center evaluated the project at its conclusion; efforts included document reviews and focus groups with Ho-Chunk team members and Center team members.

#### **Center Services**

The Center provided to Ho-Chunk Nation CFS staff 15.5 direct service hours focused on facilitation and training (see exhibit 8). The work performed in this project reflected phase 4 of the CM process: plan, prepare, and implement.

**Exhibit 8. Service Hours, by Strategy** 



**Note:** N = 15.5 direct service hours

#### **Outcomes**

The project team accomplished its goal of building knowledge of trauma-informed practices in Ho-Chunk Nation Child and Family Services (CFS) and partners. Over 300 community members increased their knowledge of historical trauma and trauma-informed practices by participating in the Trauma and Resiliency in Tribal Communities training. About 25 staff members learned more about secondary-traumatic stress by attending the Secondary Traumatic Stress and Self-Care training. CFS staff also enhanced their self-care skills by participating in five sessions of the Self-Care Gatherings. The Trauma and Resiliency in Tribal Communities training allowed Ho-Chunk Nation CFS to forge relationships with external partners, and opportunities for collaboration between Ho-Chunk Nation CFS and the wider community expanded.



## **Project Spotlight: Build the Tribe's Capacity to Develop and Maintain an Effective Tribal Child** Welfare System That Addresses and Integrates the Tribe's Culture and Values

#### Overview

This project focused on increasing the Kenaitze Indian Tribe's capacity by developing and sustaining a direct Title IV-E program that is grounded in the Tribe's values and culture. The project began with an assessment to learn more about the Tribe's current program and how much work would be necessary to obtain an approved IV-E plan. As a result of this assessment, Kenaitze leadership decided to pursue a direct IV-E program. Staff from the Center for Tribes then worked with the Tribe's staff to build their capacity and decide how the IV-E requirements would be operationalized in light of their values, culture, current programming, and governmental structure as a sovereign nation. The Tribe is committed to this work and drives the work done on this project.

#### **Project Activities**

The Center for Tribes (the Center) engaged the Kenaitze Indian Tribe in the following activities:

- The Center held a Needs and Fit Exploration Tool meeting with the Tribe, its court, and its leaders; afterward, the Center shared and discussed a summary assessment with the Tribe.
- The Tribe created six dedicated workgroups: IV-E overview, legal and judicial, child welfare practice, administration, data and technology, and CQI.
- The Tribe set up an IV-E approval process. The IV-E Committee, which included tribal leaders, community members, and key staff, approved every item that went into the IV-E plan. These items were then sent to the tribal council for approval.
- To build the Tribe's capacity to develop and sustain a direct title IV-E program, the Center held facilitation calls with workgroups and the IV-E Committee, Family and Social Services directors, tribal leadership, and court staff.
- Workgroups identified the necessary written infrastructure for the program and created, among other things, a child welfare manual, a benchbook, checklists, and forms.

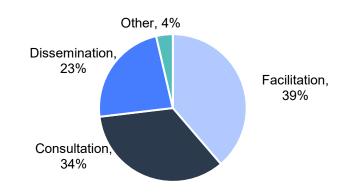


- The Tribe and Center worked together with the technology vendor/system developer to configure all aspects of the database for programmatic and federal reporting data needs. Each workgroup discussed necessary elements to include in the system.
- The Tribe held meetings to review and discuss tribal–state foster care licensing standards and how they could be tailored and adopted for Kenaitze's use.
- The Center held knowledge-building sessions on all subjects as requested by the Tribe's child welfare program.
- The Tribe's Child Welfare Services team revised the onboarding process and created a training plan for child welfare staff.
- The Tribe's team discussed ideas for training tribal court judges and child welfare staff on key
  topics such as visitation, active efforts for both Indian Child Welfare Act (ICWA) and tribal child
  welfare practice efforts, as well as training newer judges about how the Tribe handles child
  welfare cases and IV-E requirements and why it is important that they are met.
- The Tribe began creating a document that will tell the history of the development of this IV-E
  plan, which will be used to train new staff and educate future council members and the
  community.

#### **Center Services**

The Center provided to the Kenaitze Indian Tribe 178.5 direct service hours, and most of the work came in the form of facilitation and consultation (see exhibit 9). The Center targeted step 8, which is part of phase 4 of the CM process: plan, prepare, and implement.

**Exhibit 9. Service Hours, by Strategy** 



**Note:** N = 178.5 direct service hours

#### **Outcomes**

To operate a direct IV-E program the Tribe set up an electronic database; for the database to meet IV-E reporting requirements, the Tribe also had to create a child welfare manual, forms, and checklists, and the Tribe reviewed licensing standards and trainings. The Tribe's IV-E Committee reviewed and approved all work. In August 2022, the direct IV-E plan was approved. Currently, the Center is supporting implementation and working with the Tribe on the Family First Prevention Services Act piece of the IV-E program.

## Conclusions

In 2014 the Children's Bureau launched the Child Welfare Capacity Building Collaborative under which three Centers were tasked with building capacity in their targeted jurisdictions (i.e., states, tribes, and CIPs). The Children's Bureau requested that Centers use a common CM approach to guide their practice and service delivery with jurisdictions. Centers meet jurisdictions wherever they are in a journey, to assess, prepare, install, or evaluate strategies or interventions and practices that can facilitate the movement of the needle on desired outcomes. As the Overview section notes, most of the Centers' work focuses on phases 1 (exploring needs) and 3 (developing and selecting solutions) of the CM approach. Because Centers frequently do not remain engaged throughout the entire CM process and work with Centers on other phases, it is not clear whether jurisdictions continue with the change initiative, completing the installation, implementation, and evaluation of new strategies. The phases of Center's work with jurisdictions are influenced by jurisdictional needs and whether jurisdictions choose to engage in Center services and supports.

Within the two phases where most of the Centers' work is focused, a broad range of topics are addressed by the tailored services that Centers deliver to jurisdictions. A review of projects presented in this brief shows that each Center supported projects across the domains of safety, permanency, well-being, child welfare infrastructure and systems, and national reporting. The most frequent topics addressed by Centers through tailored services projects varied within these domains (see exhibit 1). Overall, most work focuses on improving child welfare infrastructure and systems as well as creating changes to enhance child well-being outcomes. In addition, Centers have implemented several projects that focus on safety and permanency.

Having a clear roadmap for working with jurisdictions gives structure to the types of activities chosen and implemented. This brief profiled six tailored service projects to illustrate how the Centers used a structure to guide their selection and implementation of activities and how they work with jurisdictions in varying stages of CM. The spotlighted projects demonstrate that Center services can support the change work that takes place in jurisdictions, including services that address state PIPs to address CFSR concerns. When jurisdictions remain committed to the process, such ongoing engagement with the Centers can help support the achievement of outcomes. For example, the Pennsylvania CIP project led to increased knowledge of reasonable efforts and better ability to deliver similar trainings; the Colorado Safety Practice project led to reaching a PIP goal; and the Kenaitze Indian Tribe project led to the establishment of a direct IV-E program. These examples demonstrate that outcomes can be achieved when jurisdictions are committed to collaborating with Centers and/or federal teams and to remaining engaged in moving through subsequent phases (i.e., phases 4 and 5) of the CM approach. The spotlight on these projects also illustrates the importance

of alignment among all partners and the role that completion of the CM process plays in the achievement of outcomes.

Broader research in the field of implementation science finds that greater outcome achievement is possible when capacity is strong and implementation supports are in place to ensure strong fidelity to the intervention (Chinman et al., 2013). The six project spotlights here also include a summary of the direct service hours provided by Centers to jurisdictions, which ranged from 15.5 to 178.5 hours. The first evaluation of the Collaborative (James Bell Associates & ICF, 2020; Richards et al., 2021; Melz et al., in press) found that a higher amount of hours of TA is associated with a greater likelihood that a project team will achieve its targeted capacities and implementation milestones.

In the selected projects discussed above, outcomes were achieved in areas such as increased knowledge of secondary-traumatic stress and historical trauma, achievement of PIP items, increased capacity in child welfare practice, new policies and operating procedures, increased community engagement, practice changes in how safety information is discussed and shared, and enhanced knowledge of reasonable-efforts findings. As further findings from the Evaluation of the Capacity Building Collaborative are available, more information may be shared about the outcomes of tailored services—not only with respect to jurisdictions' ability to utilize the CM framework to guide change efforts but also in regard to organizational capacities built across the dimensions of resources, infrastructure, knowledge and skills, culture and climate, and partnership and engagement.

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#### **Authors**

Erin Morehouse, M.P.H., Kathy Kopiec, M.S.W., M.A., Joanna DeWolfe, M.S., James DeSantis, Ph.D., James Bell Associates

Anita Barbee, Ph.D., University of Louisville

#### Prepared by

James Bell Associates 2000 15th Street North, Suite 100 Arlington, VA 22201 (703) 528-3230 www.jbassoc.com

James DeSantis, Ph.D. Project Director

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