

Back on Track

Transforming Virginia's Child Welfare System





Foreword

Despite the best of intentions, deeply committed staff, and significant resources, public child welfare agencies are continually challenged in their efforts to help children and families. For reform-minded administrators across the nation, the question is, how did things go so wrong?

The answer, in part, may lie with the multiple masters these systems must serve: The elected, appointed, and judicial officials that shape them; the taxpayers that fund them; the staff members, providers, and community representatives that influence them; and the clients themselves.

Faced with the daunting task of improving complex public systems, the Annie E. Casey Foundation has found one approach that can unite these often competing interests: A focus on results.

When an agency or a community focuses on results, simple but crucial questions are raised: Are children's needs being met? Are they safe, developing as they should, and living in stable families? Do dollars spent to help children and families elicit benefits? Do families grow stronger having received supports? To answer these questions, systems must seek out and use data to develop strategies to meet these goals.

RECOMMITTING TO REFORM

Not long ago, the Commonwealth of Virginia faced a difficult realization. Despite efforts in the 1990s to reform its child-serving agencies, prospects for the state's foster children—older youth especially—were worsening, not improving.

To change the status quo, a strong collaboration was forged among the governor's office, state and local agencies, and Casey. This group of committed innovators included judicial officials, birth and foster parents, extended families, young people, providers, and community advocates. All stakeholders concentrated on developing a far reaching plan that improved kids' chances. The common thread: A single-minded focus on results.

GATHERING EVIDENCE — AND SPARKING IMPROVEMENT

The story of how—in three years—this effort sparked a transformation that continues today is fascinating and will interest child welfare advocates nationwide. But I hope it also inspires all of us to focus more sharply on results and on gathering evidence of what works to help children and families overcome hardship.

Because stakeholders in Virginia focused on results, their solutions brought clear, measureable improvements for kids. As Virginia's Marcia Winnegan reports on page 7, all of us who care about children do indeed have a way to know we've achieved our vision for transforming child welfare systems: When “all the babies and kids who would have been in foster care are instead with families, thriving and loved.”

Brenda Donald

Vice President, The Annie E. Casey Foundation

Back on Track

TRANSFORMING VIRGINIA'S CHILD WELFARE SYSTEM

In a state with a national reputation for being well run, it was an early and unpleasant eye opener for Virginia Governor Tim Kaine as he took office in 2006: The Commonwealth had the worst record in the country when it came to children aging out of foster care without permanent connections to family or community.

“When we saw the data we realized what we had heard anecdotally about our foster care system was, in fact, a persistent and pervasive problem,” says Kaine. “Virginia was a clear outlier, with fewer discharges from foster care to permanence of any state.”

Not only that, Virginia was spending significant amounts of money on institutional placements for children in care, the type of care widely regarded as the least effective. As Kaine notes, “We had significantly higher percentages of our kids in group and residential placements instead of being with families and in community-based settings.”

In other words, children were suffering from splintered family connections and unnecessary institutional placements while state child welfare spending was rising precipitously. It was a new executive's nightmare: The state was paying a premium for poor performance; it was bad for kids and bad for the budget.

EARLY REFORM

It was not supposed to be that way. In fact, in the early 1990s the Virginia General Assembly passed the Comprehensive Services Act, or CSA (Virginia, n.d.). At a time when many

states had a patchwork arrangement for providing services for vulnerable children and families, CSA provided a mechanism for pooling eight different child-services funding streams. The point was to spur innovation and develop a system of child-centered, cost-effective services. Foster care was one of the funding streams, along with juvenile justice, education, substance abuse, mental health, and others systems.

By 2006, however, it was clear CSA's promise was largely unrealized. Increased competition, not collaboration, was rampant. This especially was challenging given that Virginia, like nearly a dozen other states, provided services through more than 100 locally administered entities with only broad state oversight.

As Kaine took office, there was system-wide dysfunction. Clearly it was time for some serious, results-focused reform.

GETTING REFORM BACK ON TRACK

Child welfare reform became a hallmark of the Kaine Administration, and it happened with remarkable speed. Within three years of taking office, the Administration had turned around a failing system. Among the accomplishments of the reform effort by 2010 (DBHDS, 2010):

- Introduction of a family-centered practice model that focused on permanence and underscored the statewide commitment to including families in child-welfare decision making and permanency planning (see “Bringing a Practice Model to Virginia,” p. 5);
- CSA spending decreased 5.8 percent after years of relentless inflation;

- Community-based care for children increased by nearly 60 percent;
- The state’s foster care case load shrank by more than 20 percent;
- The number of children in congregate care was cut nearly in half; and
- Child permanency rates increased to more than 80 percent.

If these improvements seemed unimaginable in 2006, hard data proved that radical system change was possible, and could occur quickly – even in a system of more than 100 separate administrative jurisdictions.

Working with child welfare consultants from the Annie E. Casey Foundation, state and local officials in Virginia methodically and strategically addressed system shortcomings to move the entire statewide system toward measurably higher performance at a significantly lower cost.

Tracey Feild, director of Casey’s Child Welfare Strategy Group, says the ability to change such a complex, unwieldy system was driven by:

- Strong, consistent leadership that conferred with legislators and involved managers, supervisors, and practitioners in change efforts;
- State and local teamwork and cross-system collaboration;
- An infusion of best practice knowledge through a strong practice model and on-the-ground innovation; and
- An approach to change that focused on addressing fundamental systemic weaknesses.

A CONFLUENCE OF INTERESTS

To be sure, in the early 1990s there were local governments that understood the promise of CSA and used the new law to improve service delivery. The City of Hampton, on the Virginia coast, completely embraced the more proactive, integrated approach to funding and delivering services. Officials used the new law to build a system that was family-centered, child-friendly, and fundamentally focused on outcomes (see “Found Pilots,” p. 14). One clear indicator of the city’s commitment to doing business in a whole new way: In the wake of CSA’s passage, the number of children in congregate care at any given time could be counted on the fingers of one hand, unheard of for a Virginia city that size.

But Hampton was an outlier. This increasingly became clear to the Virginia General Assembly. In 2005, a state joint legislative committee pointed out that while the state system’s costs were increasing, performance was decreasing; another committee investigated how to turn the state’s performance around. “What drove our interest initially was cost,” says state Senator Emmet Hanger, who chaired a commission on children and family services reform. “For example, it turned out there were many out-of-state residential placements. Those came at significant cost.”

Meanwhile, a small but influential group of juvenile court judges had begun to express their frustration with the state’s fragmented and ineffective child welfare system. In January 2006, one of them was offered an interesting and timely opportunity to advance change: Judge Anne Holton, wife of newly elected Governor Tim Kaine, became First Lady of the Commonwealth of Virginia.



A NEW CHAMPION FOR CHANGE

In 1998, Holton had become a full-time judge in Richmond’s Juvenile and Domestic Relations District Court. She quickly began to witness the inadequacies of the state’s child welfare system, particularly for teenagers. “The system was totally reactive,” says Holton. “We would wait until things were really awful at home, and then we’d remove the children, and maybe we’d find another family for them. Things would fall apart there, and we’d put them in a group home. They’d run away, so we’d lock them up in some institutional setting. In many cases these were really smart and interesting kids and the system clearly was failing them.”

At the prompting of the Virginia Supreme Court’s Court Improvement Program, then-Judge Holton began convening cross-agency meetings to figure out a better way to do business, bringing together court officials and representatives from mental health services, Richmond Department of Social Services, and city schools.

But it was as First Lady that Holton got the chance to champion reform at a higher level. “I knew that as First Lady it was traditional to take an issue and shine a spotlight on it,” says Holton. “And given my experiences as a juvenile court judge, I knew I wanted to do something in child welfare.”

In January 2007, Holton launched an initiative called For Keeps, focused on helping teenagers on the cusp of aging out of foster care to find permanent family or community connections. That was an ambitious enough goal, but For Keeps would end up blossoming into something much larger.

STEPPING UP TO TRANSFORMATION

At a national youth permanence conference sponsored by the Annie E. Casey Foundation, Holton was introduced to the Foundation’s management consulting unit. The group – part of what is today called the Child Welfare Strategy Group, or CWSG – offered pro bono, comprehensive assistance to public systems, including intensive, collaborative, hands-on help to assess the system’s strengths and weaknesses. The goal was to chart a plan to change policies, practices, and programs to dramatically improve outcomes for children and families.

The Casey approach had begun to show results in states as disparate as Maine and Louisiana; Holton asked if the consulting unit would work on reform with her and the Kaine Administration.

But Casey had some strings attached. Their engagement criteria required that a system be facing an “opportunity moment” – a child fatality, lawsuit, or court order, or a high-level leadership change that included a new leader eager to improve system performance. The logic: Real, enduring reform often follows in the aftermath of destabilizing changes. While Virginia’s committed new leadership team fit Casey’s criteria, the Foundation had some lingering doubts, says CWSG’s Feild. Among them: It would be the first time Casey consultants worked in a locally administered system with broad state oversight.

For CWSG, a locally administered system was a significant complication and a whole new challenge. It was one thing to work collaboratively with state partners to spark system



Bringing a Practice Model to Virginia

At the outset of Virginia's transformation efforts, Secretary of Health and Human Resources Marilyn Tavenner set a high bar. All child-serving departments had to support the statewide push toward permanence using approaches that were family-focused, child-centered, and community-based. Thus members of the Council on Reform were charged with articulating a practice model – a statewide philosophy for delivering services in each and every department throughout Virginia.

Why a practice model?

Practice models are used widely in mental health and child welfare systems; they describe belief structures that underpin systems. In child welfare, practice models are conceptual maps, reflecting organizational ideology and how agency employees, families, and stakeholders work together (Child Welfare Policy and Practice Group, 2008; National Child Welfare Resource Center for Organizational Improvement, 2007).

A fully developed practice model:

- describes how the agency will work with children and families;
- describes how the agency and its staff will work with service providers and other systems;
- sets standards through clear, written explanations of how services should be provided;
- lists practice activities and describes the rationale behind the case process;
- describes the behavior of front-line staff; and
- makes an explicit link between the agency's policies and practices and its mission, vision, and core values.

"A practice model really defines how you do business every day; it defines core values that inform how you interact with children and families," says Cheryl Williams, foster care program manager for the Richmond Department of Social Services. "It also gives you a common and accepted set of principles and goals as you work with providers and other outside partners."

Focus on Children, Family, and Permanence

In Virginia, developing a practice model was a first step in ensuring that the state and its localities followed the same script. It wasn't easy to get such geographically dispersed agencies to agree to common principles, but over time, a practice model emerged. The model:

- described the state's belief that all children and youth deserve a safe environment, do best when raised in families, and need and deserve a permanent family;
- stated clearly that families must be included in planning and decision making for their children;
- explained the state's family, child, and youth-driven approach and the fact that local agencies don't work alone, but in concert with families, providers, the courts, and other systems; and
- made clear that *how* work is done is as important as the work itself.

Once there was agreement on a practice model, the model became the yardstick against which all practices, policies, and regulations were measured. The practice model, says Virginia Director of Family Services Paul McWhinney, represented "one of the first times we said clearly that, as a state, we expect families will be involved in planning and decision making" for their children.

Currently, local agencies throughout the state are experiencing the ripple effect from this change. Not only have local agencies installed family meeting practices, but they are revamping many other aspects of their work to ensure that families' voices are heard. Quality assessment approaches, casework practices, budgets – every aspect of the work is being reviewed to ensure it supports the practice model.

"It's sometimes easy to lose sight of the goal of transformation when you're in the middle of working through issues of policy, finance, or turf," says Karen Angelici, CWSG's Virginia team leader. "The practice model is what grounds agencies and keeps them focused on why they do this work. It keeps a focus on the fact that, at the end of the day, the customers aren't public officials or providers or advocates, but the children and families that the system is meant to serve."

McWhinney agrees, noting that developing a practice model can be the heart of successful transformation. "Especially given the struggles involved in managing change in a state-supervised, locally-administered system," he adds, a practice model "says it out loud: Change is about improving outcomes for kids and families, not just saving money or responding to crises." If defining a practice model is one of the first steps in a transformation process, he notes, following through to make sure its values and principles are reflected in everything an agency does can be even more challenging – and effective.

transformation, as Casey had done elsewhere. But it was quite another to consider collaborating with 100 separate, independent local organizations whose relationships with the state were strained.

TWO-TRACK TRANSFORMATION

Despite the challenges, Holton and Casey agreed full-scale reform was worth pursuing. The collaborators – Casey, Holton, and senior officials in the Kaine Administration – decided on a two-track transformation plan. One track focused on the state level, reviewing how state policies and practices affected local systems, including state agencies and court representatives.

The second track involved going local, identifying a core group of cities and counties to test drive some of the strategies and tactics that Casey had found to be successful elsewhere.

The hope was that a combination of revamped state policies, along with the activism of an organized group of bellwether local governments, would lead to broad, sustained change statewide.

“The two-track approach was essential, as was bringing together localities as transformation leaders,” says Karen Angelici, who led Casey’s Virginia team. “There were obvious budget, policy, and administration changes we could help shape and support at the state level, but without local communities being partners in change, reform wasn’t going to go anywhere.”

At the state-policy level, one problem quickly became obvious: The CSA formula that provided state matching funds for local foster care placements didn’t distinguish between residential and family-based placements, even though the state considered

its system to be family focused. “Casey pointed out that our budget policies were absolutely not aligned with our policy priorities,” says Holton.

A second problem: Virginia’s foster family reimbursement rates were well below the national average. Casey suggested investing more money in foster family recruitment and development, including supports for kinship families, as part of a comprehensive budget package designed to support the statewide reform effort.

Convincing the Virginia General Assembly that wholesale budget changes were needed to improve system results turned out to be easier than expected. Because of a 2005 investigation of poor outcomes and high costs – and through Senator Hanger’s joint committee – the Virginia General Assembly clearly understood CSA’s widespread failure to deliver on its original promise of quality services at a reasonable cost. “I think what characterized the whole transformation effort was that we were all working together, the committee, the Kaine Administration, and Casey,” says Senator Hanger. “Nobody was big on trying to get credit for reform, but certainly the policy suggestions made by Casey were very helpful, as opposed to the legislature operating in a vacuum.”

Three provisions in particular were key to the budget proposal hammered out by the state Department of Social Services (DSS) and the Virginia General Assembly:

- An increase in foster family reimbursements. A phased-in approach led to a 21 percent payment hike.
- An additional \$2 million to recruit, train, and support foster, kin, and adoptive parents who



Reinventing Richmond: The Power of Collaboration and Leadership

Ask family preservation staffer Marcia Winnegan how she measures her on-the-job success and she doesn't miss a beat: When "all the babies and kids who would have been in foster care are instead with families, thriving and loved."

That was not the yardstick used when Winnegan arrived in Richmond, Virginia, five years ago to work for the city's Department of Social Services (DSS). Richmond DSS had a reputation for being insular and reactive. To be sure, they were focused on improvement. Collaborative efforts between DSS and the courts from 2000-2005 had helped reduce the city's foster care population and improve court-agency communications. But it was time for a sustained, comprehensive push for change. Winnegan and colleagues embarked on an ambitious experiment to reinvent their entire local social services system. They improved the experiences of vulnerable children and families, partnered with a broad variety of community organizations, and emphasized family engagement, community-based services, and permanence.

The city-wide effort showed dramatic results, including:

- A reduction in the number of children in foster care;
- A reduction in the percentage of children in foster care placed in congregate care; and
- An increase in permanency rates for all children.

In fact, Richmond's reform efforts became a model for achieving improved performance in tough environments. The city became the lead pilot for Virginia's statewide initiative to transform child welfare, a cooperative endeavor led by Virginia First Lady Anne Holton in partnership with the Annie E. Casey Foundation.

The transformation that started in Richmond grew to include 12 other localities – together known as the Council on Reform or CORE – that would band together to improve significantly statewide outcomes for children and families.

In the early days of reform, Richmond was the best candidate to lead the transformation drive for many reasons, says Elisha Gilliam, who managed Casey's work in the city. "We looked at the data and saw that Richmond had the highest number of kids in care and in group care. We figured, if we could tip the congregate care numbers in Richmond, we could have real

impact in a relatively short period of time. Plus, there was the sense that if you could succeed in Richmond, you could succeed anywhere."

Being one of the state's most challenging jurisdictions, however, was not the main reason Casey looked to Richmond to lead statewide reform, Gilliam says. "While their local system was clearly in turmoil, they had new leadership with the will and vision to do something to try and turn the system around."

One of the new leaders in Richmond was Paul McWhinney, who arrived as executive director of the city's DSS in January 2006 (and in 2008 became director of family services for the state). "When I arrived in Richmond, I was determined to modernize our practices," says McWhinney. "It was obvious the solutions the city used in the 1980s and 1990s were no longer working. We needed to revolutionize how we did business. And then I heard about Casey. We met with them and were playing on the same sheet of music."

"Casey asked if they could make Richmond a pilot for reform," McWhinney adds. "Together, we started implementing all the things we'd only been talking about in Richmond: family engagement, kinship care, in-depth case review of our kids in congregate care, and more wrap-around, community-based services, with an overall emphasis on permanence."

Also involved in the Richmond transformation was Family Court Judge Ashley Tunner. Tunner had taken First Lady Anne Holton's seat on the bench when she moved to the Governor's mansion with her husband; Tunner also was the designer of an initiative called Bring Our Children Home, which aimed to reduce the number of children being sent out of state for out-of-home care.

Tunner remembers that early on, players such as McWhinney and his deputy Anne Kisor quickly involved an influential group that included educators, juvenile justice and probation officials, and community leaders from around the city. "We had some idea of what needed to be done," says Tunner. "However, Casey gave us guidance, structure, direction, and affirmation, along with a sense that similar reform efforts had worked elsewhere. We were supported by Casey on every level, but what was equally empowering was Casey's confidence in the local players. They offered ideas, but they never told us what to do."

continued on page 9

care for children in the system.

- A change in local match rates, including a 50 percent reduction in the funding match rate localities were required to meet for community-based services and a 25 percent increase in localities' share of non-Medicaid residential services.

Reducing the match rate targeted what many saw as one of CSA's biggest problems: Up until now, funding hadn't been used to encourage good practice or discourage poor practice.

Some institutional providers fought the formula changes and others joined in efforts to transform the system. In the end, proponents of transformation won the budget battle.

GOING LOCAL

As Holton, the Administration, and the Casey team worked on these high-level finance issues, they were strategizing with the reform team to meet their other key goal: getting local governments engaged in reform. The solution: Bringing together 13 localities as a Council on Reform (CORE) to serve as change leaders and innovators.

"One of the most important Casey contributions was the Council on Reform," says Holton, who in 2010 joined the Foundation as a consultant. "You want to get your local partners involved in transformation, but you can't do that with more than 100 localities. So we found the 13 that represented half the caseloads in the state. We included urban, suburban, and rural areas." Additionally, CORE reached out to representatives from relevant statewide advocacy organizations, provider associations, and the like. "It was just a brilliant strategy," says Holton.

Brilliant, perhaps, but even 13 can be an unwieldy number. There was no guarantee that any of the 13 localities initially invited to join the council actually would.

It was a promising first step when representatives of all 13 invited localities showed up to the first CORE meeting. The meeting itself, on the other hand, wasn't so promising.

What quickly surfaced, says Mary Nedell, who was later tapped as the lead liaison from Virginia DSS to CORE, was long-standing distrust and tension between state and local officials. In no small part, the tension grew from local leaders' belief that the state wasn't providing promised technical assistance and training to local governments or improving its policies to ease service delivery in the field.

"People yelled," says Nedell. "People got up and left. One local social services department director stood up and said, 'We've tried this before in Virginia, so if you all are not serious about it, if you're not seriously committed to changing outcomes for children and families, then please don't waste our time.'"

"There was a lot of distrust at the beginning," says Ray Ratke, the Kaine Administration's designated leader for the transformation efforts. "We spent a lot of time strategizing how to draw in local officials."

Eventually, even hardened skeptics came around to transformation. A senior CORE member had been one of the earliest and toughest critics of reform. But very soon after the CORE effort began, he understood the promise of change. He encouraged his local government colleagues to join in reform efforts, saying, "We are enthusiastic about this work,



Reinventing Richmond *(cont'd)*

Even with McWhinney and Tunner as champions, it wasn't easy to involve the city's Social Service Department in reform. From front-line staff to top supervisors, there was skepticism that an outside consultant could sweep in and tell long-time professionals there might be a more effective way to do business. "There was some resistance," says Brinette Jones, now an interim deputy director at Richmond DSS. "If you'd been here long enough, you'd lived through different administrations with different visions and plans. There were people saying, 'Who are these people to tell us how to do things, because none of that's going to work with our families.' Or, 'I've been doing this forever and I've never been able to get the families to the table.'"

Breaking down that resistance, says Gilliam, required lots of time in the DSS office just listening. "We gave staff lots of space in which to express their concerns and fears."

Tougher than overcoming internal skepticism, says Jones, was overcoming the agency's operating culture, which she freely admits to having shared, along with McWhinney, when they arrived in the city. "We had a reputation in the community as being authoritarian; our job was to take people's kids. Family engagement wasn't part of our approach. We were the experts. I didn't listen to mom, I X'd her out; she had lost her right to speak."

"We had to change our mindset," says Jones.

Indeed, that attitude has changed markedly, says Maiszie Meade, who encountered Richmond DSS a decade ago as a foster parent. "It used to be a tug of war getting things out of the DSS office," says Meade. No longer, she notes. Another significant change: DSS "used to counsel you as a foster parent not to get attached to a child, to keep your distance," says Meade. "Now we're being taught to develop relationships with children."

Richmond's change was significant. But the speed of transformation was equally remarkable, in no small part because of an influential group of DSS staffers frustrated with the status quo and ready to make a change.

"A lot of us were open minded and wanted to do better by our families," says Cheryl Williams, Richmond DSS foster care

program manager. "And some of us already were looking at best practices, such as meeting with families and discussing options with them before taking any sort of action involving their kids. But it was Casey who really helped us accelerate innovation; they put a structure in place that allowed us to move the initiatives systematically throughout the organization."

Eventually, DSS leaders and Casey were able to win over the department's front-line staff. "I remember the first meeting we had," says Gilliam. "It was voluntary and 15 people showed up. By the end of the process, we were getting 60 and 70 DSS staff members at every meeting."

What led to this uptick in involvement? Gilliam points to:

- Broadly inclusive workgroups that brought together staff, private providers, court representatives, foster parents, and others to consider key policy changes;
- Intensive training; and
- Outside experts who could speak to the transformative nature of a family-centered and proactive practice model.

Among the more powerful tools introduced by Casey, says DSS staff, was team decision making (TDM), a process in which a team of people – essentially every important person in a child's life – meets to discuss a child's case and all the options for treatment or placement in advance of court hearings. "These meetings help everyone get behind one goal: a safe, nurturing healthy life for that child," says Meade.

"TDM has been one of the highlights of transformation," agrees Winnegan. "You get everyone in the room: the child, the parent, teachers, boyfriends and girlfriends, coaches, relatives, court appointed advocates, whoever is involved in this child's life. You sit down informally and you come up with a collaboratively produced plan. So when you end up in court, it's easy. The man or the woman in the robe asks, 'Okay, what's the plan?'" A plan is produced, and it reflects the perspectives of all stakeholders.

Prior to TDM, says Winnegan: "It was a roll of the dice. You'd get the mom in there. She'd say things; we'd say she's not complying. The next thing you know, the judge is removing the child from the home and we're scrambling to find a placement. Now ... everybody is on board. It's just an amazing process."

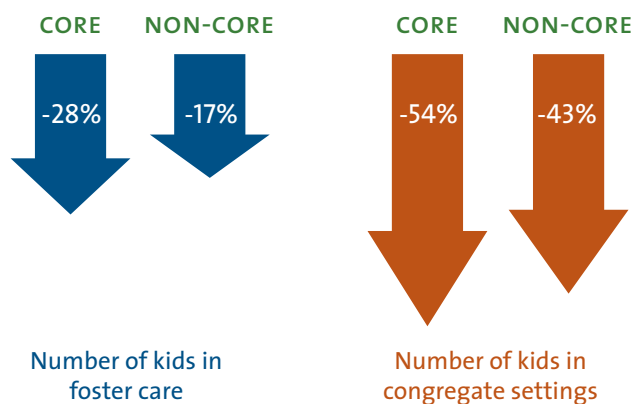
continued on page 11

even though we didn't start out that way. It's critical that we're all in this together, and I urge you to be part of this, that so together, we can reach key outcomes as effectively as possible."

In the end, there were three keys to convincing local officials that the state was serious this time, says Holton:

- Going local: Dozens of meetings were held in the field, many including Holton, to illustrate high-level, consistent commitment;
- Keeping promises: Reform proponents made sure to follow through on state commitments to provide information and technical assistance; and
- Encouraging broad involvement: Reform efforts involved local officials in designing change efforts, as promised.

Bigger Effects in CORE Localities 2007 - 2010



Slowly but steadily, local officials began to believe change could happen. "I guess my initial response was that this had possibilities," says Jane Conlin, head of social services in Roanoke,

a CORE participant. "I wasn't throwing confetti right away because we'd all seen these kinds of things come and go. But the more I got into it, the more impressed I was by the commitment of the state and the knowledge Casey was bringing to the effort."

The 13 localities – urban, suburban, and rural – that led Virginia's system change effort saw more robust changes than other, non-CORE localities from December 2007 to May 2010.

The degree to which CORE's child and family outcomes improved and led to increased performance statewide "was gratifying," says Casey's Feild. "It underscored the wisdom of involving the state and its stakeholders in a productive, change-oriented process."

FIVE "BUILDING BLOCKS"

The state's commitment to improving the experiences of children and families was clear from the start. It was emphasized again as the scope of CORE's strategy emerged.

The system transformation effort included introducing a new practice model and focusing on five "building blocks" (Virginia DSS, 2010):

- Managing by data;
- Engaging families;
- Investing in resource family recruitment, development, and support;
- Creating a continuum of community-based services to support children and families; and
- Developing a statewide training system.

"We partnered with Virginia to help create and support CORE and its workgroups and to look at all components



Reinventing Richmond (cont'd)

Judge Tunner agrees the new approach is making life smoother and less fragmented for kids and families. "It's very helpful to know people aren't talking about major life issues for the first time when they come before me," says Tunner. "The key players already have met. They're better prepared and there's more consensus."

Tunner adds, "I've also noticed a much higher comfort level between social workers, parents, and foster parents" during court sessions. "They may not always agree, but there is an increased level of satisfaction and comfort based on the pre-meetings."

More amazing and gratifying, say front-line workers and supervisors, is how dramatically Richmond DSS's reputation in the community has improved since implementing TDM. "Our families didn't believe us at first," says Jones. "They thought it was a set up. But pretty soon they were saying, 'Why didn't you do this before?'"

Another result of the agency's focus on family was a drastic reduction in the use of institutional placements for children. The message was clear: The preference had shifted from congregate care to family-based settings.

"Some group-home providers pushed back" on DSS efforts to downsize the use of congregate care, says Jones. "But now our response is to ask, 'Do you not think children belong at home or in a family setting?'"

Jones also notes the impact of involving a number of providers in the transformation effort from the start. "We had some wonderful providers who were part of the workgroups Casey

helped put together. They've changed their programs to offer more community-based and in-home services."

Looking back on Richmond's reform efforts, says Jones, she realizes just how far the department has come. "It was overwhelming at first, but Casey helped us put the roadmap together – a step-by-step process – with workgroups looking at every aspect of the child welfare continuum."

In the summer of 2008, says Bragail Brown, a TDM meeting coordinator in Richmond, she realized the department was turning the corner. "I started hearing how satisfied everyone was – families and staff – and how much better they thought this new approach was working."

One of the more gratifying results of reform, says Brown, is the constant push to connect children and youth with family. This focus now extends to everything the department does. "For example, we recently had two young men, ages 15 and 17, both getting close to aging out of the system with no home or relatives to turn to for help," she says. "We knew they had a grandmother, and we knew she'd previously been asked to take them and said no. But we went back and asked the question differently. We asked, what would you need from DSS to care for them?"

The result? "We were able to provide those services and those two kids went home."

of transformation,” says Casey’s Angelici. At CORE’s request, “We brought in national experts to assist with planning, strategic thinking, training, and to share what had worked in other states.”

Each building block had its own workgroup. The workgroups’ efforts required intensive involvement for participants from Virginia and Casey, says Sarah Morris-Compton, a Casey team member. Each workgroup met almost monthly, assessing Virginia’s performance on any number of indicators, then gathering and analyzing data to shape new policies and approaches to their building block topic.

An immediate payoff of the workgroups, says Nedell, was that local and state officials actually sat down and hammered out difficult issues; that hadn’t happened before. “All decisions were made together,” she says. “I think that went a long way toward building the kind of trust that was absolutely critical to transformation.”

Of the five building blocks, creating capacity for gathering and analyzing data was key. Virginia had virtually no useful system for assessing its performance with children and families in a timely, detailed fashion. Building a system to track progress became an early CORE priority.

The data push ultimately led to a child welfare performance measurement system called “Safe Measures,” which extracts data from the state’s old information system and displays it in an easy-to-analyze form for state and local administrators. Safe Measures provided nearly real-time data on statewide performance and progress down to the case-worker level. It offered all 100-plus local jurisdictions information on congregate care

placements, permanency rates, and other key indicators. Not only could localities gauge their own performance, but they also could compare themselves to each other.

The first two years of funding for Safe Measures came from Casey Family Programs, a national child welfare organization that shares the Jim Casey legacy with the Casey Foundation. “That support to improve the state’s capacity and expertise in collecting and analyzing data was a huge part of what made transformation successful,” says Angelici. “Virginia went from having no useful statewide system to one that was delivering excellent data to all localities” across the state.

LEVERAGING DATA

To focus state and local officials tightly on performance, the transformation effort centered on six key indicators – data points that easily could be tracked and were clear signs the system was turning in the right direction. Those indicators included:

- total number of children in foster care;
- number of children in family-based care, including in the care of a relative;
- number of children in congregate care;
- length of stay in foster care;
- discharges to permanence (connecting children to family rather than allowing them to age out of the system without connections); and
- number of children who returned to the system because of repeat maltreatment.

The measures, which were chosen cooperatively with CORE localities, were initially controversial. Some localities did a fairly good job of collecting data; some didn’t. Some believed the data truly reflected local performance; others didn’t.

Sometimes it took some fairly blunt conversations to iron things out. “Data was a huge focus of early conversations,” says Nedell. “At first we had localities saying, ‘We don’t believe the data.’ And we’d say, ‘Okay, so what do we need to do to get you to believe the data, because the data that we’re pulling out is what you’ve been putting in.’ ”

TRANSFORMATION LEADS TO RESULTS

Tools, tactics, and good data were critical to building results, as was the introduction of a family-focused practice model. But seeing is believing. Knowing this, Casey organized trips for CORE members to Maine and Utah, where systems had been redesigned successfully. “Those visits had a huge impact,” says Virginia Director of Family Services Paul McWhinney. “Exposure to people who actually were practicing these techniques on the ground, and seeing the strategies really move the needle on quality of services,” was key.

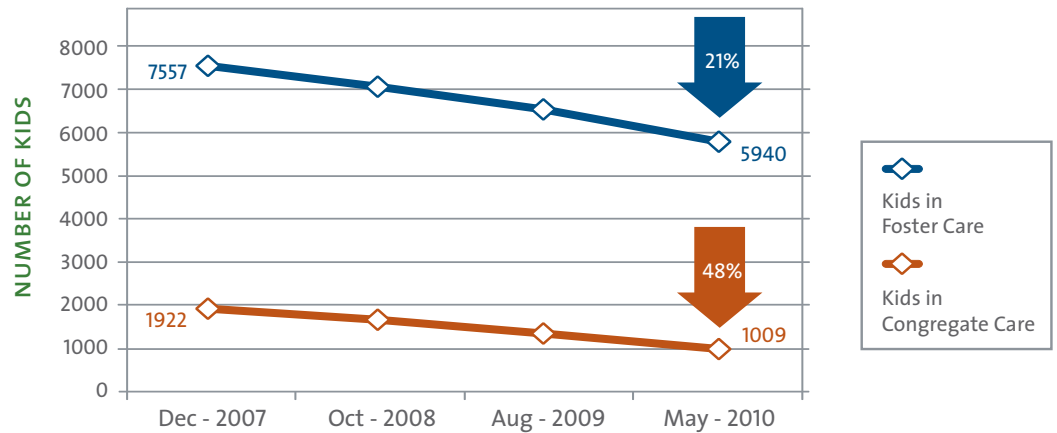
Among the more impressive results to come out of Virginia’s transformation process, notes Senator Hanger, were budget savings, mostly from reduced reliance on congregate care.

“We saved \$100 million in the first two years alone – nobody expected that.” Some of the specific budget implications of system redesign on CSA spending from 2008 to 2009:

- Total expenditures of local, state, and federal government dollars were down 5.8 percent.
- State spending on community-based services was up 26.1 percent while state spending on congregate care was down 21.5 percent.
- The local share of CSA spending was down nearly 12 percent.

What happened to the dollars saved? Given the difficult fiscal environment, some monies were banked by the state. But a

Key Improvements for Virginia DSS (2007-2010)



Source: Source: Virginia DSS



“Found” Pilots

The Hampton, Virginia, Department of Juvenile Justice (DJJ) knew it had a problem on its hands – a problem of its own making. The number of kids entering its system for low-level infractions such as fights was increasing. Young people were being locked up for questionable reasons, costs soared, and the influx put pressure on both the juvenile justice and child welfare systems.

It was a familiar scenario. “Kids would get in a fight with their family,” says Scott Reiner, program development manager with the state’s Department of Juvenile Justice. “They’d get out of control, punch a hole in the wall, push mom or dad, and police would get called.”

Generally, fights don’t warrant locking up an adult. But, says Reiner, “Parents would tell police, ‘I want that kid out of here.’” The police didn’t think the child should be locked up, “but the parents would say, ‘We’re afraid and we’re not taking him back.’”

A predictable, expensive, and potentially harmful chain of legal and administrative events would ensue: The child would be brought to juvenile detention, probation staff would contact child welfare staff, and yet another child would enter the city’s foster care system.

There had to be a better way. So Hampton law enforcement officials approached the Hampton Department of Social Services (DSS) to see if they would cooperate on a more sensible approach.

What they worked out was simple and effective: The city funded a family stabilization position within DSS. Now, when

the Hampton Police Department gets a call about a domestic dispute involving a juvenile, the call is diverted to Hampton DSS and handled by the family stabilization worker. The worker tries to defuse the conflict, then finds a relative or friend who can take the child for a day or two until things calm down. The family stabilization worker also sets up an immediate appointment to begin working on an intervention, whether counseling for the family or anger-management training for the child, to keep the family intact.

The reason for DSS’s willingness to collaborate with DJJ was simple, says Reiner: they understood that not collaborating harmed children and families – and added to the department’s caseload.

To Casey consultants, jurisdictions that develop such effective, innovative practices are “found pilots” – places with results that can be documented and disseminated by the Foundation as part of their work with other state and local systems. “We don’t know everything, and we don’t have all the answers,” says Tracey Feild, director of Casey’s Child Welfare Strategy Group. “So in any Casey engagement, we always look for proven practices that could benefit other jurisdictions.”

In fact, says Feild, Hampton was home to so many good ideas and effective practices that Casey developed and disseminated a micro-case study on Hampton for other Virginia localities. “Hampton was not only illustrative of what a high-functioning children and family services system looks like,” says Feild, “but it also is proof that transformation is certainly an achievable goal for other Virginia localities.”



significant amount was reinvested in building community-based services, fueling quality improvements.

While budget savings were important, the real goal of transformation, says Senator Hanger, was improved outcomes for Virginia's children and families. "We needed to stay engaged and work on the right mix of services so we could continue to effect good outcomes," he says. Adds McWhinney, "Moving forward as a state with the expectation that families will be engaged in planning and decision making from the 'get go' is huge, especially in a state-supervised, locally administered system."

LOOKING FORWARD

The budget savings and significant performance improvements were eye catching. The results spurred interest from the new gubernatorial administration, which took over from Kaine in January 2010.

The month before he took office, a letter from Governor-elect Bob McDonnell was shared with a conference of transformation proponents. McDonnell stated that "building on the positive work that already has been accomplished and continuing and expanding the transformation of Children's Services will be a priority for my administration."

McDonnell added, "We will work across the child-serving systems to ensure that all at-risk children and families receive the services they need to stay together, stay in or return to their home communities, have life-long connections to caring adults, and, ultimately, live successful and productive lives." In conversations with Casey representatives and others since becoming Virginia's new secretary of Health and Human Resources, Bill Hazel has also endorsed system transformation efforts.

A Foster Parent's View

Prior to transformation, the Richmond Department of Social Services (DSS) had a reputation as being distant, difficult, and bureaucratic. The change in the last three years has been remarkable, say foster and adoptive mother Mary Gresham.

Gresham particularly appreciates the department's newly instituted team decision-making approach, or TDM. "It's an excellent program, because everyone with an interest in the child has the opportunity to come together to talk about what's in the best interest of the child; it allows us to resolve issues together," says Gresham, who now works with prospective foster parents.

That sense of partnership made it easy for Gresham to adopt a 5-year-old girl, confident she will receive any support she needs along the way. Since the adoption, she has seen continued improvement in DSS's engagement with families. "When I was adopting my daughter, foster care case workers didn't really talk with the adoption workers. Now everyone works together; they're all on the same page. They've come a really long way and the training and the support they now offer to adoptive and foster parents is phenomenal."

The real bonus, says Gresham, who has been a foster mom to more than 15 children: "I now have friends who are interested in becoming foster parents."

CONCLUSION

“Working collaboratively on system redesign is rewarding,” says Casey’s Feild. “You apply private-sector management consulting with best thinking from the public sector and, in Casey’s case, back it up with the resources of the nation’s largest Foundation solely focused on the needs of vulnerable children and families. You work together with the client intensively to customize and to innovate. As Virginia’s transformation shows, the results can be amazing for kids and families.”

In fact, Feild notes, collaboration – from the beginning of the process to the end – may be the most important component of systems change work. She adds, “During our collaboration, the Commonwealth of Virginia brought tremendous problem-solving skills to the process; they are now in the process of successfully embedding system and practice changes.”

Adds Elisha Gilliam, who managed CWSG’s work in Richmond, “So many of the solutions that spurred increased performance sprang, ultimately, from Virginia’s knowledge of their own strengths and weaknesses and their work with families and children. The success they are now experiencing is theirs – and well deserved. I’m looking forward to seeing what improvements they come up with next.”

REFERENCES

Child Welfare Policy and Practice Group. (2008). *Adopting A Child Welfare Practice Framework*.

National Child Welfare Resource Center for Organizational Improvement: A Service of the Children’s Bureau (U.S.D.H.S.S.). (December 2007). P. 4-6. *Understanding and Developing Child Welfare Practice Models*. Workshop presented at 2007 Children’s Bureau Conference for Agencies and Courts, Arlington, VA.

Virginia, Commonwealth of. (n.d.) *About CSA*. Retrieved August 6, 2010, from http://www.csa.state.va.us/html/about_csa/about.cfm

Virginia Department of Behavioral Health and Developmental Services. (2010). *Virginia children’s services system transformation*. PowerPoint presentation retrieved July 27, 2010, from <http://vcoy.virginia.gov/10meetingmaterials.htm>

Virginia Department of Social Services. (2010). *Building blocks* (part of the Children’s Services System Transformation website). Retrieved August 6, 2010, from http://www.vafamilyconnections.org/building_blocks.shtml

ABOUT THE AUTHOR

Author Jonathan Walters is a staff correspondent for *Governing Magazine* and writes a monthly online newsletter covering human and health services.



The Annie E. Casey Foundation is a private charitable organization dedicated to helping build better futures for disadvantaged children in the United States. It was established in 1948 by Jim Casey, one of the founders of UPS, and his siblings, who named the Foundation in honor of their mother. The primary mission of the Foundation is to foster public policies, human-service reforms, and community supports that more effectively meet the needs of today's vulnerable children and families.

The Foundation provides strategic consulting to public child welfare systems through the Child Welfare Strategy Group, a unit within Casey's Center for Effective Family Services and Systems.

For more information, visit the Foundation's website at www.aecf.org.

©2010, The Annie E. Casey Foundation, Baltimore, Maryland

The Annie E. Casey Foundation

701 St. Paul Street
Baltimore, MD 21202

410.547.6600

410.547.6624 fax