

Southern Regional Quality Improvement Center for Child Protection Research Guidelines and Plan

OVERVIEW

The recent literature on the measurement of outcomes in child welfare includes information that is clearly relevant to applicants. Waldfogel (2000) examined the adequacy of child welfare data. In terms of cross-sectional datasets, she noted that despite improvement three problems remain: report of child abuse and neglect are not counted consistently, not all states track all children reported or their dispositions, and few states collect data on active cases that are not under investigation or in placement. In terms of longitudinal datasets, the lack of data on children at risk of maltreatment or of placement is a significant gap. Finally, the author concludes that “the data that are currently available are best-suited for measuring outcomes related to permanency, are less well-suited for assessing safety, and are least adequate for measuring child and family well-being.” In the same issue of *Children and Youth Services Review*, Barth and Jonson-Reid (2000) caution that we must look at long term outcomes for children post-case closure so that we have better evidence of which indicators of child welfare service performance to emphasize.

Poertner, McDonald and Murray (2000) conducted a comprehensive review of published and unpublished research reporting on outcomes of public child welfare, building on a similar study a decade earlier, to determine how systems have progressed in defining and measuring child welfare outcomes. The results can be grouped into three categories, and the article includes detailed tables summarizing the level of success and source of each study:

- Safety – The authors found little change in this category since the 1989 study. Three measures were used: child abuse and neglect recidivism after case closure; abuse and

neglect while an active protective service case exists; and child abuse and neglect recidivism while in substitute care.

- Permanency – Basic outcomes have not changed in a decade but there is debate regarding the selection of time frame for measurement. The indicators used were: reunification with birth families or original caretakers; percent of children returned home after entry to foster care; transfer of guardianship; adoption; adoptive disruptions; and reentry into substitute care.
- Well-being – Despite noting that safety and permanency were not sufficient outcomes, Poertner et. al. found few well-being indicators currently in use in public child welfare. Those currently used are: medical and dental examinations; immunizations; children in substitute care who always feel loved by their caretakers; and children in substitute care who feel safe. They also list independent living outcomes: education (school performance and educational progress); employment and world- of-work experience; public aid use and cost to the community; pregnancy/parenting (whether the person has a child); and family relative contact (2000).

Poertner et. al. also point out several implications for using outcomes in this field. First, they state that outcome reports must be available at the team level, while most of the reports they studied are of macro level data and are not disseminated at the field level. They emphasize engaging workers and clients in outcome measurement and system improvement which they believe requires a change in the organizational culture in most systems. Finally, they point out that the issue of uniformity of agency practice and reporting is complicated in this field (2000).

Keeping these salient studies in mind, the SR QIC has developed a research plan that is rigorous and designed to yield findings which should enable us to reasonably test our hypotheses

without providing extraordinary burden to field staff or the agency. In order to minimize the research-related load on applicants, the SR QIC stands ready to provide technical assistance regarding the project-specific research designs during application development and post-funding. We hope to bring funded sites to consensus regarding instruments used and research procedures so that a true comparative analysis can be conducted. This tentative design has been created with the understanding that innovative ideas submitted by projects may lead to its revision, so that the best plan and instrumentation will ultimately be implemented. The tentative plan may be described as Quasi-experimental Non-equivalent Constructed Comparison Group Design with pre-, intermediate and post-intervention measurement (see SR QIC Research Design). Agencies will administer instruments prior to initiation of intervention and at least annually to allow for identification of trends over the three-year implementation phase.

The design will include the use of procedures and instrumentation across all funded projects to allow for comparative analysis. Important aspects of the quasi-experimental design include a requirement for comparison groups, and measurement of data on three levels: 1) supervisor emphasis, 2) worker and/or supervisor perception of worker practice and performance, and 3) third party case review of practice and client outcomes. Applicants should designate in their research methodology how some of these data can be best collected in their states. Potential instruments have been identified are described below, but leeway is built into the design should more appropriate instruments be identified by a successful applicant. Each project must propose a fairly rigorous project-specific evaluation utilizing a logic model (see attached example).

The SR QIC will provide technical assistance regarding methodology used. In order to control for the impact of independent variables other than supervision, the formative portion of

the research design includes measurement of items with the potential to skew outcome data, such as significant staffing, caseload, and policy changes. Data collected by funded states on client outcomes related to safety, permanency, and well-being will be tracked, however, it is recognized that the ability to attribute changes in indicators such as child maltreatment recidivism and out-of-home care rates is problematic when the intervention is at the supervisory level. Applicants will be asked to identify the most salient outcome data they are currently collecting that could be used for this purpose. Consensus on data to be tracked will be reached with all funded applicants.

RESEARCH HYPOTHESES

Applicants should propose projects which seek to address the following hypotheses:

1. Structured casework supervision approaches will positively affect child protection *worker practice in assessment and intervention with families*.
2. Structured casework supervision approaches will positively affect *preventable worker turnover*.
3. Structured casework supervision approaches will positively affect *client outcomes*.

Research questions for comparative analysis to be conducted by the SR QIC

1. What models of structured casework supervision in child protection have the greatest impact on *worker practice*?
2. What models of structured casework supervision in child protection have the greatest impact on *preventable worker turnover*?
3. What models of structured casework supervision in child protection have the greatest impact on *client outcomes*?

For the purposes of these research projects, structured casework supervision will be defined as:

A well-defined series of activities purposefully conducted in the supervision of CPS workers designed to enhance workers' ability to think critically and make good decisions regarding the assessment of their cases and application of information gained in their intervention, and to promote empirically-based practice.

Preventable worker turnover will be defined in the manner developed for the Child Welfare Workforce Study (APHS, 2001) to allow for exclusion of turnover due to factors unrelated to the project such as worker pregnancy or relocation.

Client outcomes to be measured will be identified based on data already being collected for the Child and Family Service Reviews.

GROUPS AND SAMPLING

Given the required partnership which includes public child welfare agencies, we believe it is feasible to require the use of comparison groups. Applicants should describe their plans for identification of the intervention and comparison groups. It is anticipated that reasonable attempts will be made to match the two groups regarding important characteristics. Eligible groups would include teams/units performing some aspect of child protective services. As the focus is on improving worker practice in assessment and the application of information obtained in intervention, groups must include units whose responsibilities include these functions at a minimum. It is understood that in the majority of our Region, units include all CPS functions, but in some circumstances, units may be specialized to perform a specific function such as investigation. Units who specialize in functions that do not include those described above (such as specialized foster care or adoption services teams) would not be eligible. The functions provided by units in the groups should be measured to allow for comparison if appropriate. Data collected by the SR QIC will include measurement of important variables that it will be necessary to control for in the comparison, including turnover rates, caseload, worker variables (sex, race, degree obtained, years of experience in child welfare, years with same supervisor) and

supervisor variables (sex, race, degree obtained, years of experience in child welfare, and years of supervision experience).

As project interventions will occur over a three year period, it is anticipated that attrition of supervisors and workers will be an issue. This is a matter that could significantly impede the evaluation. It is therefore recommended that applicants propose a *minimum* sample of 20 supervisors and their staff in both the comparison and intervention groups. Applicants unable to fulfill this recommendation should justify this decision and describe their plan for addressing attrition issues.

PROCESS EVALUATION

Projects should develop a process evaluation strategy to describe the treatment fidelity and the extent to which the intervention was implemented as planned. Using the logic model, this will include measurement of the proposed project's inputs, activities and outputs. SR QIC staff will gather organizational data from projects regarding variables which may impact the dependent variables, such as statutory change regarding the child protection system/process, administration changes, accreditation, significant changes related to the Child and Family Service Review Site Visit or Program Improvement Plan, case closure rates, organizational culture, caseload, etc. In addition, projects are required to submit semi-annual progress reports in a format which will be supplied by the SR QIC.

To facilitate communication among funded projects, project staff will participate in monthly cyber-conferences. Project staff will also participate in monthly journaling on the website on progress to date, challenges and successes. This is designed to keep other states and interested parties involved in their progress and promote the learning laboratory model on a larger scale.

OUTCOME EVALUATION

Supervision Emphasis/Activity

It will be important for projects to establish a good baseline for what is currently happening in casework supervision in their state now. A primary step in the project's research design should include measurement of the primary intervention variable. This will likely be accomplished through use of an instrument that measures the supervisor activities, techniques and emphasis during casework supervision. Preliminary review of the literature has yielded a number of existing instruments that could be used for this purpose, although this list is not exhaustive. Each applicant will need to review these and other instruments for appropriateness for their project. A number of these also measure the nature of and satisfaction with the supervisory relationship which are also important.

- *Supervisory Functions Inventory (SFI)* - Erera and Lazar (1994a) translated Kadushin's model of supervisory functions into this instrument and validated it.
- *Supervisory Working Alliance Inventory (SWAI-I)* - Efstation et. al. (1990) developed this instrument that measures client focus, rapport and identification with supervisor.
- *Supervision Emphasis Rating Form –Revised (SERF-R)* – This was developed by Lanning and Freeman (1994) who reported it's reliability. It has a form completed by supervisors and one by supervisees. McHenry and Freeman (1997) established this instrument's construct validity.
- *Supervision Questionnaire* - Munson's book *Clinical Social Work Supervision* (1993) includes this instrument for use in his model which measures worker's perceptions regarding the supervisor, and supervisory activities and techniques used.
- *Supervision Styles Inventory (SSI)* - This instrument, developed by Friedlander and Ward (1984), measures the supervisor's approach in three categories (attractive/collegiality, interpersonally sensitive/relationship and task-oriented) and is completed by supervisors and supervisees. They report that it was found to be both reliable and valid. In an article

regarding the appropriateness of this and 2 other instruments for use in field instruction, Vonk and Thyer (1997) note the strength of its psychometric properties.

- *Supervision Questionnaire* - Shulman (1982) developed this instrument in both a worker's version and a supervisor's version for measurement of child welfare worker's perceptions of their supervision, including time spent on content, the supervisory process, relationship and satisfaction. Shulman reported moderate to strong reliability and validity. Vonk and Thyer (1997) noted it may be somewhat confusing to score.

Applicants are encouraged to review these and other instruments regarding their appropriateness.

It is our hope to utilize the same instruments for all projects for allow for comparability, unless this is not possible due to the nature of the projects. It will be important regardless of which instrument is used that it measure the frequency, type and duration of supervisory contact.

Worker Turnover, Satisfaction and Organizational Culture

A key variable applicants must collect is group-specific worker turnover rates. In order to isolate turnover that could reasonably be expected to be impacted by supervision, we will ask projects to use the definition of preventable turnover developed for the Child Welfare Workforce Study (APHSA, 2001), and include the lateral transfer of staff to another unit. This will allow us to separate out non-preventable turnover such as that due to pregnancy, retirement and relocation. Additionally, worker satisfaction is a variable that needs to be examined. A number of the instruments listed above measure satisfaction with supervision. There are numerous instruments measuring job satisfaction by itself. Applicants must decide how to include questions regarding staff satisfaction without placing a great deal of burden on the staff. Alternatively, Ellett and Millar (2001) developed the *Professional Organizational Culture Questionnaire-Social Work (POCQ-SW)* which is an adaptation of an instrument extensively used in school settings. It was adapted for specific use in public child welfare, to measure vision/leadership, collegial teaching and learning, and professional commitment. The authors

report content validation. This instrument is of particular interest due to measurement of the learning environment, which is central to the learning lab model.

Worker Practice

It is anticipated that development of an instrument that measures competence of worker practice in the area of assessment, case plan development, and intervention in public child welfare may need to be developed for this purpose, although a review of the literature on this has not yet been conducted. If an instrument needs to be developed, it may be appropriate to use the Child Welfare League of America Standards of Excellence for Services for Abused or Neglected Children and Their Families (1999) as a basis for questionnaire development.

An alternative may be found in Ellett's (2001) *Self-Efficacy Assessment-Social Work (SEA-SW)*. This instrument was designed for use with child welfare workers and asks them to "make a judgment about the strength of their personal beliefs in their capabilities to organize and carry out tasks to successfully accomplish outcomes in child welfare in view of factors in their work context. (2001, p. 14)." Items include assessment skills in decision-making in child safety, engagement and treatment.

Finally, projects should build a method for case record review into their research design. Most states currently have a peer review or quality assurance system that involves the review of records regarding worker practice which may be utilized for this purpose. An appropriate outcome might be the appropriateness of the services provided in response to the assessment. Applicants should describe this process, the instrument currently used and how this process could be used to measure change during the project intervention period. It would be important for this process to utilize blind review, so that the reviewers are unaware of which cases come from the intervention and comparison groups.

Client Outcomes

Applicants should indicate data currently collected by the agency relative to client outcomes, particularly related to child safety, permanency and well-being which could be used in the outcome evaluation of these projects. Data needed for Child and Family Service Reviews would be relevant and would not place a new burden on the agency. Examples may include: CA/N recidivism, out-of-home care rate, number of placements or length of time in foster care, in addition to others. Consensus will be reached among funded projects on which outcome data will be collected for the comparative analysis based on that proposed by successful applicants.

SUMMARY

When designing their proposed research methodology, applicants should consider the design for the comparative analysis. There are a number of areas within these rough guidelines where projects may select instruments or procedures which best fit their proposed research. The incorporation of the same research requirements into the larger project-specific design will minimize the burden on agencies and field staff, and make good use of the technical assistance to be provide by SR QIC staff. Applicants are free to build upon these requirements as they see fit, and to develop a methodology that they believe may yield better results. Every attempt will be made to achieve consensus on the research methodology used by projects to allow for better comparability.

**Southern Regional Quality Improvement Center for Child Protection
Tentative Comparative Research Design**

OUTCOME (SUMMATIVE) EVALUATION: **Quasi-experimental Non-equivalent Constructed Comparison Group Design**
Pre-, Intermediate and Post-intervention measurement

	Year 1	Year 2	Year 3	Year 4
Treatment Group - A	X	←—————→		X
<i>Instruments 1 -A & 1-B</i>	O ₁ *	O ₄	O ₃	O ₄
<i>Case/Org. Data Collection</i>	O ₂	O ₅	O ₆	O ₆
<i>Case Review</i>	O ₃			O ₇
Comparison Group - B				
<i>Instrument 1A & B</i>	O ₁	O ₂	O ₃	O ₄
<i>Case/Org. Data Collection</i>	O ₂	O ₅	O ₆	O ₆
<i>Case Review</i>	O ₃			O ₇

Outcome Research Design Characteristics:

- **Treatment and Comparison Groups** should include at least 20 supervisors each to allow for attrition of supervisors and workers and should be matched to the extent possible regarding relevant characteristics such as type of program or services offered (i.e. intake, on-going services, combined), turnover rates, degree of staff experience, etc. These characteristics should be measured to allow for comparison if relevant.
- **Instrument 1 A & B: Worker and Supervisor Rating of Worker Practice, Worker/Supervisor and Relational Variables**
- **Case/Org. Data Collection:** Projects report relevant client outcome data such as CA/N recidivism rates, out-of-home care rates, and organizational data such as turnover rates.
- **Case Review:** review of sample of cases by existing mechanism, such as quality assurance or peer review systems, focusing on assessment, case planning and intervention using criteria developed for Child and Family Service Review

*The frequency with which specific instruments are administered may vary once selected to avoid threats to internal validity based on testing.

PROCESS/FORMATIVE EVALUATION

	Year 1	Year 2	Year 3	Year 4
	X	←—————→		X
<i>Instrument 2</i>	O ₁	O ₄	O ₃	O ₄
<i>Progress Reports</i>	←—————→			
<i>Cyber-conferencing</i>	←—————→			
<i>On-line Journaling</i>	←—————→			

Process Evaluation Characteristics

- **Instrument 2 – Data collection** from partnership team members and Advisory Board Members on Organizational Variables.
- **Progress Reports –** to be submitted semi-annually by project managers via SR QIC Intranet.
- **Cyber-conferencing –** to take place monthly to include project staff, QIC staff and Advisory Board Mentors
- **On-line Journaling –** to be completed monthly on website by project managers

