

FAMILY
FIRST



SECOND

Finding a Solution to Managing the Workflow

By Bill Bott

I believe that the Family First Prevention Services Act (Family First) is best for children and families. By changing the IV-E reimbursement rules we can encourage more early intervention, up-stream whole-family services, and thus drastically reduce the trauma caused by a removal. As a process improvement geek, I have been working with child welfare practitioners and champions for the last seven years and they, and their data, have convinced me that the goals associated with Family First are both noble and needed. I would never argue against them.

I will argue, however, that if we do not fix our capacity crisis in child welfare, we may never see the results we hope for. It is essential that we address our capacity issue to maximize Family First.

The capacity crisis experienced by every child welfare agency we have worked with began with a simple formula: the amount of work coming in exceeds the time we have to complete it. According to C!A's research, the average safety assessment requires about 20 hours of work to complete. Caseworkers report receiving between three and five assessments per week, or 60–100 hours of new work each 40-hour work week. The initial symptoms of the crisis were missed deadlines and growing frustrations in the workforce. So, in an effort to address those symptoms, agencies extended the deadlines to accommodate the workload. For decades we have fought for more resources for staff, or to help retain the staff we have but, despite these efforts, the problem persisted. As work continues to pour in faster than we can keep up with, child welfare agencies have been forced to manage new deadlines, concentrate on old cases first, remove caseworkers from the rotation so they can “catch up,” and build entire IT systems that track work by task completion. Soon, agencies built entire work-around processes to cope with the volume. While caseworkers saw children quickly, they held off on documentation and closing so they could get to the next child. They updated courts on progress, but more and more children had to wait until the 12-month permanency hearing for a true next step. Today, many of the busiest offices simply live in a state of crisis, knowing that the allegation that comes in today will be assessed promptly, but will be closed

after the mandated deadline. A child removed today will likely be with the agency more than 14 months. When it comes to a crisis, you either get used to it, or you move away from it.

This problem is not new. We have been in, or teetering on the verge of, the crisis for more than a couple of decades. We have kept our heads above water by relying on the amazing people who are called to this line of work and their unwavering commitment to helping children and families in need. That said, the crisis has taken a toll on everyone. Out of necessity, we have seen a new, more devastating symptom creep up: the capacity-driven removal.

Imagine you are a caseworker with 17 open investigations on your plate. Today, your supervisor wrote you an email to remind you that five of those were late and they really need to be closed. You wrote back that four of those were on their desk awaiting review and that you will finish the fifth one today. Even with the most noble of intentions, the next email is a new allegation assignment and you are pulled away from your computer to see that family ... so, once again, the documentation will have to wait.

While in route, another call comes in and one of your other kids has had a placement disruption; the foster parents you just talked to yesterday are no longer willing to provide care. Not only do you need to pick the child up immediately, but it is a reminder that tomorrow morning you will now have to be in court and this episode will need to be updated for the report.

You arrive at the house, make a couple of calls from the driveway, and then head in. It is not horrific, but it is not good. This really is a borderline assessment and the children in the home are certainly at risk, most likely unsafe, but nothing severe enough to facilitate a removal. Still, you are not comfortable leaving. You call your supervisor, talk it out, and agree it is going to be up to your judgment. You make the decision: removal.

If you had time to come back tomorrow, time to sit with parents and properly case plan, the time to get to know the family supports, maybe you could feel comfortable leaving the

child. But there is no time. The to-do list is already overflowing, tomorrow is not likely to be less busy than today, and the best way to make sure you do it right is to take custody of the child and buy some time.

This scenario plays out so often that I would argue that many assessments default to removal whenever there is a borderline family. This is not my assumption. Hundreds of caseworkers in family preservation units across the country have consistently told me in focus groups that up to 40 percent of the children assessed as unsafe and removed could have been served in home. And now we think that is why we need Family First...so we do not feel like we have to remove.

In theory, it sounds like the perfect solution. In reality, my fear is that if we do not find a way to give caseworkers doing assessments the capacity they need, they will simply turn the default on these borderline cases from removal to in-home. If we cannot find more time for caseworkers working with the whole family system, these children will be caught in a capacity limbo while living in some of the riskiest conditions. I will even go a step further. My fear is that without capacity, the potential benefits of Family First may never be realized, the funding mechanism will eventually end, and states will have another initiative they must manage without reaping any reward.

In order to fully realize the benefits of Family First, we need to take a second to find the capacity needed to do the work correctly. Without that, we risk the success of such an important initiative.

So, where do we find the capacity so that Family First can work? The solution is found in addressing the way we are working and managing the workflow. We need to break up the obstacles that keep the work from flowing, such as:

- The supervisor bottleneck, where getting time to staff a case has become a very limited commodity;
- The over-documentation, specifically duplication for clearly safe families;
- The backlog of open cases: the decision has been made and the case is just waiting to be closed.



Bill Bott is the Director of Performance Improvement at the Change & Innovation Agency (C!A®).

When we address these barriers and redesign how the work is done, we allow the worker some time to do a proper assessment. Let's look at how one state has jumped ahead in their Family First goals before implementing even one Family First strategy.

Two years ago, more than 60 percent of one state's assessments remained open past the 45-day deadline and more than 3,000 open assessments were backlogged. While their timing to see the child of concern remained stellar, and their percentage of unsafe decisions was steady at about 15 percent, everything else seemed to be moving in the wrong direction. As part of their Comprehensive Child Welfare Information System upgrade, they decided to look at how they might be able to redesign the way they worked and move the needle in a more positive direction.

Even before the new technology was rolled out, assessment caseloads came down more than 80 percent. Time to close hovered between 12–15 days, and only a handful of cases

were open for more than 30 days. Every performance measure had seen radical improvement—including subsequent substantiations, which had dropped by nearly 50 percent. In other words, they were working faster and making more of the right decisions the first time.

Then the unexpected benefit that changed my thinking on Family First appeared: they experienced a 10 percent reduction in kids in care. In a state that experienced an 8–12 percent growth of the number of children in care over the last several years, and an increase of new allegations of nearly 10 percent, this new improvement equated to more than a 20 percent swing.

We initially assumed they were making fewer unsafe decisions since they had more time for a thorough assessment, but after a little data mining we found that was not the case. The same 15 percent safe to unsafe ratio had held since we began working alongside them. So, what happened? Workers were given the time to realistically assess those families on the

borderline, and at least 20 percent of the children are better served at home than with removal.

Let's put aside the millions in savings, the freeing up of very needed foster beds, and even the reduced trauma for these children. Within a year of when they first decided to build capacity, they were following "family first" long before the October 2021 deadline. They naturally achieved the outcomes this national initiative hopes to inspire.

Inspiration is the easy part, getting a law changed is the most time-consuming part, and making changes to your business processes and culture are the most critical part. We need to attack the critical part before the clock strikes midnight or all the inspiration and new funding streams will simply make a change and not a difference. Given time, the amazing people of child welfare know what is best for children and their families. We just need to give them that time first, and then the support that Family First offers ... second. 📌



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