

Improving Outcomes for Children in State Custody through Evidence-Based Practices

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Today's Presentation

- Study overview
- Methodology
- Findings
 - Case Characteristics
 - Agency Assessments
- Recommendations



Study Overview

- ***Purpose:*** To determine if the number of children in DCS custody could be reduced through the provision of intensive in-home services
- ***Method:*** Intensive case review by clinical staff familiar with evidence-based intensive in-home services



Primary Issues of Interest – Child Assessments

- Availability of family resources
- Reasons for placement into custody
- Services provided to family
- Permanency goal
- Likelihood of custody prevention if appropriate services had been available



Primary Issues of Interest – Agency Assessments

- Behavior management systems
- Family involvement
- Discharge planning
- Treatment planning

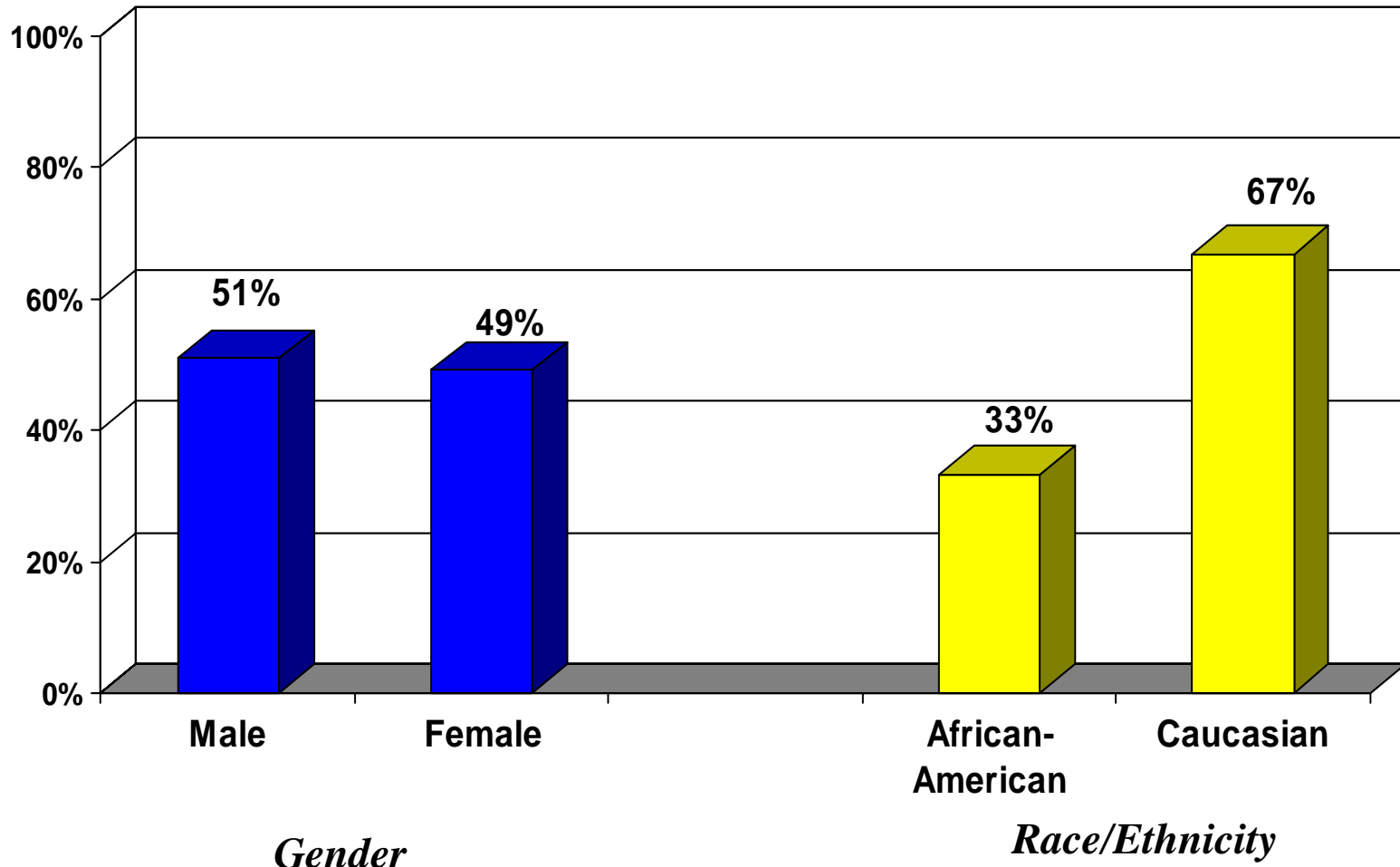
Case Review Methodology

- Retrospective Case Review
 - Conducted by experienced clinical staff
 - Multiple information sources
 - Interviews with DCS Case Manager, child, and family members (as applicable)
 - Review of DCS case records
 - Intensive agency review

- Random sample
 - Stratified by region
 - Excluded youth in custody between 12 and 24 months and those in Youth Villages' care
 - Sample size – 108

Demographics of Study Sample

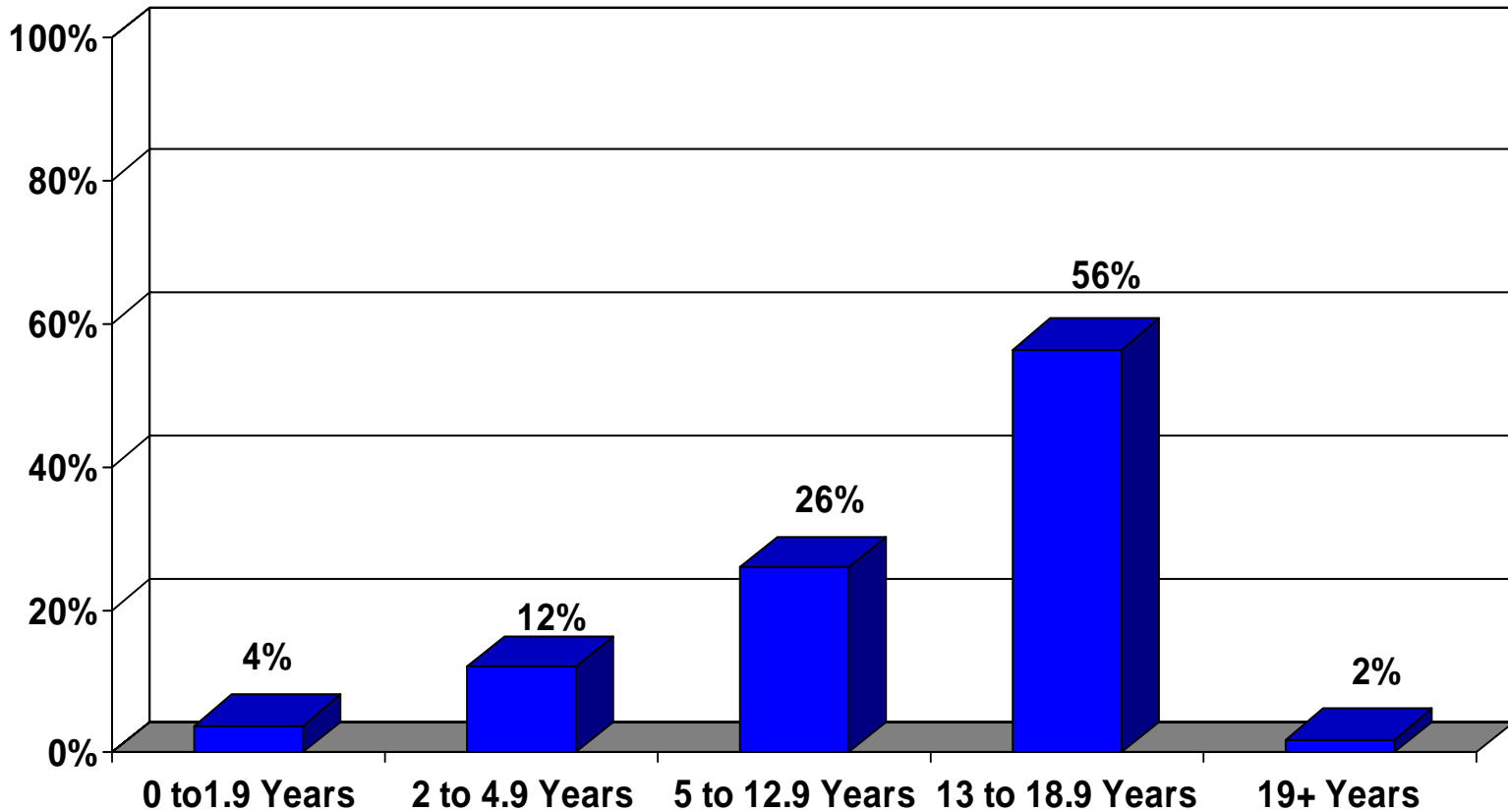
– Gender and Race/Ethnicity



n = 108

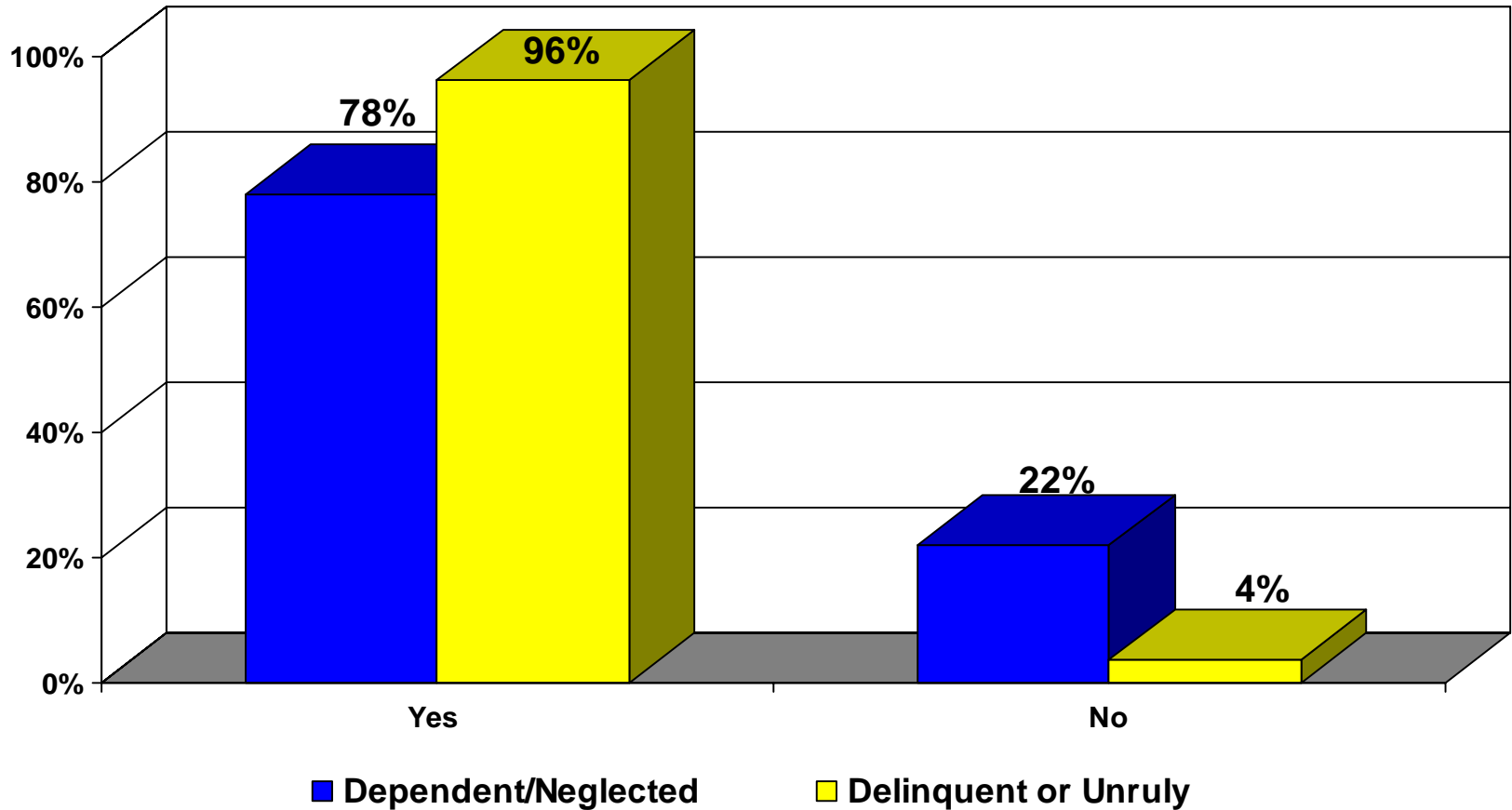
Demographics of Study Sample

– Age Groups



n = 108

Viability of Family at Custody by Adjudication Type



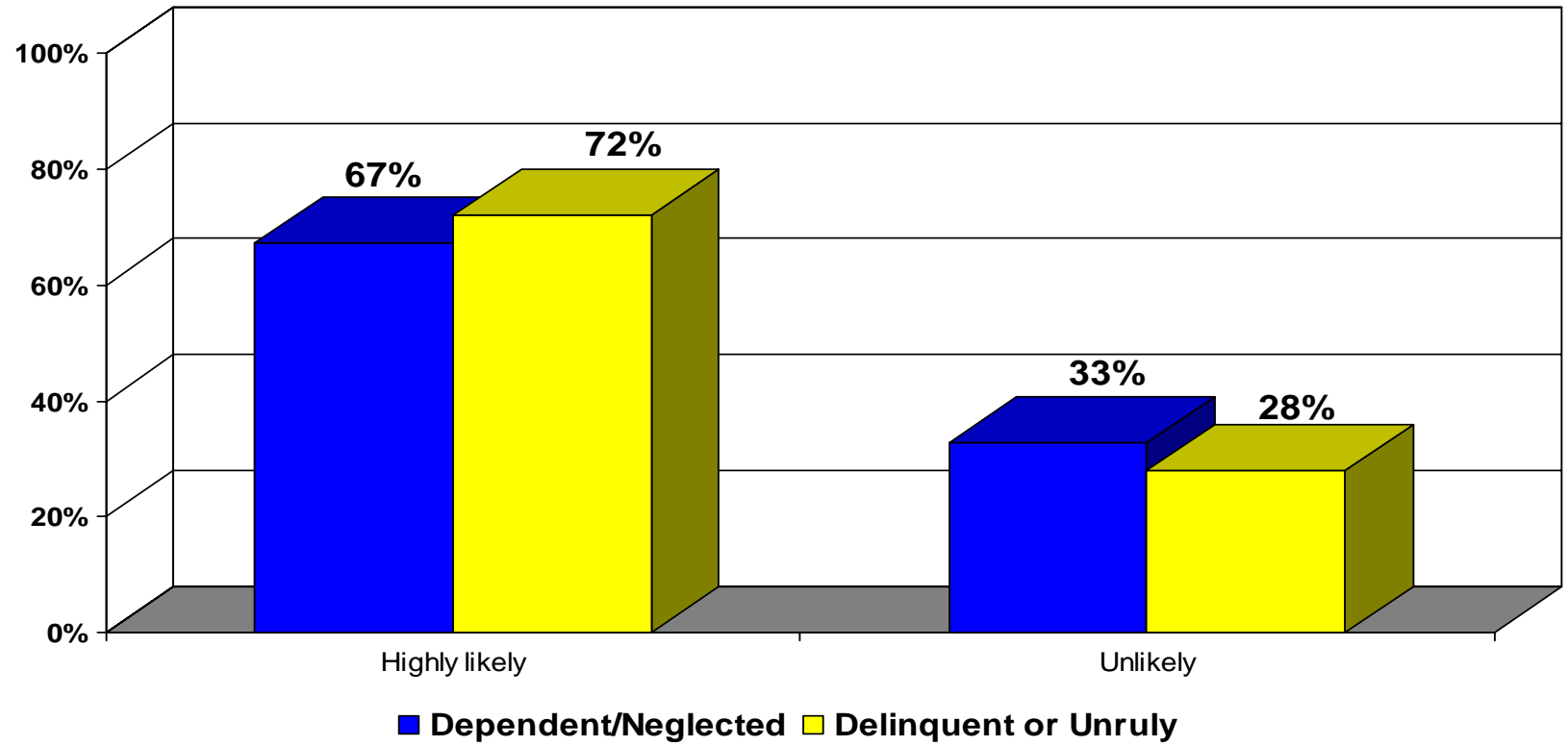
Dependent/Neglected: n = 82

Delinquent or Unruly: n = 26

Case reviewers judged the likelihood that entry into state custody could have been prevented if intensive in-home services been available to the family prior to DCS intervention.

Likelihood of Custody Prevention by Adjudication Type

Does not include children whose parents' rights have been terminated or are pending termination



Dependent/Neglected: n = 58
Delinquent or Unruly n = 25

Current Case Characteristics

	<i>DCS Relative Placement</i>	<i>Trial Home Visit/ Adoptive Home</i>	<i>DCS Non-Relative Foster Home</i>	<i>Private Agency Placement</i>	<i>YDC/ DCS Group Home</i>	<i>TOTAL</i>
	<i>n = 27</i>	<i>n = 17</i>	<i>n = 18</i>	<i>n = 27</i>	<i>n = 19</i>	<i>N = 108</i>
<u>Current Viable Family</u>						
Number	27	13	14	20	17	91
Percent	100.0%	76.5%	77.8%	74.1%	89.5%	84.3%
<u>Current Permanency Goal of Reunification</u>						
Number	8	8	9	13	17	55
Percent	29.6%	47.1%	50.0%	48.1%	89.5%	50.9%
<u>No Current Services to the Family</u>						
Number	11	11	11	16	16	65
Percent	40.7%	64.7%	61.1%	59.3%	84.2%	60.2%
<u>No Projected Step-down Date</u>						
Number	1	N/A	8	17	10	36
Percent	3.7%		44.4%	65.4%	52.6%	33.3%

Agency Assessments

34 agencies assessed

- Youth Development Centers and DCS Group Homes
 - 7 Agencies
 - 11 Study Subjects

- Non-Continuum Residential Providers
 - 7 Agencies
 - 9 Study Subjects

- Non-Continuum Foster Care Providers
 - 9 Agencies
 - 11 Study Subjects

- Continuum Providers
 - 11 Agencies
 - 18 Study Subjects

Agency Assessments

- Most agencies provided a clean, safe environment for youth
- Most staff demonstrated concern for youth well-being and interacted appropriately with them
- Most agencies seemed to believe they were acting in the best interest of the youth they serve



Behavior Management System

- Is there an identified behavior management system?
- Positive or punitive?
- Limits contact with family?
- Generalizable to home environment?



Behavior Management System

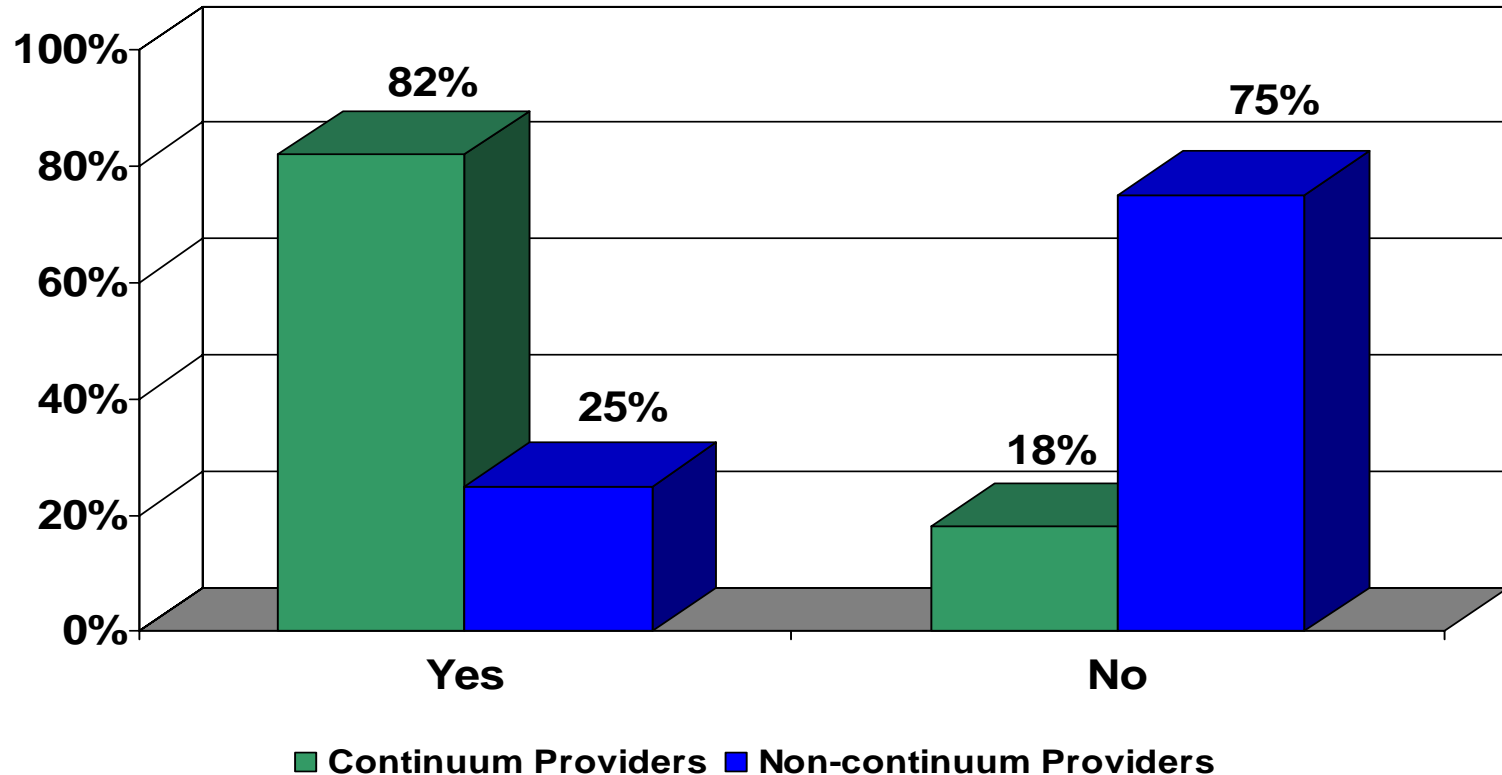
- Juvenile justice and non-continuum residential placements were more likely to have punitive systems
- Purpose of most behavior management systems seemed to be client control rather than treatment of referral behaviors
- In most non-continuum providers, performance in level and point system determined availability of passes and length of stay



Family Involvement

- Parameters for family visits and passes
- Availability of family therapy
 - During times convenient for family
 - Assistance with transportation
- Availability of family services
 - To meet parents' needs
 - To prepare for reunification
 - In-home services after child's return

Family passes and visitation actively encouraged* by Provider Type

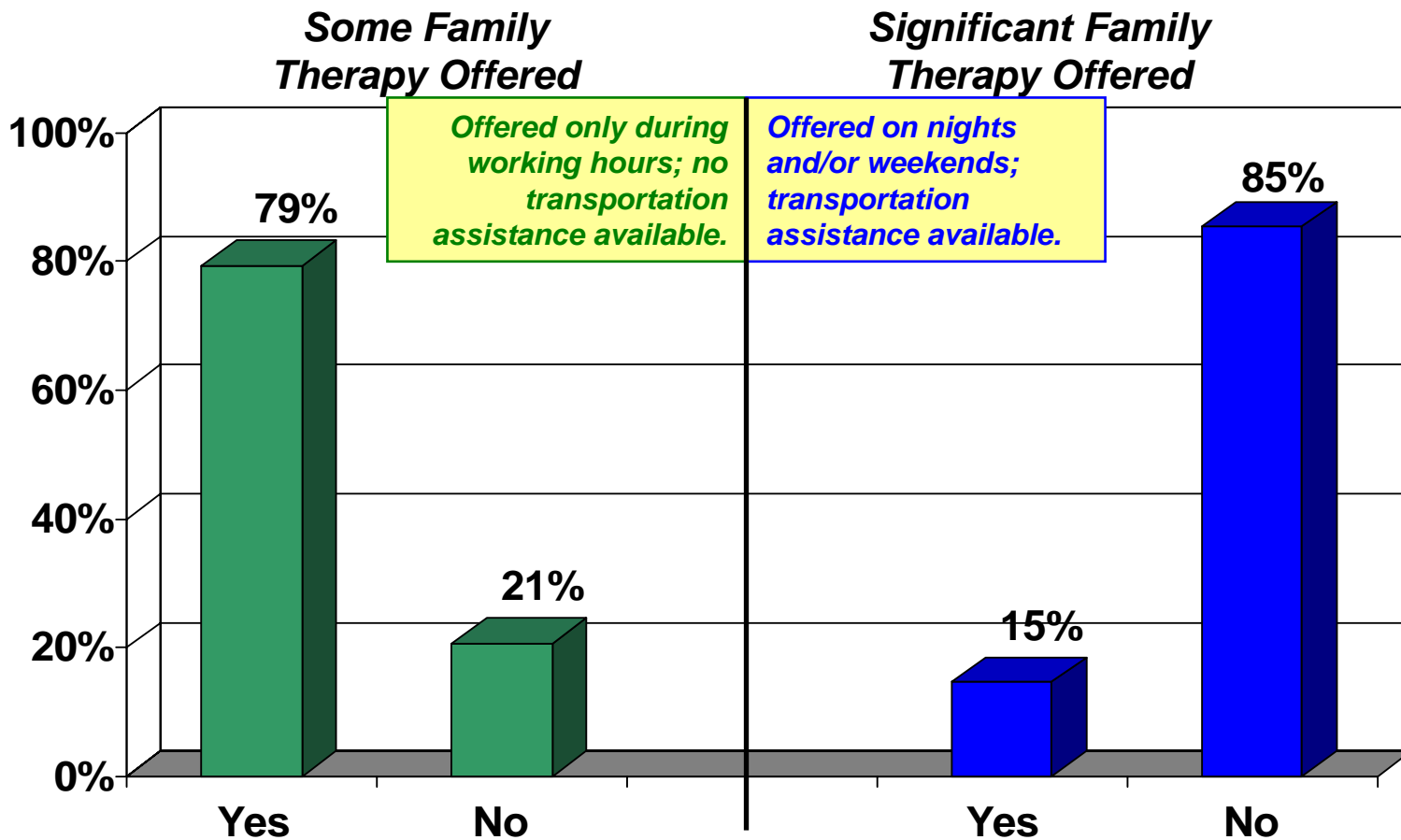


Continuum Providers: n = 11
Non-continuum Providers: n = 16

**Passes not based on level or points achieved; transportation assistance available.*

Family Therapy Offered

n = 34

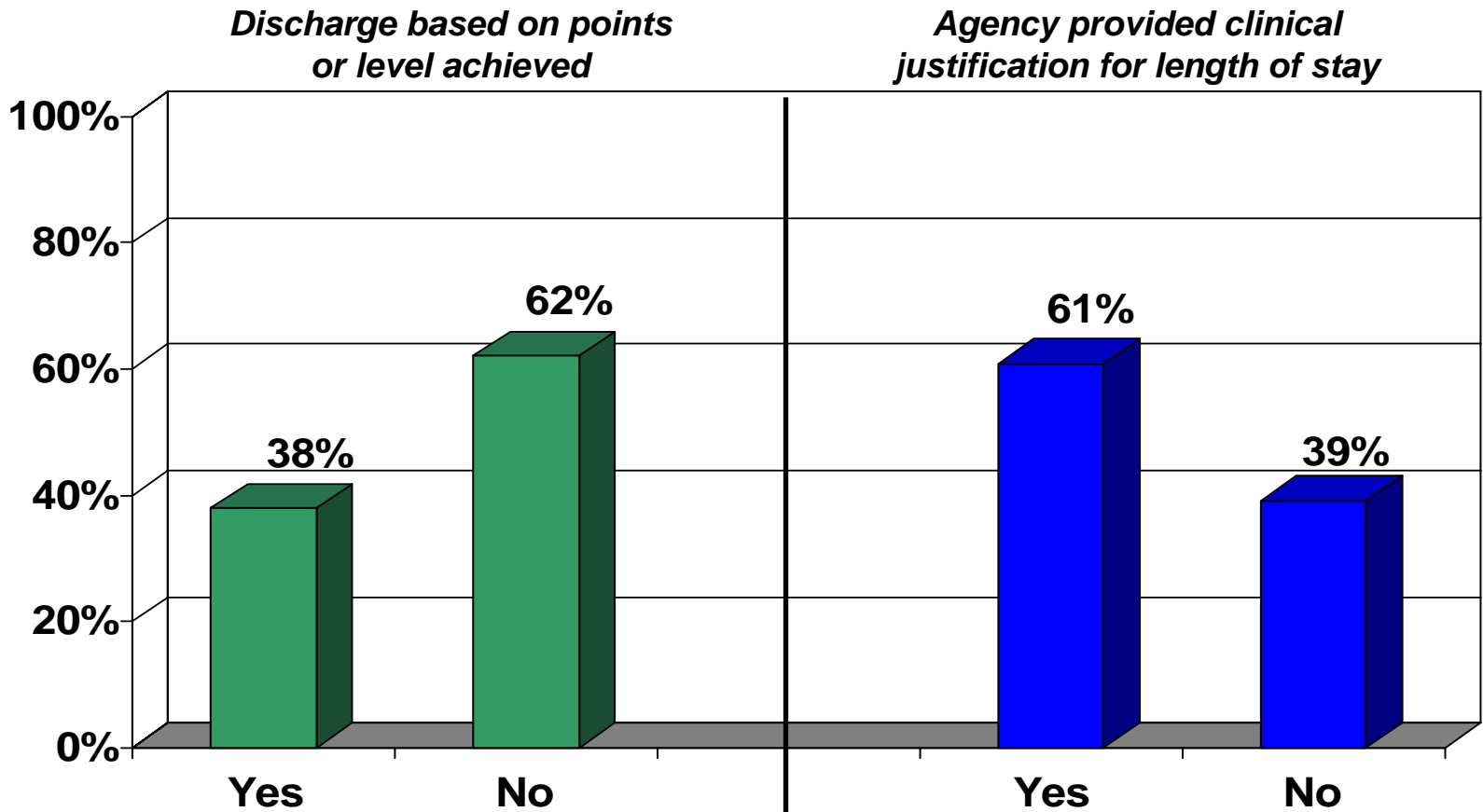




Discharge Planning

- When is it initiated?
- Who controls the process?
- On what are discharge plans based?
- Is clinical justification for continued treatment provided?

Basis for Discharge/ Continued Stay



Level I Foster Care agencies not included as no level or point system implemented in those placements. (n = 29)

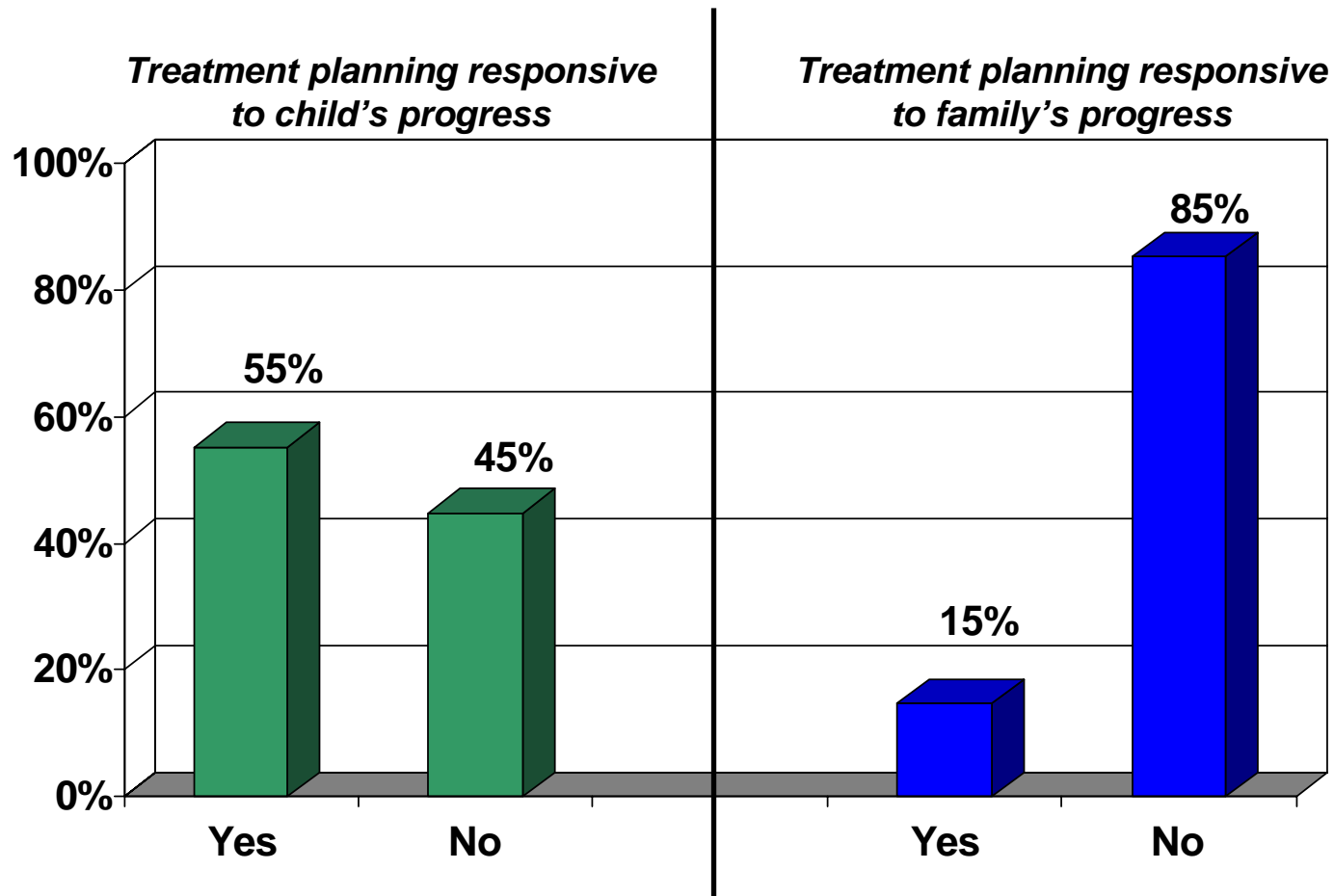
Juvenile Justice and Level I Foster Care agencies not included as length of stay not connected to clinical issues. (n = 23)

Treatment Planning

- Does treatment planning involve repeated examination of referral behaviors?
- What support is given to make changes in referral behaviors?
- What happens when no change occurs?

Treatment Planning

n = 34



Does the agency monitor progress and change treatment to meet identified needs?



YDCs and DCS Group Homes

- Staff estimates recidivism rate of 70-75%
- Lack of change in youth's environment cited as reason for high failure rate



Non-Continuum Residential Providers

- Appeared that congregate care was not necessary for most youth
- Little sense of urgency to move youth to a less restrictive environment
- Focus on youth rather than family



Non-Continuum Foster Care Providers

- Wide variability among agencies in approach to foster care services
- Many relied on DCS to work with family
- Focus on safety and well-being of children, but little attention paid to permanency

Continuum Providers

- More focus on family involvement than other provider types
- Many demonstrated little urgency concerning reunification and/or movement to less restrictive environment
- Only agencies that embraced the continuum concept seemed to actively work toward reunification/permanency for youth in their care

Recommendations

- Redirection of Resources to Agencies that provide Evidence-Based Services
 - Family Preservation
 - Reunification
 - Adoption
 - Transition to emancipation

- Case Supervision
 - Ensure adherence to Practice Model
 - Increase accountability for case activities directed toward achieving permanency



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Thanks for your interest!