

Effective Strategies for Leaders Interviews with Departing Directors

A key ingredient for organizational change is the commitment and involvement of leaders throughout the agency. In this issue, we offer resources for leaders who want to play this key role in making organizational improvements. We feature interviews with four departing child welfare directors who reflect on their experience leading organizational improvements, focusing particularly on the strategies and tools that they used to move the agency forward. We draw on their wisdom and experience to highlight effective approaches that can improve child welfare programs, and help manage in times of budget shortfalls. This issue also offers an agency inventory and assessment tool that managers can use to understand how their agencies currently work and how they can be improved. We are always open to your comments, and would love to hear from you!

– Kris Sahonchik

In March and April of 2003, we interviewed four departing Directors who had overseen child welfare services. They represent a variety of child welfare agencies – in small and large states, and in county and state administered systems. The interviews focused on what they had set out to accomplish and the tools and strategies they used to make program improvements. Across the four agencies, most saw improvements such as an increased number of adoptions, a decreased number of children coming into care, decreased lengths of stay and/or improved collaboration and partnerships focused on outcomes.

In the excerpts from the interviews below, the former directors talk about how they accomplished these program improvements. While a number of strategies are discussed, common themes emerge that point to critical strategies for child welfare leaders. These include having outcomes and using data on these outcomes, investing in front end, preventive services, focusing on improving the capacity of agency workers, and engaging providers around outcomes.

Jess McDonald

Jess McDonald has spent the last 9 years as Director of the Illinois Department of Children and Family Services. This department has 4000 employees and a \$1.3 billion budget, and includes child welfare and related support services, such as training and quality assurance.

When I came into office we had caseloads that were growing astronomically. Worker turnover was high, and there were almost no outcomes in terms of permanencies, kids going home, and there were too many kids were coming into the system.

My basic strategy is that you tackle everything all at once. It's a system that demands that you respond to all of the issues. There's a lot of staff in these large systems, and they can respond to many, many challenges.

Outcomes: If you look at the signs of progress on our website you'll get a sense of where we were. (*Note: This site documents progress over time on nine outcomes, including number of children removed from home, number of children in substitute care, number of children abused after DCFS involvement, and number of children placed in permanent homes. All show significant improvement. www.state.il.us/DCFS/signsprog.pdf*). We started using those signs of progress almost immediately. At every opportunity, we would drive the system to improve performance. Keeping a clear focus on that is really important – it's about outcomes.

Accreditation: I announced within a month that we were going to get accredited. I saw this as a key strategy for changing the organizational

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culture from one of striving for mediocrity or feeling oppressed, to one where the folks owned the change, they owned the improvements, they actually took charge. It has turned people around, turned the field around. There is nothing more powerful to change the organizational culture in a distressed agency than accreditation.

Staff capacity: In the discussion about performance and outcomes, we made an absolute connection to capacity: if you don't have competent capacity, you're not going to get the outcomes. Competent capacity in the field means we have to have the right people. We sent people back to school to get Master's in Social Work.

The caseload matters. All you had to do was add up the time it takes for worker contact. Everyone has to understand that the people driving the cost of the system are the people working with clients. They either are able to have a different outcome, which will have a different cost, or they won't, and they can't get it if they're not prepared. If they don't have the right resources and the right supports, then there's no opportunity for improved outcomes.

We launched into significant strength-based training efforts for our front line staff and supervisors that work with families using Tom Mortin. We've since developed that into a training institute, with our training partnerships in the schools and the programs of social work. We now use this institute to train all new workers coming into the system.

Quality Improvement: Accreditation gave us the impetus to build a very strong quality improvement program. We added to that the development of the Child and Family Research Center at the University of Illinois School of Social Work in Ur-

bana, Champagne. Part of that was to bring attention to the actual performance of the system so that the public, the system, and all the stakeholders would have people independently evaluating child safety, permanency and well being issues.

Performance Based Contracting: Next we had to deal with some attitude issues, and one of them was about public versus private, which is better. We just said in this state it's not about public versus private, it's about performance. Who's doing the right work with kids and families? And by the way, what is the right work, and what should we expect? And that's the beginning of the thinking on performance contracting.

The IV-E waiver that allowed subsidized guardianships was instrumental here because we had a lot of relatives with kids. What we found is that the IV-E waiver actually resulted in more adoptions as relatives stepped up to adopt. Guardianship was an option for kids that had been in care for a long time who knew their parents, and where the family thought it was not appropriate to sever the relationships with the parent. But they needed some legal finality, and guardianship was appropriate.

The performance contracting was developed in a partnership with the private sector. We sat around the table working together on it, and they helped us develop the terms and conditions. We worked with unions as well. We were able to convince people this was not about the old fights, but it was about performance, and focusing on children's needs. And because there was litigation – a class action lawsuit that had been settled – we were able to move some stuff that people probably thought wouldn't happen.

Use of Data: The other thing that managers and leaders have to do is use information. This system has a lot of information, but gener-

ally it's not used. We took the information and turned it back to our field leadership in the private and the public sectors, and said let's take a look at your cases, let's look at your median length of stay. How long do you think people should be in this system? Of course everyone argued for a short length of stay, two years max. The median length of stay in 1995 was five years. When we pointed that out to people, they were in shock. The clear intent here was to put information out in front about the performance of the system, and to have them help us decide what the system should do., and then structure a contracting process based on some mutually agreeable goals that essentially said let's reduce the length of stay, let's get to those outcomes.

Front-end redesign: We also did what I call front end redesign. I shifted a lot of resources from units that were in the field but separate from our investigations. I wanted to make services immediately available to cases where investigators were feeling the need to offer services. If they could not guarantee services there, they're going to take kids into care. On the front-end we armed investigators with a support team that would provide intact family services, so they had services available to keep kids at home. And in the beginning of '95 those teams were set up to serve no more than six to eight families at a time. They got the strength-based training, and it made a huge difference. The result is that in calendar year '94, 9,991 kids were taken into foster care in Cook County. This year it'll be less than 2,000. It's a steady decline each year, and our safety record on intact families is better now than it ever was.

Caseloads: The other thing we did to get caseloads down was make some efficiencies using our current staff. We started to monitor agencies on an account basis, and redeplo-

all the case workers assigned to private agencies. They all started carrying cases, and we were able to cut our caseloads immediately to within the requirements of the consent decree. As a result, our work started to improve because for the first time people started to get reasonable workloads.

Partnerships: We had a lot of partners in this. Private agencies and unions were critical partners. In addition, from the Cook County Court system, Judge Nancy Sawyers made an enormous number of improvements. We worked hand in glove with her. If she needed something she couldn't get approved or sponsored by her operation, I'd fund it.

Media: We also had strategies for working with the media that I think were probably different than what other people do. We're very open with the media; we're quick to get back. We understand what they do. We turned a hostile media environment into a relatively positive one.

Strategic thinking: The program people in the field who are trying to figure out how to get work done are not taught to actually think strategically. We deliberately eliminated the planning unit and put the staff into different units to start thinking strategically about the problems in the unit. For instance in operations, we

want to make sure that no kid's going to be placed out of state. How are you going to do that? We used every problem as an opportunity for our operational and line people to think strategically about how to make change happen.

Organizations are made up of ordinary people, and the real test of leadership is helping them do extraordinary things. And they've done that here. The people here have done extraordinary things – things that they didn't believe were possible. And they know that, they feel it, they take it home, and they wear it proudly.

Susan Dreyfus

For almost seven years, Susan Dreyfus served as the Administrator for the Division of Children and Family Services within the Wisconsin Department of Health and Family Services. The Division oversees child welfare services and other programs, such as domestic violence, child care licensing, hunger relief and youth development programs. In this county administered system, the Division provides guidance and oversight to county agencies. In 1998 the state assumed responsibility for administering the Milwaukee county child welfare system.

In 1996 we were less than two years away from assuming full responsibility for the direct administration of the Milwaukee county child welfare system, the largest child welfare system in the state. A high priority for me was putting in place the necessary processes within the division to meet that time line, and to assure an effective transition. I found that our work improving the child welfare system in Milwaukee County has tremendous relevance to our efforts at improving child welfare policy across the state. At the state level in county operated systems, I think it can be easy to get

away from what's happening at the direct line level, yet we sit and create policy that has incredible impact. So Wisconsin's experience in assuming responsibility for a county run system became a wonderful educational and change opportunity for us in our statewide policies in child welfare. We were able to see where we needed policy or we didn't have policy, or we had disconnected policy.

Relationships: I believe strongly that, in the end, effective leadership is about successful relationships, and I developed a strong competent management team to make sure I was surrounded by people who were as passionate for children and for the success of our initiatives as I was. The first thing I did was a lot of listening. Before I started my job, my management staff came one at a time to my home to socialize and have my undivided attention. It helped tremendously, in terms of not only our relationship and trust level, but also my learning curve of their critical issues, thoughts and suggestions. We did that on an annual basis as

well, when we got together off site.

Second, building relationships with other state agencies is critically important and must not be by chance, but be very strategic. For example, our close working relationship with the Department of Revenue was important as we sought to improve our earned income tax credit programming across the state. Also, it's easy to overlook building collaborative relationships with other divisions within your agencies. So we built a close working relationship with our Division for Disability, Mental Health and Substance Abuse, and did some innovative things together, which yielded marvelous results for kids and families in our state. But it never could have happened without a trusting respectful relationship between us as peers. It's also important to be visible and to build relationships with community leadership.

Decreasing entry into care: You've got to think long-term, and you've got to think about how you will manage critical processes within

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the organization to get to the long-range goal that you're shooting for. We knew that if we were going to turn things around in Milwaukee County, we had to stop the flow of children into the system. We adopted family-centered standards and we went very much with a strength-based approach. From a legal standpoint, our priority was kids in the foster care system, but from a strategic standpoint, we had to shore up the front end of the system. So we expanded a family preservation program in Milwaukee County from a \$200,000 program to a multi-million dollar program. Consistently now, twice as many children are being kept home safely with services than are going into the foster care system, and there is an incredibly low recidivism rate after one year of case closure.

Using research and evaluation information: I would say to any new person, you must read and stay close to research. You need to know what's going on in terms of best practices and model programming.

One of the things that I always did was looked for ways to engage researchers in our programming. We contracted with Mark Courtney at the University of Wisconsin Madison to do a longitudinal top to bottom evaluation of Wisconsin's Independent Living Program. From that research we completely redesigned our independent living approach. And we believe that that research was helpful in advancing the Chaffee Bill in Congress that doubled the resources for independent living in this country.

Mark Courtney had already started doing a comprehensive evaluation of the Milwaukee County Child Welfare System, and it became invaluable to us. Last December we held a Wing Spread Conference for key stakeholders and advocates in Milwaukee and across the state to

hear the results of the evaluation of the family preservation program that's keeping kids safely at home.

It was a marvelous day of people thinking strategically about what we could do to further strengthen and improve our programming and policies around family preservation, but also just at that time, with our state budget deficit, the elimination of the funding in that program was put forward. Well, the advocates were able to use the results of that research to document that we were successfully keeping children out of the foster care system at far lower costs than it would cost to have them in care, and they succeeded in getting the funding put back in the budget. This is an example of using evaluations and the benefits of having stakeholders and advocates engaged.

Outcomes and core process drivers:

We wanted everybody to recognize that it is ultimately about achieving Federal outcomes of safety and well-being, so we broke them down into the core process drivers that were critical to our ability to achieve those outcomes. We focused on those. So for instance, if the core process driver was the training of our foster parents, it was critical to meeting an outcome related to out-of-home care. We wanted to reframe the daily work we did so that people saw its relevance, and how it achieved these outcomes. It became a wonderful way of communicating clearly to people. These are outcomes that we are going to achieve, and this is the path we must go down to get that done.

Quality Improvement: I would say that it's important for state administrators to convince their governors and legislatures to invest in quality assurance and quality improvement mechanisms. Too often those mechanisms are outside of the system and come in the form of an audit or a lawsuit. We have to be equipped within our system to con-

tinuously monitor ourselves, and look at the quality of what we're doing, and the outcomes we're achieving. We were able to convince the governor and the Legislature that we needed what we called a performance evaluation manager unit in Milwaukee. We have made back the money in that unit over and over again. That unit is constantly in the field looking at practice, looking at policy, looking at our outcomes, looking at problematic cases, and

Lessons Learned

Below are some responses to the question: If you could start again, what would you do differently?

Susan Dreyfus, WI: I would strongly encourage anyone taking these jobs to get engaged immediately in understanding what the current health care and behavioral health care delivery system is for children in the child welfare system. Working closely with our state Medicaid director, the community, foster parents, and birth parents, we convened a task force that created a wonderful strategy that's now being implemented, but I wish we had gotten to that earlier. It is such a critical piece of a child welfare administrator's ability to achieve outcomes for children.

Chuck Harris, NC: The state child mental health director, the deputy director for juvenile justice and I met together every Friday for over a year looking at ways to work in something that's called a system of care. If I were to do it all over again, I would target judges more than I did. I would try to get judges to require the formation of a child and family team before they would place a child with significant mental health needs in the foster care system. And I would also push some statutory changes that would require that.

helping us to analyze what we are doing with a critical eye. We take that information, and make necessary changes at the management and line level.

Engaging Providers. I made the decision early on that if we were going to be successful, we had to build the capacity of the non-profit sector within communities. We felt it brought about a greater sense of community participation in some of the most difficult issues communities are facing. Government cannot do it alone. I found the strength of the

nonprofit leadership sitting around my management table was incredible. We involved our nonprofit agencies in helping us to figure out the best way to design this system to make it perform for children. They viewed themselves not only as contractors of the state, but as partners on critical issues that were important to their mission. I just cannot overstate the payback we received from consciously working in partnership with the nonprofit sector and building their capacity to further meet their mission. For example, in our state adoptions initiative, we in-

creased adoptions 32% last year. When we contracted out, we created this incredible regional network of capacity in the nonprofit sector to get more adoptions done. They weren't just seen as a contract with the state to finalize adoptions. They saw the work they were doing for these contracts as an important component of their missions. Working with your community-based nonprofit agencies as full partners becomes a powerful way of involving more people in your issues.

Chuck Harris

Chuck Harris served for eight years as the Chief of Children's Services within the North Carolina Division of Social Services. He directed all of the child welfare services in this county administered system with a budget of \$300 million.

What I was most interested in accomplishing when I became the child welfare director was promoting a system culture in which we are always looking for ways to learn and do better.

Vision: I would encourage any child welfare director to build strong consensus around a vision for the child welfare system. At the time I became Child Welfare Director, we were selected to participate in the Families for Kids initiative that was funded by the Kellogg Foundation. We took that opportunity to develop and articulate a clear vision for our system. We challenged ourselves to describe the child welfare system as it ought to be – the child welfare system that we would want our own children to experience if they had to come into contact with it.

We communicated the vision in a number of ways. Number one, a lot of people participated in developing that vision through Families for Kids. Though we were the agency that re-

ceived the funds, we also had some very strong partners, including the university, the advocacy community, and the guardian ad litem community. We made sure that everything that came out of my office was consistent with that vision and promoted that vision. The vision is on the very first page of our policy manual. We put it on our Web site. We got it incorporated into statute.

Collaboration: One thing that was very effective, I think, is the state guardian ad litem administrator and I went all around our state and spoke with groups of social workers, guardians ad litem, attorneys, judges, anybody who would listen. We talked about the importance of the vision that we had developed, the importance of safe, permanent homes for children within a reasonable period of time. And the two of us doing that together and showing the kind of collaboration and cooperation we had at the state level, I think, was another effective strategy for communicating the vision and trying to get everyone on board.

Outcomes and Indicators: We also articulated clear measures of system performance or outcomes. And then we entered into a partner-

ship with the School of Social Work at the University of North Carolina to develop a longitudinal database of every child who had come in to contact with the child welfare system over the last 10 years. This database followed them through so we got very good at describing what our performance indicators are, and how well we were meeting them.

Self-evaluation: Using the longitudinal database, we developed some reports that looked at these outcomes. About every six months each county gets a detailed report that shows your performance against a whole range of child welfare system outcomes. It shows how you did, how all other counties your size in the state did, and how the state as a whole did. So it gives you some frame of reference within which to look at your progress. Those reports go on the web site, so they are public information and tools that county DSS uses to plan.

We promoted the outcomes as, again, a way to learn and do better. We're not looking to see who's doing the job and who's not. We want you to look and see where your progress is not in line with other counties

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your size or the state as a whole and ask yourself why. The state office offered training on how to use the data and how to do that kind of analysis. We were looking for people to use the data to do self evaluation.

Financial Incentives: Another tool we used that I think is important is trying to get the financial incentives right in our system. For example, if you look at foster care, and you talk with private child caring agencies, the incentives are all wrong. The fewer children they have in their care, or the shorter the time the children stay in care, the less money they generate. So we did a couple of things to turn that around. Even before the federal adoption incentives, and with the help of our general assembly, we put in place

the Special Children Adoption Incentive Fund. We made private and public adoption agencies eligible. We used our data to project how many foster care adoptions they could achieve in a fiscal year with their existing resources. And we said after you achieve that, for every child that is placed in adoption there is a financial reward. We were also the third state to get approved as a child welfare waiver demonstration: 19 of 100 counties are a part of that. And basically, we said to counties that instead of the state prescribing how they were to use the money, they were given freedom to use the waiver to improve the outcomes that we've been talking about. The agreement was that counties can use federal IVE dollars to accomplish those outcomes as long as they don't spend any more federal IVE dollars than they otherwise would have using the federal formula. A major fed-

eral evaluation found that one of the outcomes among the 19 counties was a significant decrease in the number of children having to enter foster care in order to be protected. The counties found a lot of creative ways to keep kids safe without having to remove them from their families.

Staff training: We put in place some preservice training requirements and continuing education requirements for everybody who was employed by a county DSS and a child welfare position. And we established five regional training centers. And so early on before a new social worker would knock on the first door, they would be thoroughly trained in the vision and the mission and the indicators and the importance of tracking the data. I think that was a very important tool.

Susan Chandler

Susan Chandler served for eight years as the Director of the Department of Human Services in Hawaii. The Department includes a broad array of child, youth and adult services including child welfare, welfare services, Medicaid, vocational rehabilitation, youth services and childcare services. The child welfare staff numbers 300 statewide.

I thought that one important theme would be to pry open the department to have more of a community based stamp. I was committed to working hard to build collaborative partnerships with private sector agencies, but also with community-based agencies. My message to the staff and my vision was that you can't run a child welfare services system all by yourself.

Collaborations: When I started as Director there were a couple of reform initiatives that had already begun but needed more departmental involvement and leadership. A Child Welfare Reform Initiative had started

about a year before I got there called the Blueprint for Change, which was looking at child welfare to see how it could improve itself. They asked me to chair the Child Welfare Reform Coordinating Committee. It brought all the right people to the table.

I tried to use this positive energy and say, we want to be a part of this, we want to be a part of the solution; let's get our staff on various committees and let's make it work. I said I'll come to the meetings and I'll provide the leadership from the top to look at the good ideas and work together to move forward. Having the director go to the meetings showed that the agency was committed to the initiatives that were coming up collaboratively.

We also had a positive Family Court lead judge when I started in '95. We started meeting quarterly with the Family Court judges, the child welfare staff, the Guardians Ad Litem, the Friends of Foster Kids, and our own Deputy Attorney General,

to forge a relationship and start looking at some of the things that we could do to improve both CPS and the Family Court activities.

Partnering: I wanted the staff to learn that the community could be an ally and not a foe, and that when you are working as partners, you can go to the legislature together and say we need more resources. We had to do a lot of training and dialoging and getting people to come to meetings to see that partnering was really the best way to go. I think that over eight years the staff is much more willing to communicate with the private sector, to call on them for help and to see them as partners as opposed to competitors.

We set up a series of trainings on community collaboration and partnering so that supervisors would get some skills on how to make that happen. I think a lot of resistance really comes from the staff not feeling

confident and competent in what they're supposed to be doing.

In order to bring about change, we use the language of consultation so that the staff can come in and talk about various situations that they have and get some consultation about how to improve their practice.

We were committed to move our agency's offices out into the community. That was a very big message that not only are we talking about it, but we're going to do it. We started new offices out in the community and built collaborations with the community to receive us.

Communication: I would go into the units and talk about my vision and give the staff an opportunity to grouse about their concerns. I would see every person in child welfare, not just the section administrators, twice or maybe three times a year and go into their units and give them an opportunity to see what we were looking at and what we were trying to do and help with communication. We also moved ahead with an information technology initiative and got everyone on e-mail so that they could broadcast messages much more easily. We spent a lot of time improving our communication.

We also set up this thing called mahalograms. Mahalo is the Hawaiian word for thank you and we made these little note cards off of our own computers that said mahalo or thank you very much. They could be for very little things, just thanking somebody for always being there when the coffee is needed or – if I got a letter from a family saying this worker was really wonderful I would send that out as a mahalogram. But it wasn't just coming from the top, it was that the staff could send them to each other and throughout the CPS units they all could get these various kind of thank yous that made them feel like their work was being acknowledged.

Outcomes: We had one of the lowest adoption rates in the country. So, we went around to all the super-

visors and all the section administrators and said, "what are the outcomes that you're striving for?" Adoption didn't come up as one of the outcomes.

So I met again with the supervisors and said, "Well, it is an important outcome and it's something that we want to know about." We had many meetings to get people clear on what our variables were and what our outcomes were. In the area of adoption we literally stuck up banners in the office about how many kids were available for adop-

tion and how many we adopted that month. This was very unnerving to the staff at the beginning. But putting the data up on the wall, when you see the number 30 and you're trying to get to 300 and you've only done one that month it's a pretty visual way to engage people in meeting the objectives. I would go and visit the Adoption Office to talk about what are the barriers, what are the challenges, who do you need to help you, what can I do to help you get

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Managing budget shortfalls

Jess McDonald, Illinois: Actually good practice is your best budget strategy. In Illinois in our most recent year it cost less per case in the general welfare system than it did in '93. The difference is we have more kids proportionately in adoption and guardianship status as opposed to being in substitute care where the cost of the system is higher. So good performance is the key to dealing with budget crises.

Susan Dreyfus, Wisconsin: Be armed with your data. Have it on the tip of your tongue. You need to get people to see that the strength of the child welfare system and its ability to perform has an absolute connection to the deep end Medicaid and corrections expenses that are driving state budgets today.

The other thing is flexibility and creativity. The money we had was the money we had, but we knew there was always a way, and you cannot stop in terms of innovation, creativity, thinking outside of the box. There's no wrong idea. You have to find a way. You've got to leverage and create partnerships. You have to look at your budget, and identify where you need to take a calculated risk and make an investment which will pay off later.

Chuck Harris, North Carolina: We were determined not to let the fact that there were no new state dollars take our focus off of the vision.

It's the outcomes that tell the world what difference we make. For example, the number of children in foster care was decreased by a third during my eight years. The median length of stay in foster care went from over 540 days to 366 days. Those are things people can get their teeth into. You have to talk to people in those terms for them to understand that what we do really does make a difference.

Susan Chandler, Hawaii: I think you have to be even more collaborative. I would have these staff meetings with all the division administrators in the same room and show everybody all the division's budgets and make it a very transparent and open process. I would tell everyone that we needed to come up with reductions, and ask how we could do it. You have to work hard to keep up morale because everyone feels that it's tough for them.

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there? Sometimes it takes the director's time to talk with the staff and to hear very clearly what the barriers are.

One assumption that everybody was making in the adoption unit was that you need to make sure the record is perfect. And we kept saying, "How about let's get the child adopted and figure out your super paperwork later." Their training had been that the file was very important, more so than even the child getting adopted. We streamlined the adoption process, taking out papers we didn't need, and meeting with the judges to say, "Just because this piece of paper isn't there doesn't mean you should delay." We got to 300 adoptions from 30 in two years, and we were first in the nation with an increased rate of adoption.

In big agencies you probably can't have the director going around quite as much as I did, but if you get the message through to the division and the section administrators and they're asking, "Have you collected the data yet and do you know how they're doing in each unit?" And then, praise units that are doing better and try to provide a little more support to the ones that aren't there yet. There has to be kind of an ongoing, almost monthly assessment or things can get lost.

Family Group Conferencing:

The biggest thing that we did is to establish the family group conferencing model statewide. It seemed to fit very nicely with Hawaii's culture and with some of the things that we wanted to do around community-based initiatives. If you just have the abusing mother in the room, then you may not feel

particularly confident that this kid's going to go home to a safe environment and mom's not going to re-abuse or start using drugs again. But if you have her mother and her sister and her boyfriend and the minister and the Boy Scout leader and all kinds of other people in the room and they're all saying, "How are we going to keep this kid safe?", that's an intervention that is much more likely to work.

By 1998 we had done over 2,000 cases and now it is statewide. The model has become so popular that social workers ask the conferencers to come in on all kinds of cases. To make sure it didn't all fall apart when I left, we made it a law. The experience of family group conferencing is almost uniformly positive; the families like it and the staff likes it, and we're doing some research on outcomes right now and so far the data looks very good.

**Recommended Reading
On Leadership...**

Jess McDonald: Stewardship by Peter Block

Susan Chandler:
Within our Reach by Elizabeth Schorr

Social Administration: A Client Centered Approach by Charles Rapp and John Poertner.

Who Moved My Cheese? by Spencer Johnson.

Susan Dreyfus:
Good to Great by Jim Collins

When asked what advice they would give to new child welfare managers, all of the departing directors interviewed stressed the value of the peer networks fostered through the National Association of Public Child Welfare Administrators (NAPCWA), 810 First Street, NE, Suite 500, Washington, DC 20002 • Phone: 202-682-0100.

Agency Inventory and Assessment Tool

Introduction

The Agency Inventory and Assessment Tool will help child welfare agency administrators reach a deeper understanding of the ways that their agencies actually work by providing information on agency systems, practice principles and performance. While designed to be useful to all administrators, this instrument may be especially helpful to new administrators, administrators working with a new or revamped management team and administrators managing within a recently re-structured organization.

This instrument is organized into four distinct sections. The first poses a set of questions the answers to which should provide a reasonably detailed description of the agency's mission, structure, services and resources. The second section provides an opportunity for reflection on the principles that guide the agency's child welfare practice. Building on that descriptive foundation, the following section is intended to enable assessment and analysis of the results of the agency's efforts—the outcomes. The final section addresses issues in a manner intended to enable the development of conclusions about agency performance, where it is strong and where improvements may be indicated.

A. Descriptive Information

Mission

1. What is the mission of my agency? (Legal mandate, vision)
2. Who are the children, youth and families we serve?
 - Demographics
 - Socio-economics
 - Reason for entry into the system
 - Length of stay in the system
 - Manner of exit from the system

Structure

3. How is the agency organized? (Internally and externally)
4. What is the current political environment?
5. What is your administrative relationship within the Department in which you are located?
6. What other groups do you work with most closely?
 - Public Health
 - Mental Health
 - Juvenile Justice
 - Courts
 - Schools
 - Domestic Violence
 - Tribes
7. Who are your key stakeholders and community partners?
 - Faith Community
 - Foster and adoptive parents
 - Bio parents and extended family
 - Advocates
 - Providers
 - Consumers

Services

8. What are the programs and services provided? Are they delivered by the agency or by others?
9. Identify programs for which you contract.

Resources

10. What are the available resources throughout the agency?
 - Financial (e.g., annual budget, spending, performance contracts)
 - People (e.g., number, category, diversity, experience, education, certifications)
 - Information systems/technology (e.g., age, level and type of automation, reports available)
 - Space and equipment (e.g., offices, phone, personal computers)
 - Training (e.g., staff, administrative, provider)
 - Advisory groups (e.g., consumer groups)
 - Management and supervisory structure

B. Practice Principles

11. What are the principles that guide your agency's
 - case practice
 - managerial practice
 - community and systemic practice
 - relationships with stakeholders and partners
12. What are the indicators that tell you that these principles are alive in your work?

C. Performance Assessment and Analysis

13. What are the outcomes for which the agency holds itself responsible?
 - Children and Families (e.g., safety, permanency and well-being)
 - Process (e.g., timeliness of response, investigation completion, response to reports)
 - Systems (e.g., case review, quality assurance, foster parent recruitment)
14. What are the indicators by which you measure your agency's performance on each of the outcome areas?
15. What are the tools you use to measure performance?
16. Do you know how well you are doing with key areas you need to pay attention to?
 - creating a common vision throughout the agency and child welfare network
 - federal/state plans
 - legal requirements, lawsuits and court decrees
 - budget
 - contract monitoring
 - staff recruitment and retention
 - collaboration with community partners
 - cultural competency
17. What are key outsiders reporting about your agency's performance? (e.g., Child and Family Services Review report, audits, media, lawsuits, unions, legislative committees)
18. How does the agency use performance information to improve performance?

D. Next Steps/ Priorities/Assignment for follow-up

19. What are your priorities for action?
 - In what areas can the agency act on its own?
 - Where does the agency need help from others?
 - How does this priority support the agency's vision and mission?
 - Who is lead?
 - What is the timeframe?
 - What are the expected outcomes for each priority?
 - What are the steps and benchmarks?



The interviews with four recently departed child welfare directors in this issue of *Managing Care* provide an excellent jumping off point for a discussion of QA's role in supporting leadership priorities. All four directors noted the importance of using outcomes in setting agency priorities and making improvements. Their experiences highlight several lessons that QA staff in all states should consider.

Anticipate Leadership Priorities and Adjust QA Activities

QA staff should anticipate new or modified leadership priorities and support them through data and information collection, analyses, and presentations. QA staff may be used to analyzing data from their automated systems or collecting information through qualitative case reviews that focus on certain outcomes. However, if leadership priorities in the agency are going to change for some reason (e.g., new leadership or new priorities for existing leadership), QA staff should reexamine their activities. They may need to adjust some of their data collection or analyses to reflect new priorities, or even implement new QA initiatives. If they do not take these actions, the impact of their work will be less relevant and useful to the agency.

For example, many states have used their Child and Family Services Review (CFSR) Program Improvement Plans (PIPs) to emphasize key leadership priorities such as reducing permanency delays or improving assessment activities. As part of the PIP development process, states often have had to adjust their QA systems to measure the impact of various PIP activities. Some state QA systems with existing qualitative review components have added questions or modified their processes. Some states without existing reviews have begun to implement them as part of their PIPs. Similarly, many states have begun to analyze and distribute data that relate to CFSR outcomes among county or local offices on a regular basis to increase local ownership of outcome achievement.

Be Proactive During Leadership Changes

The PIP offers a timely example, but responding to child welfare leadership changes often presents a more difficult challenge for QA staff. Leadership commitment to quality is a critical component to QA having a positive impact in child welfare, and QA staff may need to win support among new leaders to guarantee this commitment. One strategic way of doing so is to be proactive as new leadership takes over. As new leaders begin to define their priorities for the agency, QA staff should make the case for how existing or new QA activities, analyses and reports can support these priorities and help staff throughout the agency achieve them. In addition, they should provide new leadership with responsive and understandable analyses and reports that will support them in their work. Susan Dreyfus, the former Administrator from Wisconsin, talked about convincing governors and legislators about the importance of quality assurance. An Administrator who tried to do so without some clear and convincing QA reports focused on her key priority areas would be at a tremendous disadvantage.

Help Staff Throughout the Agency Use QA Data and Information

Another critical implication of the former directors' comments is the importance of helping managers and staff throughout the agency understand and use QA data and information. Too often, QA reports may not be particularly useful to managers and staff. They may be so statistical, outdated, or focused on high level outcomes that staff do not know how to adjust their activities to affect them. For this reason, QA staff should take responsibility not only for producing reports, but also for helping staff use them.

In this role, QA staff will serve as "translators" in a child welfare agency. They should have an ongoing dialogue with staff about the content and implications of data and information presented in QA reports. Jess McDonald described presenting information on length of stay in Illinois back to field managers and asking them to help explain the numbers and create strategies for improvement. Similarly, QA staff can help county or local offices understand the results of qualitative reviews and determine systemic responses that will improve outcomes for children and families. As translators, QA staff should consider the data collection, analysis and presentation process as an iterative one in which they engage continuously with staff throughout the agency (from the leadership to front lines). Only an iterative process will result in responsive information and reports that will help those staff improve their work and ultimately the outcomes for children and families.

As always, please let me know if you have any questions or comments.

Thanks, Peter
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Resources

Teleconferences

Audiotapes and handouts available from the Resource Center Clearinghouse at 1-800-HELP-KID or at www.muskie.usm.maine.edu/helpkids

- Creating Excellence in Child Welfare Leadership: September 17, 2002. This program highlighted the leadership training being offered under the Excellence in Child Welfare Leadership Program at the American Public Human Services Association, and representatives from Arizona discussing their participation in this training
- Managing Child Welfare in a Time of Limited Resources: May 20, 2003. This session featured two state child welfare directors discussing strategies for managing agencies during times of budget uncertainty.

Bringing Together the Child Welfare Team: This is a curriculum designed to enhance the capacity of child welfare managers and supervisors to implement the mandates of the ASFA. It includes modules that agencies can use to lead managers through an examination of agency goals and outcomes, the development of action plans and the use of data reports within the agency. Available at <http://www.muskie.usm.maine.edu/asfa>.

We'd like to hear from you!

We continue to produce *Managing Care* on a regular basis, and would like to know what you think. Did you find this issue to be useful? Do you have suggestions for how we could improve the publication? Are there topics you would like us to address? Please e-mail comments to: patn@usm.maine.edu.

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