Ohio Alternative Response Pilot Project
Final Report of the AIM Team: Executive Summary

Prepared by: Caren Kaplan, ACSW and Amy Rohm, MSW, American Humane Association
Introduction

The Final Report and Evaluation of the Ohio Alternative Response Pilot Project (Pilot Project) is the culmination of an 18-month (July 2008 - January 2010) pilot study of 10 Ohio counties — Clark, Fairfield, Franklin, Greene, Guernsey, Licking, Lucas, Ross, Trumbull, and Tuscarawas — that designed, implemented, and evaluated an alternative response approach to accepted reports of alleged child abuse and neglect. The Supreme Court of Ohio (SCO) and the Ohio Department of Job and Family Services (ODJFS) conducted a competitive proposal process to select project consultants to guide the pilot planning and evaluation processes. The AIM Team (American Humane, Institute of Applied Research, and Minnesota Consultants), the selected project consultants, offers this Executive Summary of recommendations and findings that are discussed in full in the Final Report of the AIM Team. The Final Report and Evaluation were presented to the Supreme Court of Ohio’s Subcommittee on Responding to Child Abuse, Neglect, and Dependency (Subcommittee) on April 7, 2010. The report and three supplementary reports on the evaluation, the statutory/rule framework, and the project chronicle detail the activities, evaluation, and analysis of the Pilot Project.

Project Summary

The Ohio Advisory Committee on Children, Families, and the Courts (Advisory Committee) was appointed by Chief Justice Moyer\(^1\) of the Supreme Court of Ohio to make recommendations regarding family law initiatives. A Subcommittee on Responding to Child Abuse, Neglect, and Dependency (Subcommittee) was established by the Advisory Committee to:

- determine if Ohio’s statutory guidelines for the investigation and prosecution of child abuse and neglect properly serve children and families in need of government intervention;
- make statutory and administrative recommendations to improve Ohio’s system for accepting and investigating reports of child abuse and neglect; and
- make recommendations to standardize and make uniform Ohio statutes regarding abuse, neglect, and dependency cases.

Since 2004, the Subcommittee has participated in ongoing efforts to develop and implement recommendations to improve Ohio’s system for accepting and investigating reports of suspected child abuse and neglect. One of the fundamental components of the Subcommittee’s recommendations in its *Final Report to the Advisory Committee on Children, Families, and the Courts*\(^2\) was to initiate an “Alternative Response” child protection model in Ohio.

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\(^1\) Chief Justice Moyer passed away unexpectedly on April 2, 2010. His leadership was ultimately responsible for AIM’s Alternative Response Pilot Project in Ohio. His passing is a significant loss to the State, Court, and child advocates everywhere.

\(^2\) National Center for Adoption Law and Policy and American Bar Association Center on Children and the Law. (January 18, 2006). *Final Report of the Subcommittee on Responding to Child Abuse, Neglect and Dependency*. [Supreme Court of Ohio: Columbus, Ohio].
Specific recommendations included: (1) statutorily authorized dual investigative and family assessment tracks; (2) criteria that would mandate an investigation defined by administrative rule; (3) strong alternative response screening, risk, and safety assessment processes; (4) provision to allow for re-tracking of cases; (5) established timeframes for initiating and completing a family assessment; and (6) a rigorously designed pilot program.

The Committee accepted the recommendations of the Subcommittee, including the recommendation to field-test and evaluate the value of an Alternative Response (or “differential response”) System in Ohio.

Statutory authority for up to 10 pilot sites was enacted on June 21, 2006. Ohio Senate Bill 238 authorized the Alternative Response Pilot Project in Ohio. The bill specified that this pilot be independently evaluated over an 18-month period in a maximum of 10 Ohio counties. The pilot was to measure child and family well-being, fiscal impact, caseworker satisfaction, family satisfaction, and any potential impact on Child and Family Service Review or judicial system outcomes resulting from the new model.

The AIM Team initiated its work on the Pilot Project on June 1, 2007 and on September 13, 2007, the abovementioned 10 counties were selected as pilot sites in response to a competitive Request for Application process. On July 1, 2008, all of the pilot sites, with the exception of Franklin County, launched their alternative response system. Franklin County launched on August 1, 2008.

The evaluation of the Pilot Project began in July 2008. The evaluation was designed as a field experiment (i.e., randomization of cases). Families determined to be appropriate for alternative response had a 50/50 chance of receiving an experimental alternative response assessment or a control traditional response (investigation). Random assignment to the experimental and control groups occurred between July 2008 and the end of September 2009. Follow-up data collection from the State Administered Child Welfare Information System (SACWIS) was extended through the end of January 2010. By the conclusion of data collection, 4,822 families had been assigned to alternative response: 2,482 families (51.5%) to the experimental group and 2,340 (48.5%) to the control group.

**Findings and Recommendations**

The following abbreviated findings and recommendations of the Pilot Project are organized into eight categories by the primary area of impact and/or responsibility: State (including statutory/rules framework), State-county partnerships, county and community, families and children, workers, practice, procedures and tools, and other considerations.

**Statewide Implementation**

The findings of the Ohio Alternative Response Pilot Project and the AIM Team indicate that Ohio should develop a comprehensive plan and proceed with the adoption of alternative response in all 88 counties. This developmental and incremental process must provide continued evidence
of ongoing State, county, and local leadership and the promotion and support of the alternative response approach, both systemically and in child welfare practice, as a foundation for success and sustainability.

**Guidance for the State of Ohio**

- The State should capitalize on the experiences of the initial 10 pilot counties by enhancing their capacity to mentor new alternative response counties prior to expansion.
- The availability of flexible monetary resources is to be maximized and used, as appropriate, in responding to families’ needs.
- In a workgroup of diverse stakeholders, establish agreement on what constitutes SACWIS functionality as it pertains to Ohio’s Alternative Response System, develop a time-sensitive plan for those modifications, operationalize the modifications, and close the loop by checking back in with end users to ensure that functionality was attained.
- Dedicate efforts to ensure the evidence and proliferation of quality leaders at the state, county and local levels who promote and support the alternative response approach both systemically and in child welfare practice as a foundation for success and sustainability.

**Training Requirements**

- Priority must be given to upfront discussion and training on the management of change, implementation science, and the operations and practice of Alternative Response.
- The delivery of training related to alternative response should be driven by the *Alternative Response Fundamentals in Support of Ohio’s Child Protection Practice Model*. The *Fundamentals* document should also drive supervision and be used to answer the question ‘how are we doing?’ by obtaining family-feedback that assesses whether these fundamentals were observed or attained.
- Agency training should be directed at all staff, not just those who will be doing alternative response. In order to promote widespread understanding and buy-in of alternative response, training should not be limited to the “doers” of alternative response, but should include all that have any role in child protection agency functions.
- Invest in immersion experiences or other cross-jurisdictional learning opportunities.
- Fully integrate alternative response into Ohio Child Welfare Training Program (OCWTP) training curricula and coaching.

**Summary of Statutory and Rule Recommendations:**

- An implementing statute directing phased-in statewide adoption of a differential response approach under a specified timetable should be added to the Ohio Revised Code (ORC). This provision should include the establishment of differential response as Ohio’s child protection practice approach and specify two differential response pathways: “Family Assessment Response (FAR),” representing the pathway that is now referred to as
“Alternative Response,” and “Investigative Assessment Response (IAR),” representing the pathway that is currently referred to as “Traditional Response.” This provision should contain a clear statement of the philosophy underpinning a differential response approach, as well as a preference for the FAR approach in cases not requiring an investigative approach in order to preserve child safety and well-being.

- The ORC should be amended to include clear definitions for Ohio’s differential response child protection approach and the FAR and IAR pathways used under that approach.
- Consideration should be given to amending the ORC to allow for greater flexibility in relation to juvenile court jurisdiction and case planning in cases assigned to the FAR approach in specified circumstances, without the necessity of reassigning the case from an assessment to an investigative response pathway.
- Ohio’s child abuse and neglect reporting statute (ORC § 2151.412) should be amended to add an exception to the 24-hour investigative response directive applicable to reports of abuse or neglect to allow for an assessment response for cases assigned to the FAR pathway within the timeframe set for response in FAR cases.
- The ORC should be amended, in the context of the differential response approach, to provide for certain types of reports to receive mandatory assignment to the IAR pathway, including reports of physical abuse that result in serious injury or that creates a serious and immediate risk to a child’s health and safety; sexual abuse; a suspicious child fatality; and reports requiring specialized assessments, third-party investigations, or involvement of a child advocacy center. Other reports should be statutorily authorized for assignment to FAR or IAR at the discretion of the public children services agency (PCS A).
- Core practice in FAR cases should be outlined in a new section based in part upon Ohio’s Alternative Response Pilot Project interim rule language and, in part, on the statutes of other alternative response/differential response states, should be added to the ORC.

**State-County Partnership**

- The State needs to be supportive and respond more as a partner with counties, rather than as the entity with authority, in pursuing, implementing and sustaining this practice shift.
- A parallel process needs to be emphasized by all agencies and individuals involved.
- Regional technical assistance specialists and policy staff should be engaged early in the planning process for expanded implementation.
- A specific plan should be created to support the professional development of ODJFS policy staff and technical assistance specialists through ongoing coaching, mentoring, and training opportunities in the current 10 pilot counties and/or new counties going forward.
- A child welfare quality assurance process should be established that is distinct from the Child Protection Oversight and Evaluation review process.
• Ongoing forums should be convened to support networking, communication, and problem solving among counties engaged in alternative response and State staff. In-person meetings for pilot county alternative response workers and supervisors should be conducted quarterly and perhaps scheduled regionally.

• Sufficient opportunity should be provided to review early decisions made by the Leadership Council in light of the more than 18 months of implementation experience. It is important to fully capitalize on the experience of the pilot counties by establishing a thorough review process to guide planning in advance of broader implementation.

**Technical Assistance from the State to Counties**

• There is a need to create more capacity and defined roles at the State level related to practice shift. Technical assistance currently exists around compliance based aspects such as policies, rules, tools, SACWIS, and timeframes.

• The capacity and competencies of eight regional training centers (RTCs) of the OCWTP should be developed to identify and respond to the needs of counties that are developing and implementing the alternative response approach. Each RTC must collaborate with its constituent agencies regarding the identification of training needs, the implementation of training, transfer of learning, and other training-related issues relevant to alternative response.

• The State will need to assume responsibility for the in-person meetings. These should be done regionally and offered quarterly. There is a need to build capacity and trust between county staff and State representatives. Co-leadership by a county person and a regional or State staff person is one vehicle to build this relationship.

• The Leadership Council should continue to have quarterly meetings, with the State’s involvement and support. The membership of the Leadership Council will change as alternative response grows, both by the number of involved counties and the tenure of practice.

**County and Community**

• Alternative response must be presented as one of two or more viable responses to screened-in reports.

• Stakeholders/partners are to be involved early and often.

• Particular education/engagement needs to be targeted to professionals and stakeholders with formal roles in the child welfare system — judges; agency, parent, and child attorneys; foster parents; and law enforcement.

• Stakeholders need to be educated about the families that will be served better through this kind of an approach, i.e., cases that have been unsubstantiated through investigation and are typically of low or moderate risk of harm (the vast majority of cases).
• The entire community needs to support the safety of children; it is not something children services agencies can do alone.
• From the beginning to the end of the pilot, there was an increase in the positive community perception of the relationship between child welfare workers and the families they serve.

**AIM Team Findings: Families and Their Children**

**Family Attitudes and Engagement**

In terms of evidence that supports improved/increased engagement between family caregivers and workers with the alternative response approach, the evaluation documented that families who received an alternative response approach more frequently felt the following: optimistic; encouraged; positive; grateful; reassured; comforted; thankful; pleased; helped; hopeful; and relieved.

The consistency of responses across all the positive emotions supports the conclusion that families receiving an alternative response family assessment felt more positive about the experience overall than traditional response families.

**Family Engagement**

In the area of family engagement, alternative response led to the following:

- More positive emotional responses to the first contact with workers.
- Fewer negative emotional responses to the first contact with workers.
- Greater satisfaction with workers: Families were more likely to state that they were *very satisfied* with treatment by their worker and more often reported that their worker *very much* understood their situation and needs.
- Greater sense of participation in decision making: Involvement in decision making increased under alternative response; 13% more alternative response families than control families felt a great deal of involvement in decisions about their family.

In the area of services to families, alternative response led to the following:

- A significant increase in basic services related to poverty.
- A significant increase in counseling and mental health services.
- Improved satisfaction of families with the help they received.
- An increased sense of the sufficiency and appropriateness of services received.
- An increase in information provided to families about services from other sources.
- An increase in direct help provided by workers to families.
The improvements in family engagement and services are prerequisites for the emergence of other longer-term positive outcomes concerning child safety and family welfare.

**Re-Reports and Child Removals**

- Alternative response appeared to reduce the number of child removals and out-of-home placements.
- Within the Pilot Project control group, 3.7% of children had been removed, while 1.8% had been removed in the experimental group.³
- The major positive effects of alternative response on new reporting of child maltreatment have occurred among minority families.

**Workers and the Agency**

- The majority of workers involved with the Pilot Project found that alternative response positively affected their approach to families.
- Most workers saw families as being more cooperative when they are served through alternative response
- Most staff involved with the alternative response pilot felt that the alternative response approach would have a positive effect on families even if additional funds for services were not available.
- Nearly 40% of staff involved in alternative response stated that alternative response has encouraged them to stay in the field of child welfare.
- Launching this work with a unionized workforce is likely to complicate the process, but in no way are the situations encountered deleterious or insurmountable. The wisdom of building a relationship between the union and non-unionized staff is of paramount importance.
- The ability to capture data and enter it in SACWIS is crucial. Creating a separate method to track alternative response cases magnifies the difference between worker responsibilities, adds to workload burden, and increases confusion that may lead to data entry errors or omissions.
- Peer champions can be enlisted to help craft and communicate the message about alternative response going forward with new workers. In several instances, workers

³ The experimental and control groups have been shown to be highly comparable on a variety of grounds. However, 93 experimental families were known to have had pathway changes and were subsequently removed from the analysis. It was thought that this procedure might have been an issue for child removals, since no comparable control families could be removed. To determine this, the families with pathway changes were re-entered into the present analysis. The rate remained significantly lower in the experimental group. The analysis shown here does not include families with pathways changes.
underscored the need to learn by example through peer discussions and shadowing, as well as in-the-field coaching.

**Practice Recommendations**

- *Whenever feasible*, it is recommended that workers carry either alternative response or traditional response cases and not (unless requested by the worker) carry mixed caseloads.

- Likewise, whenever feasible, supervisors should supervise either alternative response staff or traditional response staff, rather than a combination of both.

- It is essential to build on efforts to enhance supervisory support. Supervisors are a critical linchpin in quality of practice within agencies. Supervisors have a key role in modeling the parallel process for their workers as they ask questions in a new way, listen actively, openly accept that they do not know all the answers, and remain open to the ‘possibility’.

- A ‘commitment’ and plan must be made by the State to examine the impacts of alternative response on the workloads of workers and supervisors. A workload study is recommended at the conclusion of three years of alternative response experience to inform county agencies and state policy regarding the amount of time required to do this work and compare with the evaluation findings. The results of the workload study should be examined and recommendations, if feasible, should be carried out.

- Alternative response workers tended to hold cases open longer than traditional response workers did; the average number of face-to-face and telephone contacts was significantly higher for workers serving experimental families.

- In order to adhere to the fundamental tenets and foundational elements of alternative response practice, sufficient time must be available for workers to engage with families. In partnership, workers and families conduct an assessment, develop a service plan and determine what is working well and amend that which is not working well. If fidelity to the practice increases the amount of time devoted by worker, this will impact case staffing decisions for the entire agency as well as resources required to “do it right”. The recommended workload study will increase understanding of the structural and operational implications of alternative response staffing and practice.

- Compared to frontline workers, there was often less understanding of the practice changes by supervisors and a lag in understanding by State policy staff. It was challenging not to view this as a passing fancy of the child welfare agency. Acknowledging its endurance, alternative response is best understood when changes in the way families are treated, participate, and respond are observed.

\(^4\) AIM Team acknowledges that there are many instances in which the feasibility of this option does not exist. Smaller counties are unlikely to have the staff capacity to ‘specialize’ in this way. The flexibility inherent in the approach is responsive to the specific characteristics of particular jurisdictions. The lack of feasibility to have alternative response–dedicated workers is not to be interpreted as an impediment to quality practice.
• Ongoing exposure to the practice by those indirectly involved in the day-to-day work is essential. In particular, individuals at the State agency and legislative levels — administrators, policy staff, and legislators — should all be provided with periodic opportunities to observe this practice with families.

• Ongoing technical assistance on alternative response from the State to pilot counties is essential:
  o Supervisors should set an expectation and periodic practice of accompanying supervisees (i.e., workers) on their field work with families.
  o Group case consultation\(^5\) within and across units should be encouraged and ultimately institutionalized.
  o Education and/or training must be provided to PCSA workers and supervisors on the philosophy behind and mechanics of group case consultation.

Procedures and Tools Recommendations

The quality of child protection practice is optimized when there is a goodness of fit between the tools and the practice. Simple is key. The focus must remain on what makes sense to families while also making sure that what needs to be reported in response to agency mandates.

Pathway Assignment Tool

• Involve the local pathway assignment decision makers in the revision process of the Pathway Assignment form. The revised tool should then be tested and, afterward, integrated into SACWIS intake screens\(^6\). Without predetermining the content of items, the present analysis suggests that the following topics should be considered with an item or several items constructed to accommodate them.

Mandatory Items for Traditional Pathway

1. Allegations of serious harm to a child (multiple items, if necessary as discussed above).
2. Allegations of sexual abuse of a child
3. A suspicious child fatality or homicide
4. Need for a specialized assessment
5. Need for a third party assessment

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\(^6\) The integration of the Pathway Assignment Tool into SACWIS is the recommendation of the AIM Team. The Leadership Council did not agree with this recommendation and preferred to keep this tool out of the SACWIS system.
**Discretionary Items**

1. Currently open traditional assessment
2. History with agency: types of past reports makes an AR family assessment inappropriate
3. History with agency: lack of cooperation makes an AR family assessment inappropriate
4. Legal: Law enforcement involvement occurred or is likely
5. Legal: Previous child harm offenses charged against the perpetrator
6. Legal: Past or present criminal activity makes an AR family assessment inappropriate
7. Substance abuse makes an AR family assessment inappropriate
8. Mental health and emotional stability concerns make a TR assessment necessary
9. Other risky conditions make a TR assessment necessary (specify)
10. Past unresolved maltreatment concerns make an AR family assessment inappropriate

- The terms “inappropriate” and “appropriate” in the descriptions of discretionary items must be explicitly defined in accompanying instructions; these items should not exclude a family from an assignment to the alternative response pathway.
- Pilot counties should have the ability to reassign cases in both directions; that is, alternative response pathway to traditional response pathway and traditional response pathway to alternative response pathway.

**Family Service Plan**

- Use of the existing Family Service Plan should continue; a workgroup of county and State staff should be established in the near future to explore options in the use of existing CAPMIS tools with selected modifications to increase effectiveness in the alternative response approach.
- Experience with the Family Service Plan indicates that it requires “revisiting” before the expansion of alternative response.
- The State, in collaboration with the Leadership Council, should form a workgroup to address practice tools and determine what requires SACWIS modification.

**Timeframes**

- To the extent reasonable and appropriate, align the timeframes of alternative response and traditional response to minimize confusion and perceived disparities among workers. Timeframes for face-to-face visits, completion of safety assessments, and completion of Family Assessments are some examples.
- All timeframes should be examined with an eye on caseload and workload implications. Alternative Response requires in-depth work with families at the front end of the child protection system. The goals of family engagement and relationship are paramount from the initial point of contact with the agency.
Other Considerations

- Child safety is not compromised. In Ohio, the overall distribution of change in child safety was similar for experimental and control families, with no statistically significant differences. This finding indicates that child safety was not lessened or compromised by the introduction of the alternative response family assessment approach.

- Alternative response is about building relationships with families.

- Full indirect costs were slightly more expensive for alternative response. At this point in the follow-up, experimental families were slightly more expensive ($85 per family) overall in indirect costs than control families.

Based on these recommendations and findings, Ohio will initiate the adoption of a statewide child protection system that provides at least two responses to families who come to the attention of the CPS agency.