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Progress Together

Los Angeles County Department of Children and Family Services (DCFS) Risk Stratification Pilot

Implementation Monitoring: Feedback and Results

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Overview of Risk Stratification Pilot

- / Pilot was co-designed with LA DCFS, intended to support enhanced supervision, early engagement and more collaborative practice for investigations where stakes are high
- / Risk Stratification tool is used to designate investigations that would benefit from enhanced support (ES) based on history of contact with the child protection system and current allegations
- / Pilot included flag for investigations designated for enhanced support on “Open Referrals by Days Open” report and a new summary of data for supervisors, “Investigation Overview Report”



Implementation Highlights

- / Pilot was administered in the Belvedere, Lancaster and Santa Fe Springs regional offices.**
- / Prior to launch, supervisors in each office received training on the pilot applications as well as a menu of strategies and practices that could be used with investigations recommended by the model for enhanced support.**
- / Regional Administrators/Supervisors were given flexibility to adopt strategies that best suited their individual offices.**



Context

/ **The point-in-time number of ES investigations per supervisor during the pilot, was:**

- Belvedere: average 1 investigation, max 4 investigations
- Lancaster: average 2 investigations, max 5 investigations
- Santa Fe Springs: average 1.5 investigations, max 7 investigations

/ **During the pilot period, 7.7% of investigations (151) in the pilot offices involving 9.6% of children (408) were designated for enhanced support**

- 8.4% of investigations in August
- 7.7% of investigations in September
- 7.1% of investigations in October

Executive summary of conclusions from monitoring the Pilot

- ❖ What did we learn?
- ❖ What do we recommend?



What did we learn?

- / **Pilot offices ranged in how much oversight was conducted for enhanced support investigations**
 - No changes to practice were noted by some, whereas others reflected a high level of consultations and oversight. (One office tracked consultations while another tracked service referrals on ES investigations.)
- / **There was a range of experiences with the risk stratification pilot – some indicated a clear benefit while others indicated ES had no real impact on how they supervised.**
 - One clear exception was the mixed sentiment from some that ES was beneficial to caseworker and outcomes, but that these investigations required more time and reduced availability on other investigations
 - Most supervisors found the new reports helpful and many offered ideas to enhance them
- / **Reviews about the pilot were more positive among supervisors and workers who were actively supervising ES investigations and/or experienced a higher level of staffing/teaming on these cases**



What do we recommend?

- / **Establish clear protocols for enhanced support investigations that include consultations and/or a staff teaming model**
- / **Consider how to allow emergency response CSWs more time/capacity to investigate and coordinate services for ES referrals**
- / **Evaluate options to include additional data fields and alerts as requested by staff who use these reports**
- / **Engage CQI team to conduct quality case reviews to further assess impact of ES protocol (in addition to the effort as part of the racial equity feedback loop)**



Objectives and Learning Questions

/ Goal to **collect feedback on implementation and inform a decision whether and how to scale the project**

/ **Learning questions**

- Early focus: Is the technology being utilized and are staff having questions or challenges using it?
- Later focus: What practices are being shaped in the pilot offices? What is the perceived value from Emergency Response (ER) supervisors (SCSWs) and children's social workers (CSWs)?



Approach and Methods

- / **Three cycles of feedback**, staged from early implementation issues to supervisor experience to social worker's perception
- / **Data collection methods**: pulse surveys, focus groups, stakeholder meetings, and feedback from regional administrators and other leaders during weekly Risk Stratification Pilot check-in meetings



Jul 2020 – July 2021 (Pre-pilot)			Aug 2021	Sept 2021	Oct 2021	Nov 2021
Jul 2020 - Jul 2021			Aug 2nd Pilot begins	Sept 3rd First pulse survey to all ER supervisors		
Policy and ER supervision process review Co-design meetings with DCFS Planning for implementation monitoring and feedback Feedback from community (e.g. Community and Parent Town Halls, Meetings with County Agency Partners/Providers)			Aug 19th Initial technological changes implemented	Sept 22nd Santa Fe Springs supervisor focus group & pulse survey	Oct 21st Lancaster supervisor focus group and pulse survey	Nov 18th CSW focus group
			Aug 26th ERDD Advisory Workgroup meeting		Oct 27th Belvedere supervisor focus group and pulse survey	
May 2021 - End						
Ongoing weekly / biweekly check-in meetings						

Feedback

- ❖ User experience with the technology
- ❖ Supervision practice
- ❖ Staff perceptions about the Risk Stratification Pilot



User Experience with the Technology



The Risk Stratification Pilot involved two technology applications:

/ **Open Referrals by Days Open Report**


- A flag was provided to supervisors overseeing emergency response investigations, alerting them to a new investigation that the model had classified for enhanced support

/ **Investigation Overview Report**

- An investigation history report that summarizes information that can be time consuming to assemble through the existing case management system



(Pilot version) Open Referrals by Days Open report



Los Angeles County
Department of Children
and Family Services

Select Office

All

Select SCSW

All

Select CSW

All

Open referrals by days open report
Data current as of X

To view the investigation overview, first click a referral number and then click this button

VIEW INVESTIGATION OVERVIEW

SCSW Name	CSW Name	Referral No.	Referral Name	Ref. Response Type	Referral Date	Child Name	Enhanced Support	Gender	Age	First Referral Contact Date	No. of Days	# of Completed In-Person Contacts	# of Attempted Contacts			
SCSW 1	CSW 1	1111-1111-1111	Family Name 2 - 5 Day	5 Day	1/28/2021	Child Name 3		F	14	2/2/2021	28	1	1			
						Child Name 4		F	12	2/2/2021	28	1	1			
						Child Name 5		M	5	2/2/2021	28	1	1			
						Child Name 6		M	5	2/2/2021	28	1	1			
						Child Name 7		M	2	2/2/2021	28	1	1			
		2222-2222-2222	Family Name 3 - 5 Day	5 Day	3/6/2021	Child Name 8		F	14		3	0	0			
		3333-3333-3333	Family Name 4 - 5 Day	5 Day	2/13/2021	Child Name 10	Recommended	F	12	2/18/2021	14	1	0			
						Child Name 11	Recommended	M	5	2/18/2021	14	1	0			
						Child Name 12	Recommended	M	5	2/18/2021	14	1	0			
						Child Name 13	Recommended	M	2	2/18/2021	14	1	0			
						Child Name 9	Recommended	F	14	2/18/2021	14	1	0			
		4444-4444-4444	Family Name 5 - 5 day	5 Day	2/9/2021	Child Name 14		F	6	2/12/2021	25	1	0			
						Child Name 15		M	5	2/12/2021	25	1	0			
						Child Name 16		F	7	2/12/2021	25	1	0			
		5555-5555-5555	Family Name 6 - 5 Day	5 Day	2/16/2021	Child Name 17		M	3	2/20/2021	14	1	0			
						Child Name 18		F	8	2/20/2021	14	1	0			
	CSW 2	6666-6666-6666	Family Name 7 - 5 Day	5 Day	2/3/2021	9999-9999-9999	Family Name 1 - IR	5 Day	3/3/2021	Child Name 2	F	4	3/3/2021	6	1	0
						Immediate	3/3/2021	Child Name 1	M	0	3/3/2021	6	2	0		
						Child Name 19		F	1	2/7/2021	27	1	0			
						Child Name 20		F	7	2/7/2021	27	1	0			



Investigation Overview Report

Los Angeles County Department of Children and Family Services

Click this arrow to return to the list of all referrals

Referral Number
0440-5750-3500-

Enhanced Support

Select to view data

☐ M, Age 6

☐ M, Age 14

Other People on Referral

M, Age 38

F, Age 38

Indicators of Risk

Referral closed as "unable to locate"

Child w/ mental health svc referral

Adult w/ maltreatment as a minor

See something on this page that's out of the ordinary or likely inaccurate? Report it and we'll take a look!

REPORT ISSUE

LA County History for Child ID -

Referrals / Allegations

☒ EVER

☐ WITHIN THE LAST YEAR

	ALLEGATION TYPE	CURRENT REFERRAL	PRIOR (ALL)	PRIOR (SUBSTANTIATED)	PRIOR (INCONCLUSIVE)
PRIOR REFERRALS EVER					
6	Sexual Abuse		0	0	0
	Physical Abuse		6	2	3
	Severe Neglect		1	1	0
	General Neglect		9	2	5
PRIOR SCREENED-IN REFERRALS EVER					
6	Exploitation		0	0	0
	Emotional Abuse		4	0	2
	Caretaker Incapacity		2	2	0
	At-risk Sibling		2	1	0
	Total		24	8	10

Cases

CURRENT OPEN CASE	PRIOR OPEN CASES	LAST CASE CLOSURE DATE	LAST CASE CLOSURE REASON
No	2	2/5/2001	-

Placements

CURRENT PLACEMENT	PRIOR PLACEMENT EPISODES	LAST EPISODE END DATE	LAST EPISODE END REASON
No	2	8/18/2017	Reunified with Parent/Guardian (Court)



Early issues and recommendations

/ **Issues reported by users**

- Difficult to track clients due to lack of client name
- Font size too small
- Inability to export to Excel
- Slow and/or glitchy
- Reports were not as easy to navigate as another highly utilized application (ERIS)

/ **Recommendations**

- Include race of all individuals on the referral to support ERDD Roundtable work
- Add enhanced support designation to other tools (e.g. SafeMeasures)
- Adopt a user interface more akin to ERIS
- Additional ideas for “alerts” on the Investigation Overview Report
- Request for management reports
- Request for email alerts when ES referrals are received for clients with existing open investigations
- Add enhanced support flag to CWS/CMS



Changes implemented in August

- / New version of the Investigation Overview Report was released with larger font sizes and names of individuals on the referrals (instead of Client ID numbers)**
- / Updated the piloted version of the “Open Referrals by Days Open” report to include an Excel download feature**
- / Began work to design a management report**



Reactions to implementation changes

Addition of names

- Most respondents thought the change was an improvement (71%)
- A few respondents indicated they were still struggling with this (21%)

Increased font size of report text

- Most respondents thought the change was an improvement (79%)
- Two respondents indicated they were still struggling with font size (14%)



Reactions to implementation changes, cont.

Excel download option

- Most respondents thought the change was an improvement (62%)
- Two respondents indicated they were still struggling with this (15%)

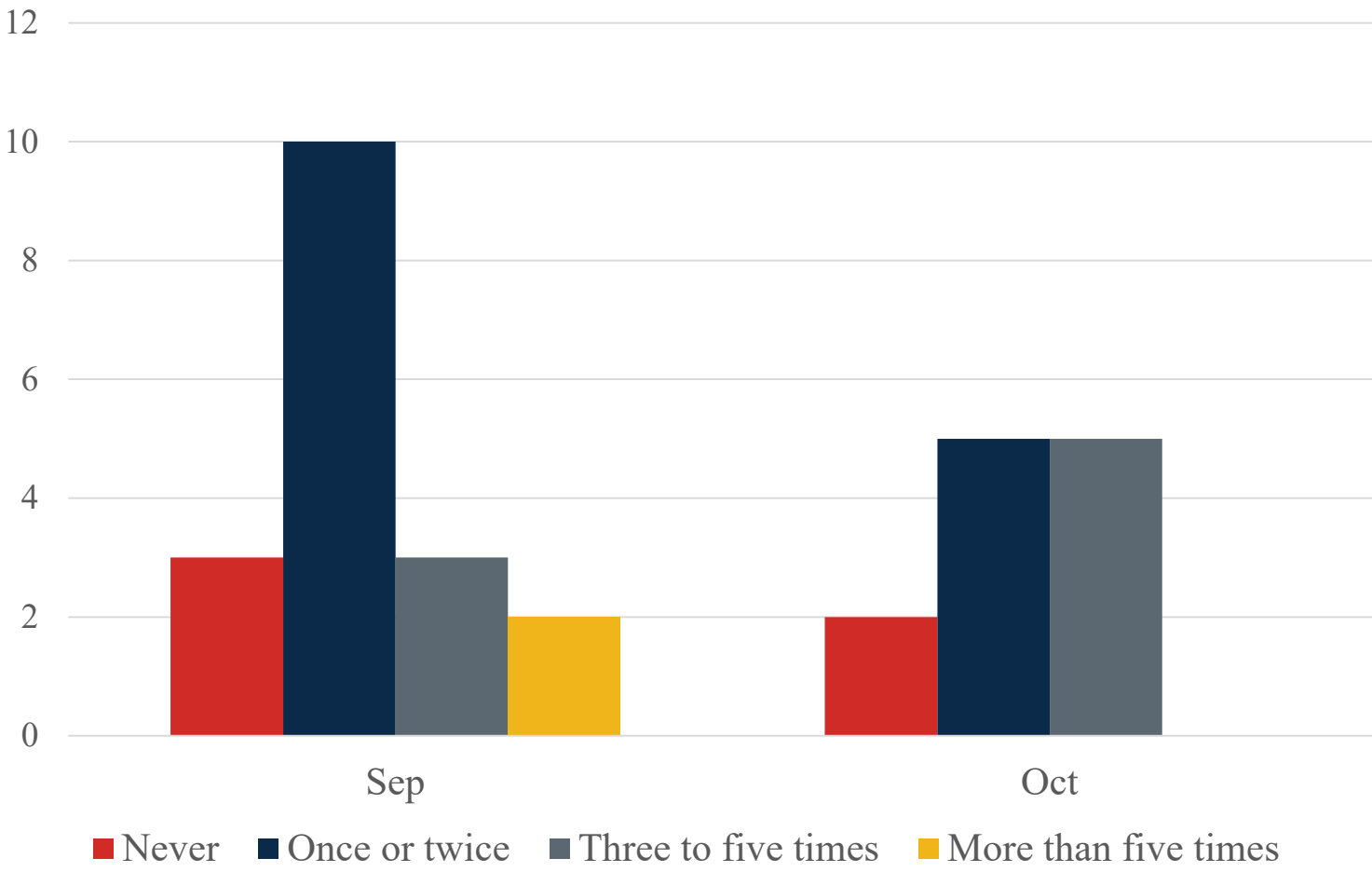
Report speed

- Most respondents thought the change was an improvement (77%)
- Two respondents indicated they were still struggling with this (15%)



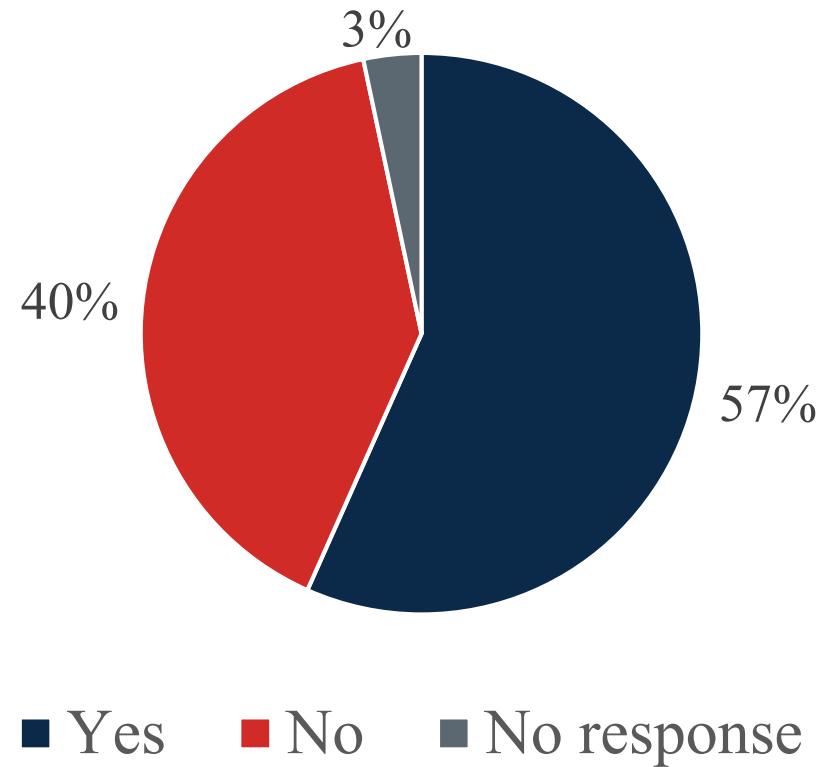
Most respondents accessed the “Open Referrals by Days Open” report

/ **83% of respondents had accessed the report when surveyed in September and October**



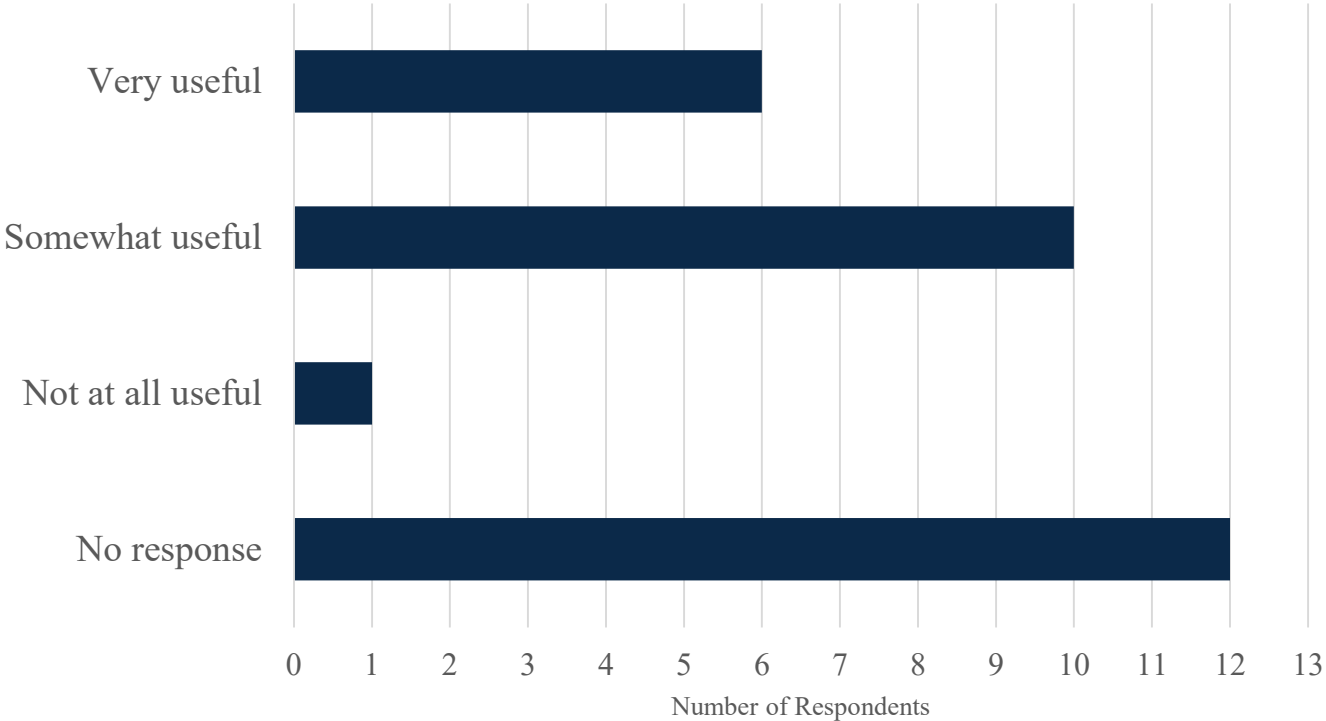


57% of respondents had supervised at least one enhanced support referral over the past week



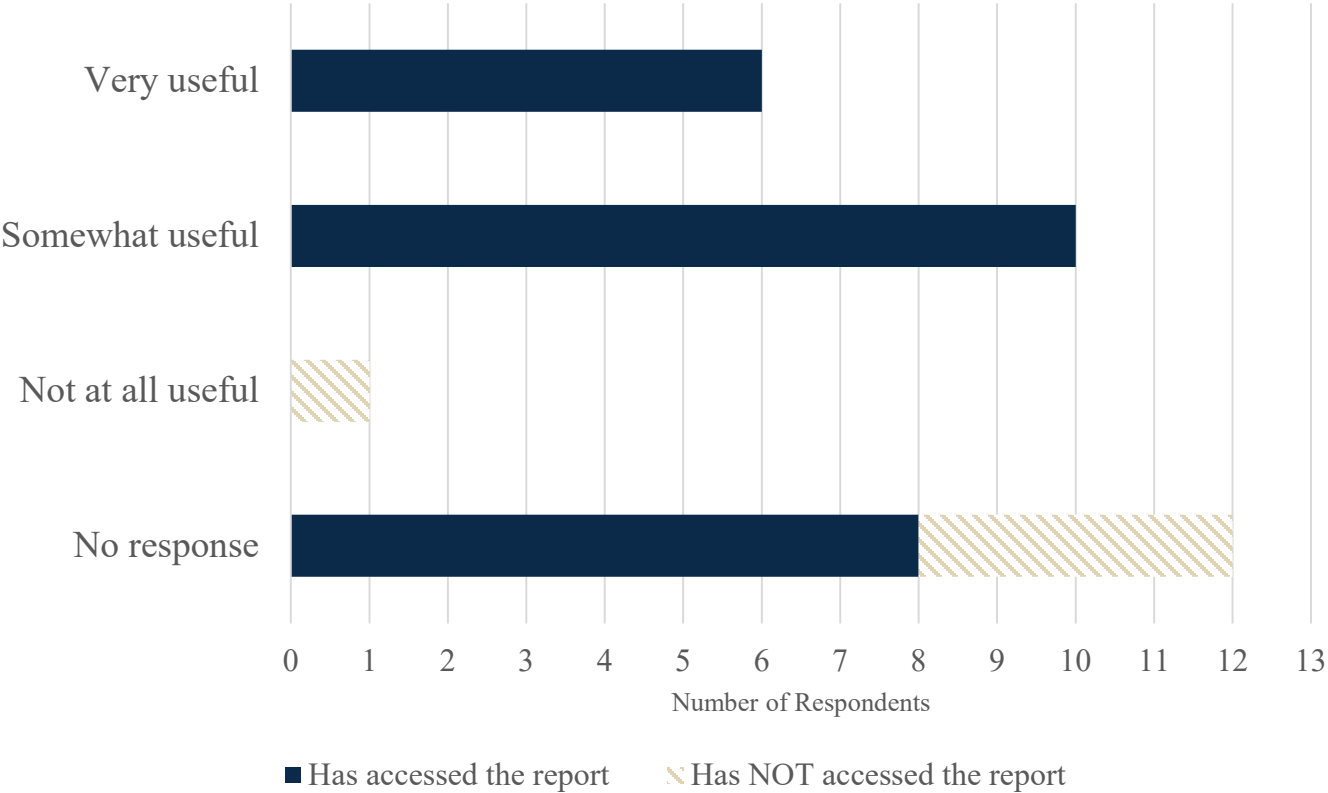


How useful was the “Open Referrals by Days Open” report (pilot version) for tracking enhanced support investigations?



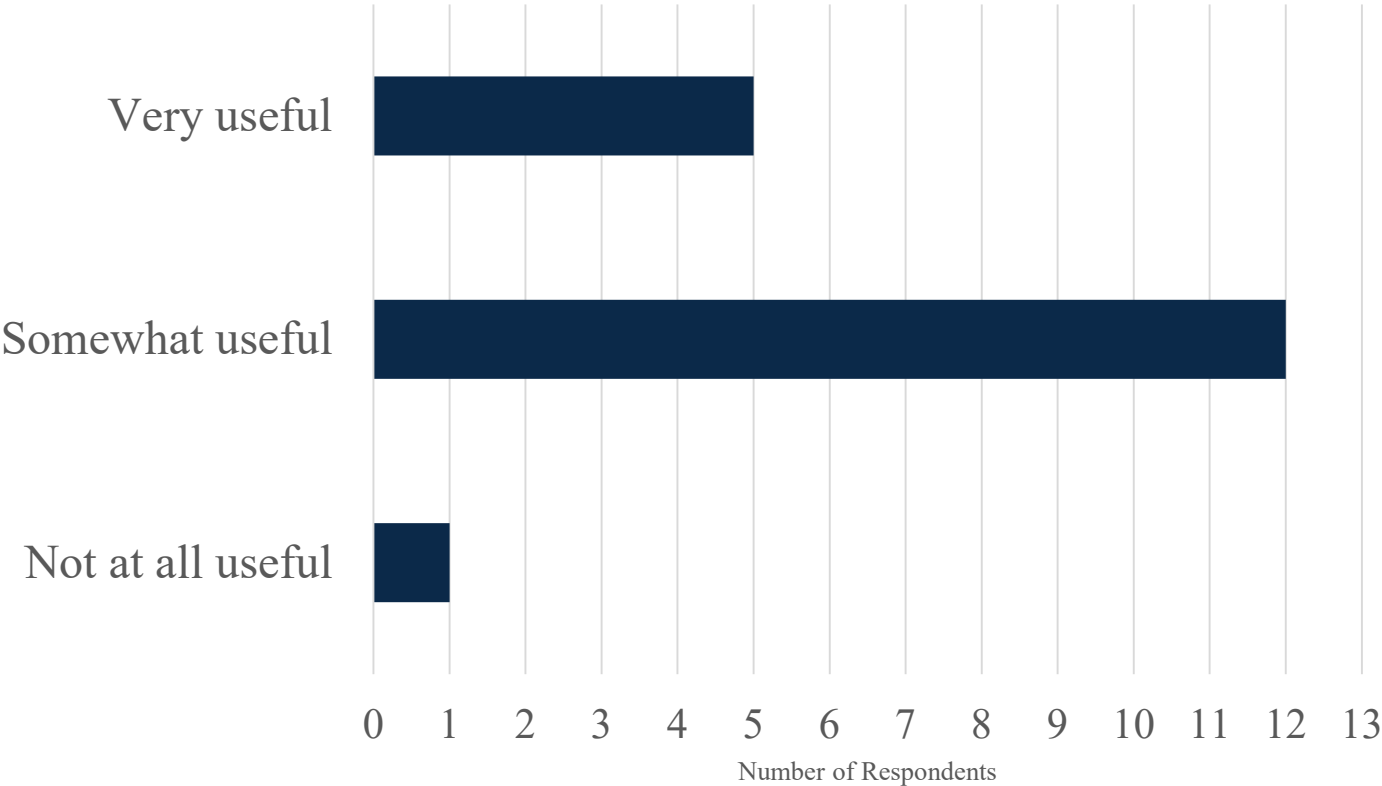


How useful was the “Open Referrals by Days Open” report (pilot version) for tracking enhanced support investigations?





How useful was the “Investigation Overview Report”?





Did you use the "Investigation Overview Report" for any of the following reasons? CHECK ALL THAT APPLY

I did not use the Investigation Overview Report

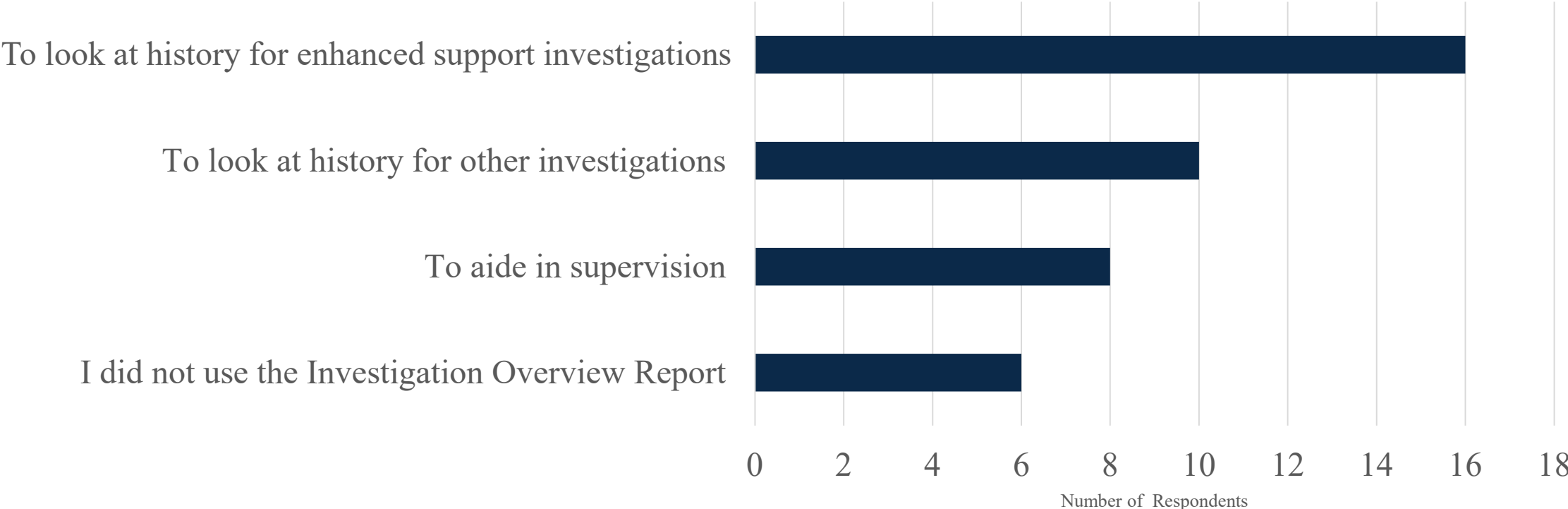
To look at history for enhanced support investigations

To look at history for other investigations

To aide in supervision

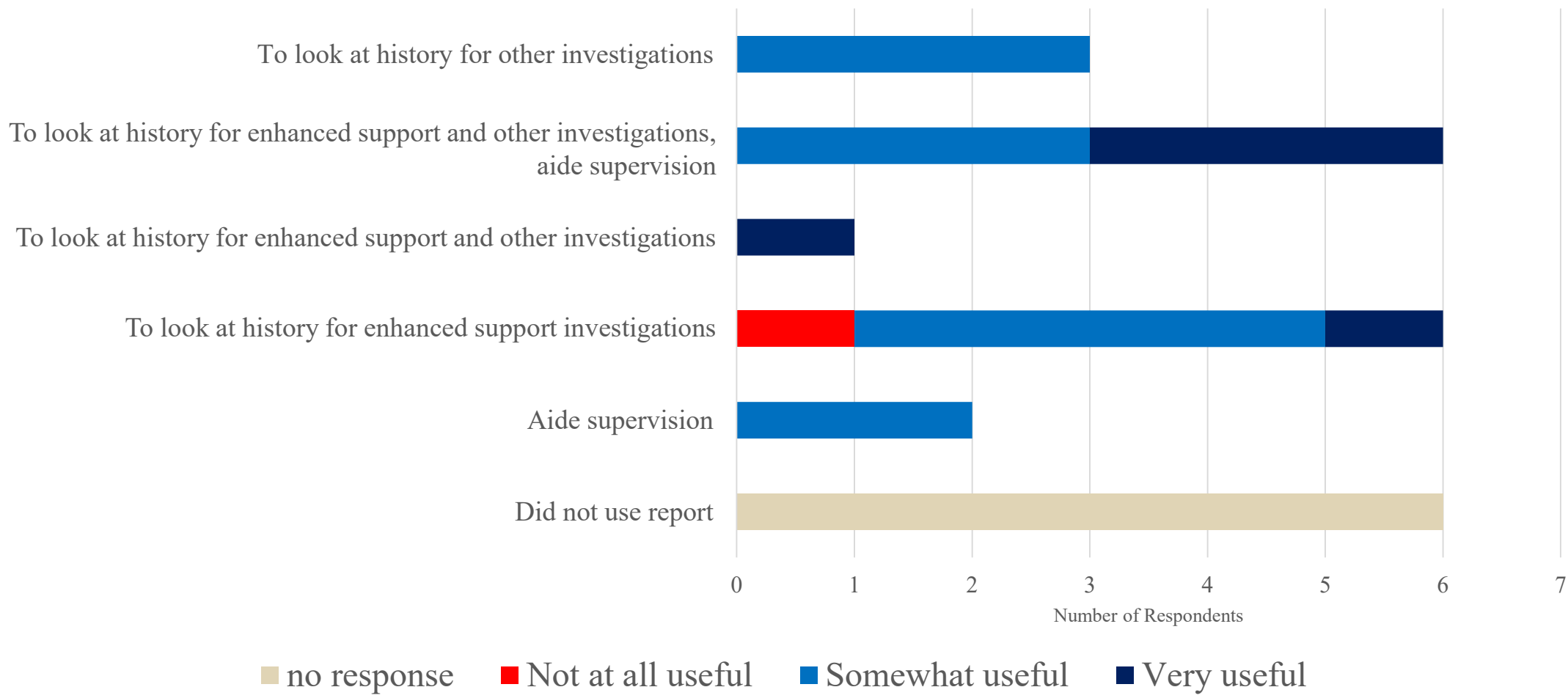


Overview report is most often used to look at history





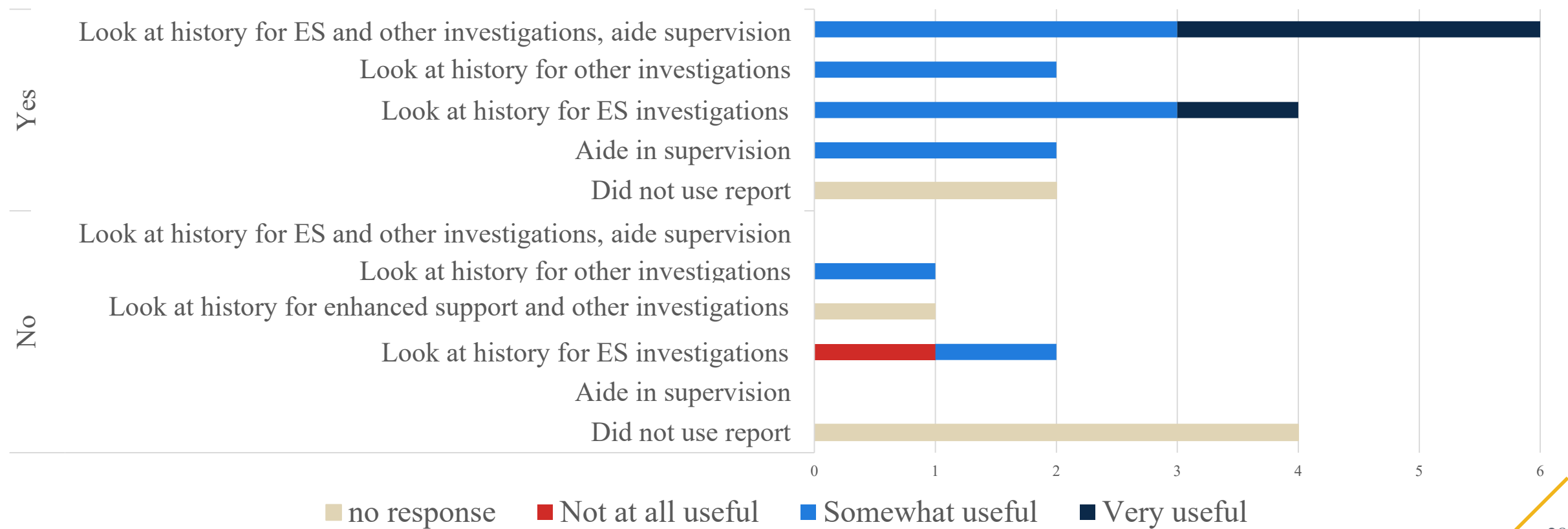
Supervisors who find the Overview Report most useful cite multiple reasons





Those who were supervising ES investigations found the Overview Report more useful

Supervising enhanced support investigations this week?



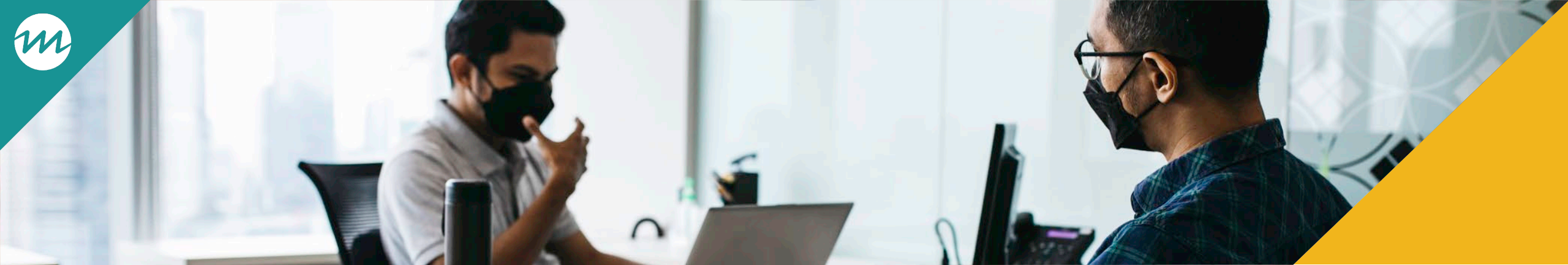


Findings related to the usefulness of the tools

/ **The tools saved supervisors time by compiling key information in one place**

- Information such as number of referrals and history which normally require digging through files across different systems
- “[Indicators of risk] usually come out as a result of a deep dive into a case, having it up front is really nice”

/ **Some supervisors felt that the information provided by the tools would have been uncovered over the course of a regular investigation**



Technology Adaptation

- / Supervisors with few ES referrals felt the tools were clunky and not SCSW friendly
- / Supervisors with several ES investigations noted the difficulty of working with new tools, but felt they worked better for them the more they used it
 - *“The more [enhanced supervision referrals] I receive, the more familiar I’m becoming with reviewing the information and the family history”*



Supervision Practice





Two of the pilot offices reported changes in practice strategies associated with enhanced support investigation

- / **One office reported increased oversight from administration and more frequent reminders/updates**
- / **One office reported a specific protocol that led to more immediate and frequent consultations**
 - Supervisors from this office also reported having lots of support from admin
 - *“Our office has it situated with a protocol for these referrals which is very helpful and on the other end of all this stuff, will probably result in less recidivism for these families”*



CSW feedback was consistent

- / Aligning with feedback from supervisors in their office, two CSWs noted increased reminders, consultations, and oversight**
- / One CSW felt that practices on an investigation requiring enhanced support were no different than on any other cases**
 - Stated that in their office, case conferencing and teaming was already a regular practice

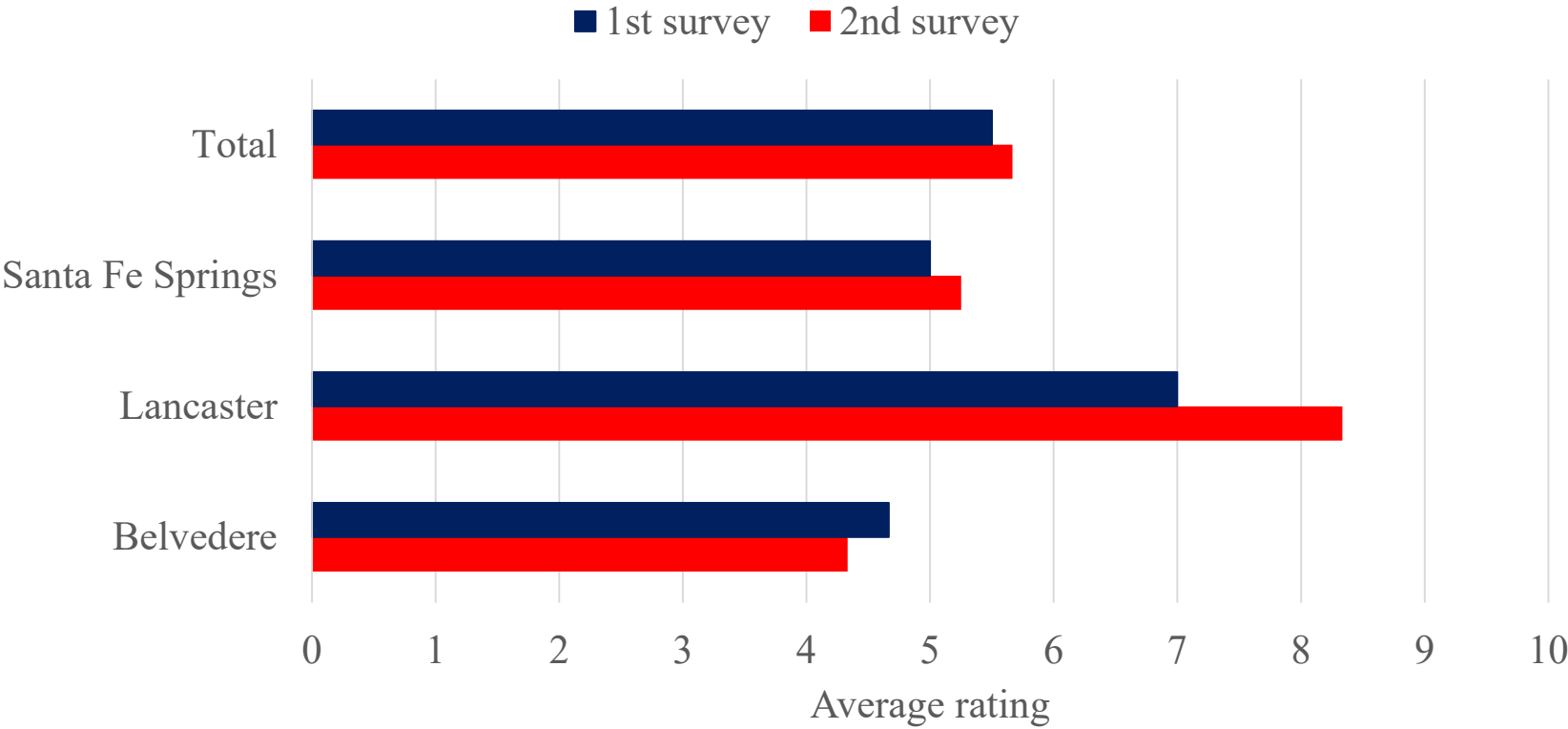


Staff Perceptions about the Risk Stratification Pilot



Pulse on the pilot

How are you feeling about the Risk Stratification Pilot?
(rated from 0 to 10, with 10 being the most positive)

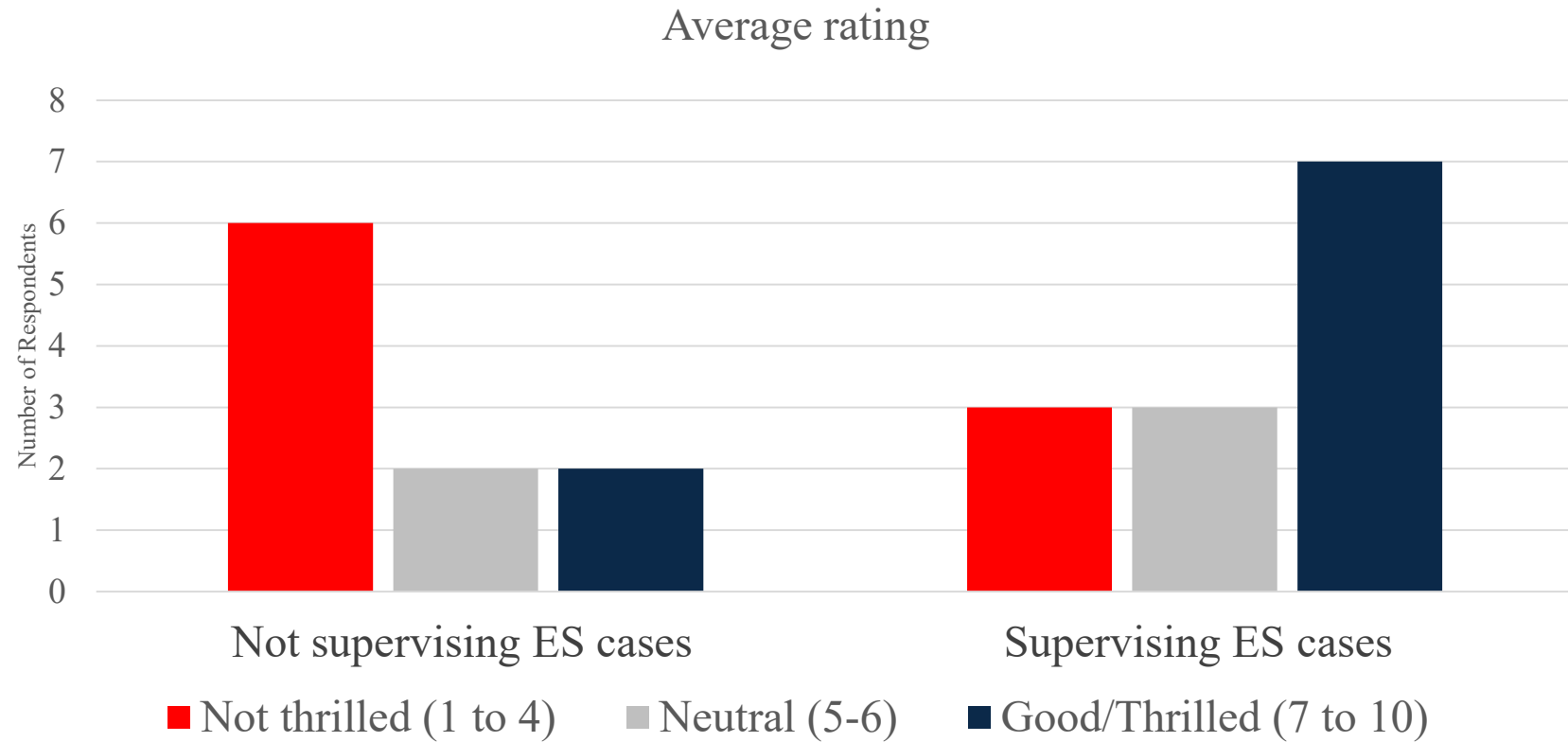


First survey was administered electronically in September; second survey was administered during focus groups in October.



Responses correlate with experience

How are you feeling about the Risk Stratification Pilot?





Findings on how enhanced support investigations are different



Although all referrals are reviewed thoroughly, supervisors are taking a closer look at ES referrals



Because these referrals have richer historical information, multiple supervisors shared that they feel they can pinpoint and focus on the chronic conditions

/ “It’s a lot more forethought into the situation and you’re being proactive where DCFS is historically reactive, which doesn’t work well for anybody. Once everyone buys into it across the county, I think we’re going to get better results.”



Findings on how enhanced support investigations are different

/ Multiple supervisors shared that enhanced support investigations have richer historical information

- Allows them to pinpoint and focus on the underlying issues

/ Increased number and depth of conversations with assigned CSWs

/ Some supervisors felt that they were able to engage and support earlier, at the point when their experience is really needed

- *“We’re using this risk stratification window to get in there sooner. Let’s not wait until day 20, let’s get in there at day 10.”*



Staff felt that there is a lot of value to identifying investigations for enhanced support

/ **Enhanced support investigations are being responded to with rich internal and family teaming**

- More internal partners are involved earlier (ARA, CFT, ERDD, CS, etc.)
- External partners and resources are being sought out

/ **The outcome is a group decision**

- *“The teaming is definitely tied to [a case needing enhanced support]. Having the opportunity to have so many parties involved creates a new thought process. Maybe they bring something that I hadn’t thought about.”*

/ **One CSW did not find the information particularly innovative or helpful, but recognized it is helpful to other CSWs**

- *“I never want to discount something that is helping my colleagues”*



Challenges surrounding enhanced support investigations

/ Some supervisors described ES investigations as more time consuming

- *“It requires more work and more attention to detail.”* – CSW Supervisor

/ Some CSWs felt their other referrals took a back seat while they worked a ES investigation

- Limited staffing resources; not able to fully service all other families when working on a ES investigation

/ CSWs felt more time is needed to service ES investigations

- *“Is 30 days enough time to be able to fully engage at the capacity or at the level that we want? Is 30 days realistic when there's that much history? I do find value in identifying [ES], but it takes a lot of time.”* – CSW Investigator



Some initial concerns have resolved

/ Some initial concerns that ES referrals would cause social workers to intervene more often have lessened

- *“I don’t have the numbers, but I’d venture to say that it hasn’t done that at all. In fact, it might have done the opposite. They are triaging issues at the front instead of just jumping in and intervening.”*

/ However, at least one supervisor expressed continued concern that the tools are inherently biased because of the system they pull data from



ERDD Advisory Workgroup Feedback



ERDD Advisory Workgroup Feedback

- / Enhanced support investigations involve more meetings and are therefore more time consuming**
 - Some managers and RAs were part of 6 staffing/roundtables for cases within a two-week period.
- / Families connected to ES investigations receive earlier access to services**
- / Concerns about biased data**
- / Advisory workgroup members suggested changing the original pilot label, “complex risk”**
 - Preferred something less negatively implicative for families than “complex risk”

Recommendations



Suggestions to improve reports

Improve report
visuals

Improve search
functionality

Create
notifications/alerts
to supervisors

Include details
about the last
investigation

Add more alerts
of potential
indicators of risk



Suggestions to improve reports, cont.

/ **Add more data fields**

- More alerts: Clinical, Safety
- Additional client data (SOGIE, gender identity)
- Services offered in past
- Family strengths
- SDM risk score for most recent referral
- Incorporate child protection history outside of LA County
- Incorporate the father to better align with Father Strong initiative

/ **Link with other systems to include more in-depth history**

- Criminal/law enforcement
- DMV
- History of violence
- Mental health/hospitalizations



Suggestion from CSWs to better service all cases

/ **Create a specialty unit of seasoned workers to focus specifically on ES referrals**

“These [ES] referrals take a lot of time... If we had like a special unit for [ES] or if we got extended time to work on those, it would be more of a help.”



Top recommendations

1

Formalize protocol to require teaming and ARA approval on enhanced support investigations

2

Add specific alerts to any subset(s) of enhanced support investigations that coincide with specific protocols (e.g., for ES investigations involving children under 5, require consultation from nurse)

3

CQI could conduct quality case reviews on sample of priority ES cases to examine what is working well and what needs more attention



Questions?

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