“Changing practice in the field is one of the most difficult tasks of child welfare agencies, and also the cornerstone to any successful efforts that we make.” (Ohl, 2003)

OVERVIEW

In recent years, systems of care principles have been increasingly adopted because of their potential to support efforts to improve child welfare and other human service systems in ways that lead to increased safety, permanency, and well-being for children, adolescents, and their families. However, while the systems of care approach has become more widespread, a clear understanding of what defines a system of care and how it operates has not kept pace. As the systems of care approach gains wider acceptance, the Children’s Bureau has committed considerable resources to assessing its impact and to understanding how this approach might be best applied in public child welfare settings.

In any given year, approximately 500,000 children are involved in the child welfare system nationwide. Children and their families face a variety of issues including neglect, physical and sexual abuse, domestic violence, health and mental health challenges, and educational and vocational challenges (Children’s Bureau, 2008). Also, children, youth, and families of color are often disproportionately represented in the child welfare system.

More than any other human service system, child welfare is charged with ensuring the overall safety of the children it serves. Federal mandates such as the Child Abuse Prevention and Treatment Act, Indian

Improving Child Welfare Outcomes Through Systems of Care

In 2003, the Children’s Bureau funded nine demonstration grants to test the efficacy of a systems of care approach to improving outcomes for children and families involved in the child welfare system and to address policy, practice, and cross-system collaboration issues raised by the Child and Family Services Reviews. Specifically, this initiative is designed to promote infrastructure change and strengthen the capacity of human service agencies to support families involved in public child welfare through a set of six guiding principles:

1. Interagency collaboration;
2. Individualized, strengths-based care;
3. Cultural and linguistic competence;
4. Child, youth, and family involvement;
5. Community-based approaches; and
6. Accountability.

A Closer Look is a series of short reports that spotlight issues addressed by public child welfare agencies and their partners in implementing systems of care approaches to improve services and outcomes for children and families. These reports draw on the experiences of nine communities participating in the Children’s Bureau’s Improving Child Welfare Outcomes Through Systems of Care demonstration initiative, and summarize their challenges, promising practices, and lessons learned. Each issue of A Closer Look provides information that communities nationwide can use in planning, implementing, and evaluating effective child welfare driven systems of care, and is intended as a tool for administrators and policy-makers leading systems change initiatives.

The National Technical Assistance and Evaluation Center wishes to thank the following individuals for their contributions to this resource: Patrick Melius, Sharri Black, and Maryrose McCarthy.
A Closer Look

An Overview of Systems of Care in Child Welfare

Child Welfare Act, Multi-Ethnic Placement Act, Foster Care Independence Act of 1999 (The Chafee Program), Adoption and Safe Families Act, and Promoting Safe and Stable Families Amendments of 2001 dictate what public child welfare systems must do, often despite severely limited resources. To address these challenges, child welfare administrations must be innovative in accessing and leveraging the resources of other child- and family-serving systems, families, and communities.

In addition, the Child and Family Services Reviews, implemented in 2000 as the mandated monitoring system, are an important impetus for State child welfare systems to improve outcomes for children, youth, and families. The review process has identified significant gaps between the ideals and the realities of current child welfare systems across the country (Children’s Bureau, 2004).

Because systemic change is at the core of the Child and Family Services Review process, each State’s Program Improvement Plan (designed to address review findings) must not only address frontline practices but also must propose other systemic changes, including changes in training, supervision, administration, funding, and governance. Such changes are challenging and their success depends on the capacity of the leadership, management, frontline workforce, providers in the service array, families, and the community at large to initiate and maintain processes that transform day-to-day practice, policy development, and standards of accountability (Ackerman & Ackerman, 2001). The systems of care approach integrates these mandates and system change processes by offering a comprehensive and principle-based framework to promote and sustain continual positive change within child welfare and partner agencies.

Defining Systems of Care

The systems of care literature and the lessons learned by the nine federally funded States and tribes and the 18 participating communities of the Children’s Bureau’s Improving Child Welfare Outcomes Through Systems of Care demonstration initiative contribute to a foundational definition of systems of care in the child welfare context.

A review of the systems of care literature reveals that the definition of a system of care has evolved over the past two decades, based primarily on work in children’s mental health. Hodges, Ferreira, Israel, and Mazza (2007) present a definition that reflects current systems of care components:

A system of care incorporates a broad, flexible array of services and supports for a defined population(s) that is organized into a coordinated network, integrates service planning and service coordination and management across multiple levels, is culturally and linguistically competent, builds meaningful partnerships with families and youth at service delivery, management, and policy levels, and has supportive management and policy infrastructure. (p. 9)

Similar to Hodges et al., other definitions that developed out of efforts to address failures to meet the mental health needs of children emphasize service planning and coordination. Overall, the definitions identify essential elements of a system of care: value-based, population-focused, strengths-based, family-driven, integrative and coordinated, individualized, culturally competent, community-oriented, and flexible with a broad array of appropriate services and natural supports.

Current definitions emphasize an ideal set of conditions for how a fully implemented system of care operates. In light of the challenges faced in child welfare, the developmental aspects of a system of care and its role in effecting change must be recognized. Given the current mandates for system change in child welfare, these elements are critical for administrators seeking to understand and develop systems of care.

Based on the experiences of the grant communities, systems of care in child welfare would be defined as a principle-guided approach to developing and sustaining systemic changes that result in improved outcomes for children and families.
Principle-guided—Child welfare driven systems of care are guided by six core principles, which are the essential elements of the framework for achieving a balanced and effective child and family service system. The six principles are interagency collaboration, individualized strengths-based care, cultural competence, child and family involvement, community-based services, and accountability. While definitions of these principles vary in the literature, they represent the foundation for creating a more effective child welfare system based on change and ongoing evolution. The goal of a principle-guided change process is to operationalize each principle throughout the child welfare system, with each principle embodied in, and guiding the work of, administration policies and practices (DeCarolis, Southern, & Blake, 2007).

Continuous Change Process—Guided by core principles, a system of care systematically promotes and manages system change efforts, including building a system of care and sustaining operation of the system. Similar to building or remodeling a house, constructing systems of care requires considerable advance work, such as planning, identifying and gathering essential resources and partners, and continuous quality improvement, to create a shared and compelling vision of desired outcomes. The building process requires diverse skills such as leadership, marketing, strategic planning, and collaboration. Once built, a system of care operates in a larger context of changing political, legislative, fiscal, and service issues. To maintain effectiveness, a system of care must continuously adapt to the environment. With the guiding principles and infrastructure as constants, the systems of care approach provides a framework for building and maintaining organizational and community capacity to successfully navigate the complexities of systems change.

Developmental Systems Change—In a stage-based developmental process, the systemic change necessary to achieve improved outcomes for children and their families takes considerable time to mature. Often supported by Federal, State, or private foundation funding, the initial stages of establishing a system of care may take 3–6 years. Building the infrastructure of a system of care requires time to craft a shared vision, develop a theory of change, develop strategic and action plans, establish governance structures, and foster the trust necessary to formalize and sustain long-term commitments. As the system develops, policy, practice, financing, and leadership will require adjustments, and a deepening commitment to the principles and goals will be necessary. In theory, a system of care moves from the infrastructure-building phase to sustainability with a gradual change in level of effort, as shown in figure 1. In reality (figure 2), phases often overlap and cycle between building/rebuilding and sustaining the system. Shifts in effort may be driven by a variety of forces such as changes in population, election cycles, funding, or leadership. This cyclical change process calls for revisiting earlier commitments and decisions at frequent intervals during the building stages and at regular intervals in sustaining operations. Because systems of care continuously monitor and adapt to changes in the environment, agencies adopting this approach operate...
as learning organizations characterized by purposeful and insightful agility (Senge, 1990).

Results Focused—Promoting systemic change in child welfare is meaningless unless the changes lead to better outcomes for children and families. Given the fiscal constraints and mandates that affect child welfare systems, decision-makers must be able to reliably determine if changes initiated through a systems of care approach are enabling better outcomes. In addition, they need to understand the impact of systemic change in relation to Federal and State mandates. Because systems of care often require collaboration with other departments, agencies, or organizations, their respective objectives for demonstrating results or impacts must also be addressed. Therefore, a well-designed quality assurance process through which timely data are collected, shared with stakeholders, and used to make adjustments is a vital element of any systemic change process.

Systems of Care in Child Welfare
A fully developed system of care would include all major human service systems, rather than focus on a single system. However, in building an integrated system, the needs that characterize each system and the unique mandates that affect them must be considered throughout the change process. Much of the current literature and research on systems of care reflect a focus on mental health issues. Contemporary examples of systems of care, outcomes research, and even the national network of experts and consultants are largely drawn from the mental health field. The Children’s Bureau’s Improving Child Welfare Outcomes Through Systems of Care demonstration initiative was designed specifically to focus on the challenges of serving children in the child welfare system while integrating with systems of care efforts in other human service agencies. This 5-year effort has enhanced understanding of how a systems of care approach can be shaped for the child welfare field.

Preliminary findings suggest that to be most effective in child welfare, especially as a framework for change, systems of care must be tailored and based on an in-depth understanding of the mandates and challenges child welfare administrations face and the diverse needs of children, youth, and families. Child welfare has a culture and history that are unique. The traditional psychosocial or ecological approach to understanding and meeting the needs of children; an emphasis on ensuring child safety, permanency, and well-being; and a history of collaborative work with other agencies are hallmarks of child welfare. However high staff turnover requires continuous orientation processes and the often adversarial relationships and power differentials between families and frontline staff make trust and strengths-based approaches difficult to implement. Responding to the unique needs of overrepresented and culturally diverse populations, and negative visibility in the wake of tragedies, also are factors in adapting the systems of care approach to child welfare.

Implementation of the Child and Family Services Reviews represents a unique opportunity for following the systems of care approach. The Child and Family Services Review process increasingly has focused not only on frontline practices but also on systemic change (Ohl, 2008). While changes in frontline practice may lead to improvements for a small, targeted group, unless those changes are adopted and supported by policies and processes throughout the organization and service array, they will remain at best pilot or demonstration projects. Conversely, policy changes without complementary change in frontline services or practices are unlikely to lead to improved safety, permanency, or well-being for children. Child and Family Services Reviews have placed increased demand on States to engage in a structural and comprehensive change process designed to address these challenges.
Commonalities Between Systems of Care and the Child and Family Services Review Process

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<thead>
<tr>
<th>Systems of Care Guiding Principles</th>
<th>Child and Family Services Reviews Practice Principles</th>
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<tbody>
<tr>
<td>Family and youth involvement</td>
<td>Family-centered practice—Strengthen and empower families to protect and nurture their children</td>
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<tr>
<td>Community-based child- and family-centered services</td>
<td>Community-based practice—Support the needs of children within the context of their families and communities</td>
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<tr>
<td>Individualized, strengths-based care</td>
<td>Individualizing services—Tailor interventions to meet specific needs of children and families served</td>
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<td>Cultural and linguistic competence</td>
<td>Strengthening parental capacity—Promote parent strengths and self-esteem by emphasizing partnership with service providers</td>
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<td>Interagency collaboration</td>
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<td>Accountability</td>
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The core principles implemented through the Improving Child Welfare Outcomes Through Systems of Care demonstration initiative correspond closely to those underlying the Child and Family Services Reviews (Pires, 2008). Despite slight differences in terminology, the complementary principles represent a sound set of child welfare focused guidelines that can facilitate a systems of care driven change process.

Any systems change effort should promote an integrated and orderly process of change. However, like many organizations, child welfare systems can be prone to environmental stressors. Perhaps the most challenging in child welfare is the loss of a child’s life while in care. The failure to protect a child is devastating, highly public, and often results in dramatic, abrupt, and often reactionary changes in the system. Line and senior staff alike often are removed from or resign their positions, policies may change, and scrutiny and oversight increase. Programs that are largely effective may be jettisoned for less effective approaches that appear to be safer. When such changes happen abruptly, they frequently are not integrated well throughout the system (Bertelli, 2004). Because the systems of care framework for change is guided by core principles that promote accountability and transparency, child welfare administrations and their partner human service agencies have greater potential to respond to crises in a purposeful and insightful manner.

Challenges and Strategies: The Experience of Child Welfare Driven Systems of Care Grant Communities

The grant communities and the National Technical Assistance and Evaluation Center supported by the Children’s Bureau’s Improving Child Welfare Outcomes Through Systems of Care demonstration initiative serve as a national learning laboratory for understanding how systems of care can be used effectively to build a stronger child welfare system. This demonstration initiative provides resources to understand how a principle-guided process promotes change at both the systems and individual outcome levels (safety, permanency, and well-being). Since the initiative was
launched in 2003, the Children’s Bureau and State child welfare administrations have shown growing interest in building systems of care to organize and implement State Program Improvement Plans. The grant communities also have provided details about the challenges and potential rewards of establishing a systems of care framework to achieve systems change and improve child and family outcomes.

Data from the national and local evaluations reveal that the communities are changing how they conduct the work of promoting permanency, safety, and well-being of children, youth, and families. The grant communities report that the work is challenging and change typically does not proceed evenly. The experiences of the grant communities illuminate the challenges of operationalizing each principle and demonstrate their unique and innovative approaches to building and sustaining systems of care.

Operationalizing each principle means that within each level of child welfare and partner agencies, tangible, observable indicators of the principle exist. For example, promoting family involvement is exemplified in the Kansas Family Centered System of Care by the active and valued participation of family leaders on statewide quality improvement councils, as well as the public-private partnership between the State child welfare system and the statewide Kansas Family Advisory Network. Similarly, in addressing interagency collaboration, the Colorado grantee community was instrumental in shaping and gaining acceptance for Colorado House Bill 1451, promoting interagency collaboration between State human service agencies and the involvement of family members and community stakeholders in designing and implementing service systems.

In addressing some of the major challenges of child welfare, grant communities have used systems of care to respond in ways that promote safety and build on collaborative processes. New York and Oregon both faced the challenge of a child’s death. In both cases, the structure and processes guided by systems of care principles helped stabilize the agency and provided some consistency in the midst of tumult and unpredictability. In one instance, changes in policies and frontline procedures were guided by systems of care principles, and in another, the existing systems of care structure adapted to changes in leadership and tempered efforts to implement abrupt, reactive change in favor of more conservative service approaches.

In a fully functioning system of care, all human service agencies adopt similar guiding principles and processes. In practice, systems of care principles rarely evolve across human service agencies at the same time or rate. While change leaders may become frustrated with the pace of change and participation in the collaborative change process, each agency has to do the work of integrating the principles into its organizational culture. Consequently, child welfare administrations must build a vertically integrated system while working across organizational boundaries to reach agreements based on shared values/principles and overcome historic and current impediments to interagency coordination and collaboration.
Each of the grant communities is unique in its approach to systems change but collectively, they address many of the challenges faced by the entire child welfare community. Each issue of A Closer Look focuses on one of the systems of care principles and highlights how the grant communities have applied the principle in their work. The reports summarize their challenges, highlight emerging and promising practices, and describe lessons learned when promoting systems change. Each issue provides information communities should consider in planning, implementing, and evaluating effective systems change in child welfare, and is intended as a tool for administrators and policymakers leading systems change initiatives.

Implications for Administrators and Stakeholders

A Closer Look offers valuable information for Federal, State, tribal, and local administrators and policymakers. While A Closer Look also will be useful for other key stakeholders, including child welfare frontline staff, interagency partners, providers, and families, the principal audience is individuals who have responsibility and authority to promote and support systems change.

A Closer Look:

- Informs child welfare decision-makers about how systems of care promote and guide systems change, both in policy and practice, to address the requirements of the Child and Family Services Reviews.
- Highlights innovations or changes in governance, policy, or practice that may be useful for addressing common challenges in child welfare systems.
- Promotes the effective use of systems of care principles and processes in guiding sustainable systems change among child welfare administrators and decision-makers.

Each issue of A Closer Look shares ideas and actions that administrators and decision-makers may adopt as they work to improve outcomes in permanency, safety, and well-being for children and families. Although each issue addresses a different systems of care principle, operationalizing a single principle will not lead to a fully functioning system of care. An effective child welfare driven system of care is based on the synergy of the principles as they are used to guide the work throughout an organization, the broader service system, and the community.
References


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Improving Child Welfare Outcomes Through Systems of Care Demonstration Sites

**California**—Partnering4Permanency—Valerie Earley, Project Director, vearley@ehsd.cccounty.us

**Colorado**—Jefferson County System of Care—Susan Franklin, Project Director, SFrankli@jeffco.us

**Kansas**—Family Centered Systems of Care—Beth Evans, Project Director, ebme@srs.ks.gov

**Nevada**—Caring Communities Project—Tiffany Hesser, Project Director, HesserTi@co.clark.nv.us

**New York**—The CRADLE in Bedford Stuyvesant: A Systems of Care Initiative—Nigel Nathaniel, Project Director, Nigel.Nathaniel@dfa.state.ny.us

**North Carolina**—Improving Child Welfare Outcomes Through Systems of Care—Eric Zechman, Project Director, ericzechman@ncmail.net

**North Dakota**—Medicine Moon Initiative: Improving Tribal Child Welfare Outcomes through Systems of Care—Deb Painte, Project Director, debp@nativeinstitute.org

**Oregon**—Improving Permanency Outcomes Project—Patrick Melius, Project Director, Patrick.J.Melius@state.or.us

**Pennsylvania**—Locally Organized Systems of Care—Andrea Richardson, Project Director, anr63@pitt.edu