

Ohio Alternative Response Pilot Project Final Report of the AIM Team

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



TABLE OF CONTENTS

I.	Summary of Recommendations	4
	Project Summary.....	5
	AIM Team Recommendations	6
II.	Introduction and Overview	22
	Historical Context.....	22
III.	Project Background.....	26
IV.	Project Activities	30
	Regional Forums	31
	Selection of Pilot Counties.....	32
	Ohio Design Workgroup/Leadership Council	32
	In-Person Meetings.....	44
	Training	44
	Coaching.....	53
	Technical Assistance to Counties.....	53
	Technical Assistance to State (and State Partners)	54
	Other Learning Experiences.....	57
	Communication Vehicles	59
	Subcommittee on Responding to Child Abuse, Neglect, and Dependency.....	61
	Chronicling	62
	Evaluation	63
	Stakeholder Support	64
V.	Recommendation and Rationale for Statewide Implementation of Alternative Response in Ohio.....	71
	Statewide Implementation	72
VI.	Findings and Recommendations.....	74
	State	74
	Issues to Flag.....	81
	State-County Partnership	82
	County and Community	85

Families and Their Children 86

Workers and the Agency..... 91

Practice..... 92

Procedures and Tools..... 96

VII. Guidance for the Future..... 104

 Going to Scale 113





I. SUMMARY OF RECOMMENDATIONS

The Final Report and Evaluation of the Ohio Alternative Response 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) — project consultants who were selected by the Supreme Court of Ohio’s Judicial and Court Services Division — guided the pilot planning and evaluation processes. The AIM Team offers this Summary of Recommendations and Final Report on the activities, evaluation, and analysis of the Pilot Project to the Supreme Court of Ohio’s Subcommittee on Responding to Child Abuse, Neglect, and Dependency (Subcommittee).

Recommendations articulated below and in the remainder of the report are based on the summary information on both the pilot counties and the families who participated in the Ohio Alternative Response Pilot Project.

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.

Information is detailed in this Final Report and three supplemental reports.

This Final Report, has three main purposes: (1) to provide recommendations to the Subcommittee for its consideration and deliberation on the future of alternative response in Ohio; (2) to provide a description of the consultation team’s direct and indirect activities during the life of the project, the observed results, and an interpretation and analysis of those results; and (3) to provide salient findings and recommendations of the three supplemental reports.

The first supplemental report is the Evaluation Report developed by the Institute of Applied Research. Responsive to the original Request for Proposals issued by the Supreme Court of Ohio’s Judicial and Court Services Division, the evaluation examines outcomes in four categories: child and family service review outcomes, judicial system outcomes, consumer-related outcomes, and economic outcomes. The evaluation design includes multiple data-collection methods and process and outcome measures. The evaluation findings support future statewide implementation of alternative response in Ohio.

The second supplemental report is the Statutory and Rule Framework developed by the National Center for Adoption Law & Policy (NCALP). NCALP conducted research on Ohio and national law, policies and practice and developed a set of recommendations, set forth in that report and listed in this summary for revising current State law to ensure that Ohio’s statutory and administrative rule framework is consistent with an alternative response approach to child protection policy and practice.

The third supplemental report is the Chronicle Report also developed by NCALP, a qualitative analysis of the pilot process, that details project milestones, planning and implementation processes, challenges or barriers, successes, and lessons learned and their implications for future planning. It provides a “behind the curtain” look at the Pilot Project through the voices of those who experienced the alternative response pilot processes.

Project Summary

In January 2006, in its *Final Report to the Advisory Committee on Children, Families, and the Courts*, the Subcommittee included a series of recommendations for developing and pilot-testing an alternative response protocol in Ohio. Momentum around the Subcommittee’s report grew, and Ohio Senate Bill 238 was enacted in June 2006, authorizing the ODJFS to implement an Alternative Response Pilot Project in up to 10 counties. On September 13, 2007, the following 10 counties were selected as pilot sites: Clark, Fairfield, Franklin, Greene, Guernsey, Licking, Lucas, Ross, Trumbull, and Tuscarawas.

On July 1, 2008, all of the pilot sites, with the exception of Franklin County, launched their alternative response system. Franklin County launched its alternative response system on August 1, 2008.

The evaluation of the Ohio Alternative Response Pilot Project began in July 2008. The Ohio AR evaluation was designed as a field experiment. 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). *Experimental* referred to the new approach; *control* referred to the traditional approach. Similarly, in experimental terms the alternative response was the experimental treatment while the traditional response investigative assessment was the control treatment. 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. The follow-up time for most families who entered the study in 2009 was one year or less. 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.

Summative recommendations from the Final Report and the three supplementary reports are detailed below.

AIM Team Recommendations

Statewide Implementation

RECOMMENDATION: *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.

RATIONALE:

- The overall distribution of change in child safety was similar for the experimental and control group families, with no statistically significant differences. This finding indicates that the replacement of traditional investigations by alternative response family assessments did not reduce the safety of the children. Children were as safe under alternative response as under traditional approaches.
- While controlling for the differences between families in previous contacts, and the controls provided by random assignment, the use of an alternative response family assessment resulted in a reduction in new reports of child abuse and neglect compared to the families who received the traditional response.

- The major positive effects of alternative response on new reporting of child maltreatment occurred in African American families. The difference in the number of new reports for African American families between the experimental group and the control group was greater when compared to the same difference in the entire study population.
- Although study families as a whole were largely in poverty, African American families were substantially more impoverished than Caucasian families. Race was taken as a proxy measure for poverty. The findings indicate that alternative response has its greatest effects among the poorest families in the population
- Only 2.8% of the pilot study families (102 families of the 3,659 total families in the 360-day study group) experienced out-of-home placement. The control group had a higher proportion of these removals: 3.7% of children had been removed on the control side compared with 1.8% in the experimental group. Alternative response appeared to reduce the number of child removals and out-of-home placements.
- Families in the experimental group were more engaged, more satisfied with their workers, and more satisfied with services they received.
- Families in the experimental group received and participated in more services, particularly basic needs and poverty-related services.
- The majority of alternative response staff stated that the pilot had affected their approach to families *a great deal or in a few important ways*. These staff saw alternative response as a more friendly approach to families that resulted in greater family participation in decisions and case planning.
- Nearly 40% of county staff involved with the pilot reported that alternative response increased the likelihood that they will remain in the field of child welfare.
- Of notable import, when the formal evaluation of the Ohio Alternative Response Pilot Study— both randomization of cases (September 2009) and termination of data collection (January 2010) — came to a close, *all 10 of the pilot counties opted to affirmatively continue this approach*. Each county created transition plans to institutionalize and expand their alternative response practices.

Statutory/Rule Recommendations to Support Statewide Implementation

RECOMMENDATION: Ohio Revised Code Sec. 2151.01 Construction; purpose:

Amend to include an implementing statute directing the establishment of a systemic differential response approach to child protection in Ohio. This statute should contain a clear statement of the philosophy and goals of the differential response approach, provide for two or more response pathways, and set a preference for a FAR in cases not requiring an IAR in order to protect child safety and well-being. The statute should also set a timeframe for statewide implementation of differential response.

RATIONALE:

- Establishment of a systemic differential response approach in an implementing statute will underscore that an assessment response to a report of child maltreatment is not an alternative, or secondary, option and will reinforce Ohio’s commitment to a child protection system that is family-centered and responsive to individual needs. Establishing a preference for an assessment response in cases where an investigative response is not required for child safety further emphasizes the paradigm shift to family partnering. Finally, inclusion in the implementing statute of a reasonable timeframe for statewide phased-in expansion that is based on recommendations from the Final Report of the AIM team will highlight the importance attached to this change in approach and set the pace for timely training and systems modification.
- This section should also include language that emphasizes the philosophical underpinnings of a differential response child protection approach as articulated in the Guiding Principles of the Ohio Alternative Response Pilot Project — specifically, that CPS intervention in all cases, regardless of response pathway assignment, seeks to engage families through practices that:
 - focus first on child safety;
 - are child-centered and family-focused;
 - identify families’ strengths and needs by emphasizing the engagement of families; and
 - are aimed at achieving child safety through active, collaborative, and respectful engagement of parents, family, community, and all other CPS stakeholders.
- Proposed HB 371 (Child in Need of Protective Services, or “CHIPS”), introduced in the Ohio House of Representatives in fall of 2009, amends ORC Section 2151.01 by replacing it with two new code sections that set out a clear statement of intent for Chapter 2151, Ohio’s child protection statutes. Proposed Section 2151.02 respects the constitutional protection afforded to the parent-child relationship while also recognizing a child’s need for safety and well-being, and seeks to guide decision making when the State is justified in intervening on behalf of the child. Proposed Section 2151.021 articulates the overall philosophy and goals of Ohio’s child protection system as highlighted above.
- It is recommended that any proposed amendments to the ORC include the two proposed code sections above from HB 371 (2151.02 and 2151.021). It is further recommended that an additional subsection be added to proposed Section 2151.021 which provides a statutory preference for a FAR in cases not requiring an investigative assessment response.

RECOMMENDATION: Ohio Revised Code Sec. 2151.011 Definitions: **Amend to include new definitions for Ohio’s child protection differential response approach and dual 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.”**

RATIONALE:

- **“Differential response”** is the term most widely used to describe an approach that allows child protection workers to respond in different ways to reports of abuse and neglect based on safety and risk analysis of factors including the nature and extent of the harm to a child. This is the term of choice in literature and materials developed by leading national child protection organizations, including American Humane and the National Quality Improvement Center on Differential Response in Child Protective Services. The term “alternative response” connotes a practice that is a substitute for a less conventional approach. The term “differential response” is more accurately descriptive of the system envisioned for Ohio and will allow for the addition of other response tracks as appropriate over time. Changing the name now will provide consistency with national and will more accurately reflect the core tenets of the practice approach. The term “differential response” is used throughout the remainder of this section to refer to the recommended systemic approach.
- **“Family assessment response,”** a term used by several states to refer to what is now called “alternative response” in Ohio more accurately describes the actions taken by an agency when responding to a report assigned for assessment rather than investigation. The term “alternative response” implies a *substitute* way of engaging families, where possible, rather than the *preferred* method when investigation is not required.
- **“Investigative assessment response”** is a term that more accurately describes a response result in a determination or finding in relation to an accepted report, while still emphasizing that the approach to assessment is broader than the allegation itself. Many states utilizing a differential response approach refer to their traditional response pathway as an “investigation.” This term, however, can carry a negative connotation for families may de-emphasize the goal of a holistic assessment approach. The term “investigative assessment response” reflects the shift in practice that Ohio has embraced while integrating a comprehensive assessment process into all child maltreatment investigations but still captures the distinction from both a FAR and a law enforcement investigation.

RECOMMENDATION: Ohio Revised Code Sec. 2151.412 Case plan for each child; changes; priorities; **Amend to allow for flexibility in family assessment response (FAR) cases in which there is court participation *without* the necessity of re-assigning the case from a FAR pathway to an investigative assessment response (IAR) pathway. Specifically amend § 2151.412 to**

provide an exemption for the creation of a case plan in cases in which the juvenile court orders protective supervision in relation to a child under the jurisdiction of the court for a non-abuse or neglect-related reason, such as truancy or unruliness, and in which the child's family is involved in a case assigned to a FAR and a Family Services Plan is in effect.

RATIONALE:

Altering the case-planning statute to allow for flexibility in the limited number of FAR cases in which a court assumes jurisdiction over a party allow for services to be provided pursuant to the existing Family Services Plan created with the family, thereby avoiding the requirement of creating a separate case plan document and/or re-assigning the case to an IAR. In addition, allowing for a court to order protective supervision in a delinquency, truancy, or drug court case without requiring a pathway change or the development of a new case plan will provide for continuity of existing staffing and services and lessen or eliminate case delay or redundant planning.

RECOMMENDATIO Ohio Revised Code § 2151.421(F)(1). Duty to report child abuse or neglect; investigation and follow-up procedures: Amend the reporting statute to include an exception to the requirement that all accepted reports of abuse and neglect receive an investigative response within 24 hours, to allow for a FAR during an extended timeframe..¹

RATIONALE:

- Under current Ohio Revised Code § 2151.421(F)(1), PCSAs are required to investigate every report of child abuse or neglect within 24 hours:
[T]he public children services agency shall investigate, within twenty-four hours, each report of child abuse or child neglect that is known or reasonably suspected to have occurred and of a threat of child abuse or child neglect that is known or reasonably suspected or believed to exist that is referred to it under this section to determine the circumstances surrounding the injuries, abuse, or neglect or the threat of injury, abuse, or neglect, the cause of the injuries, abuse, neglect, or threat, and the person or persons responsible.”
- Establishment of a differential response child protection approach will require amendment of this provision to allow for PCSA to use a FAR to a referral or report of maltreatment within timeframes and pursuant to procedure for response set by rule.

RECOMMENDATION Ohio Revised Code §2151.022 Response to Accepted Reports of Child Abuse and Neglect:

Add a new section to the ORC establishing mandatory response pathway assignments for specified types of reports, and authorizing the assignment of other reports to either FAR or IAR at the discretion of the PCSA, based on guidelines articulated in rule. This provision

¹ This recommendation is not supported by all pilot counties. Those that object believe that all accepted reports should be responded to within 24 hours of receipt of the report.

should also allow for the reassignment of cases from the FAR pathway to the IAR pathway as required for child safety or other circumstances specified in rule and for reassignment from the IAR pathway to the FAR pathway where, upon investigation, it is deemed appropriate.

RATIONALE: Most states with a differential response practice model specify by statute certain types of reports that must receive mandatory assignment to a traditional or investigative pathway. Ohio’s interim rule incorporated mandatory pathway assignment for specified reports as well. The interim rule, however, included cross-reference to criminal code provisions for many categories of reports. To eliminate confusing cross-references and allow for consistency of application, the following report categories are proposed for mandatory assignment to the IAR pathway:

- Reports of physical abuse that results in a serious injury or that creates a serious and immediate risk to a child’s health and safety
- Reports of sexual abuse of a child
- Suspicious child fatality or homicide
- Reports requiring specialized assessment
- Reports requiring a third party assessment

The five categories for mandatory assignment to IAR are based on the Ohio AR Pilot Project rule, O.A.C. 5101:9-14-03(E)² and by reference to other state codes and Oklahoma’s administrative rules. The recommended code provision for pathway assignment under a differential response approach is designed for application to all accepted reports of abuse and neglect. For cases that are not subject to mandatory pathway assignment, it is recommended that discretionary pathway assignment guidelines be included in the OAC.

Legislating pathway reassignment is critical to ensuring the stability of the process, while maintaining the integrity of the system and the family. The Pilot Project interim rule provides for reassignment from the alternative response pathway to traditional response where a family requests a track change or the level of family engagement is insufficient to allow for the completion of the assessment process.

It is recommended that reassignment from an FAR to an IAR be statutorily authorized in the circumstances specified in the interim rule and, in addition, in cases where a new report is made in relation to the family and that report requires an IAR. Further, it is recommended that there be statutory authority for reassignment of a case from an IAR to an FAR if, upon further review, the case does not require an investigative approach.

² The Ohio AR Pilot interim rule also specified that reports that require the involvement of a child advocacy center be investigated. It is suggested that this requirement be re-examined.

Such provisions will allow for greater case flexibility and ongoing responsiveness to family needs.

RECOMMENDATION: § 2151.4211. (suggested citation). Family Assessment Response; purpose and procedure: **A new Code section outlining core principles and components specific to the FAR pathway, including a statement that such assignment will not result in a formal determination or finding that child maltreatment has occurred and setting contact initiation protocol should be added to the ORC.**

RATIONALE:

- The FAR statute, a free-standing provision, should outline the core goals served by assignment to the FAR pathway, including:
 - Fostering family decision-making in relation to whether to participate in a FAR or be served by an IAR.
 - Assessing child safety through practices that are child-centered and family-focused.
 - Removing labels such as “perpetrator” or “victim” in order to foster family engagement.
 - Better identifying family strengths and needs through effective engagement.
 - Developing creative solutions, including informal supports and formal services, while ensuring that underlying conditions and factors that could impact child safety are addressed.
 - Respecting families’ choices in the selection of services
- The Ohio Administrative Code should contain detailed practice guidelines, based on the recommendations and conclusions of the AIM team regarding the details of critical practice components such as safety and risk assessments, discretionary pathway assignment criteria, timeframes, service plans, family contact and forms. This will allow for more flexibility and the potential for evolving practice to inform policy going forward.
- Consideration should be given to authorizing the use of the case timeframes applicable in FAR cases and in IAR cases.

Amendments to the Ohio Administrative Code. The AIM Team and the Ohio Alternative Response Pilot Project Leadership Council have undertaken an extensive review of the Pilot Project experience and lessons learned over the course of the project. This AIM Team Final Report and Evaluation includes recommendations for practice informed by this review and Leadership Council discussions. To the extent that these recommendations impact the Ohio

Administrative Rules, NCALP defers to the collective wisdom of the AIM Team and the Pilot Project Leadership’s conclusions in relation to details of rule content.

In order to allow for additional input informed by the pilot experience and by stakeholder input, it is suggested that:

- The recommendations be reviewed by the Subcommittee and targeted key stakeholders after the completion and distribution of the Final Report of the AIM team, and modified to reflect any additions or modifications indicated by that report or by subsequent AIM team/Leadership Council decision-making.
- Decisions made early on in the Pilot Project design phase should be revisited, and any modifications to pilot practice suggested by such review should also be considered in drafting the modified recommendations.

State Infrastructure and Capacity Recommendations

The collective wisdom gained from the Pilot Project experience is instructive regarding infrastructure needs to support future implementation of alternative response. While infrastructure requisites are relevant at both the State and county levels, the State must lead by example and demonstrate the parallel process that is a hallmark of the alternative response approach.

RECOMMENDATION: Develop SACWIS enhancements that will fully support alternative response practice.

RATIONALE: While counties are appreciative of the current level of SACWIS enhancement, there are still significant challenges around tracking details included in Family Service Plans; lack of access to CAPMIS (Comprehensive Assessment and Planning Model - Interim Solution) Case Reviews, which many prefer over the current Family Service Plan Review; and difficulties with the functionality of pathway changes. Several pilot counties expressed concerns about their capacity for internal expansion as well as broader implementation of alternative response within the state in the absence of complete integration of alternative response in SACWIS.

RECOMMENDATION: Maximize flexibility in funding streams.

RATIONALE: The ability to provide creative services tailored to individual family needs has been a key element in the success of the Pilot Project. Across the pilot counties, workers and supervisors indicated that the flexibility in funding allowed agencies to work with families in new ways that would support their long-term stability. Many counties indicated that they were able to spend dollars in different ways due to the flexibility of the pilot funding.

RECOMMENDATION: Efforts must be dedicated 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.

RATIONALE: There must be a critical mass of individuals – at multiple levels of the agency – including the executive office – who understand and champion the alternative response approach for statewide implementation to be feasible. Roles, responsibilities, and performance expectations must be explicated to assure that there is role clarity and essential functions are ‘assigned’ to individuals who are accountable for their performance.

RECOMMENDATION: Ongoing technical assistance on alternative response from the State to pilot counties is essential.

RATIONALE: Given the benefits voiced by pilot counties, the activities and functions performed by members of the AIM Team need to be rooted in the State as implementation progresses. ODJFS and/or the SCO should appoint at least one individual at the State level whose dedicated role is to provide ongoing technical assistance and support for counties regarding the alternative response practice. This *support person(s)* should have knowledge of and preferably direct field experience in alternative response and would be available to provide regular mentoring and coaching on both an as-requested and as-warranted basis.

RECOMMENDATION: Engage ODJFS regional technical assistance specialists and policy staff early in the planning process for expanded implementation.

RATIONALE: These ODJFS staff are vital to the success of any broad implementation effort. In particular, regional staff have had limited opportunities to participate in pilot activities up to this point. They will need assistance and support going forward to develop their capacity around alternative response practice.

RECOMMENDATION: Create methods and vehicles to monitor and improve the quality of alternative response practice and operations must be identified and implemented.

RATIONALE: The Leadership Council, or some suitable proxy, the State (ODJFS and Supreme Court of Ohio) and the evaluator, if an independent resource is enlisted, should identify or develop a suitable tool and approach to obtain information on the quality of alternative response operations so that strengths, needs, and gaps can be identified on a periodic and ongoing manner. A method should be identified and implemented to continue evaluating this work. Such a method or process may involve peer review between counties, jointly conducted with ODJFS technical assistance specialists; assessments conducted by coaches of workers’ quality of practice in working with families; and self-administered assessments to be used in supervision or group case consultation discussions. Follow-up studies on families from the pilot would be very helpful.

RECOMMENDATION: Priority must be given to upfront discussion and training on the management of change, implementation science, and the operations and practice of alternative response.

RATIONALE:

- Training should be offered immediately before implementing and followed-up quickly with coaching for workers and supervisors to support work.
- Training should be required of all staff, and in particular, the orientation/overview of alternative response.
- It is essential that supervisors, managers and administrators understand alternative response practice; they should be expected to participate in training and shadow workers to learn the *art* of working with families with this approach.
- State staff should also be expected to participate in alternative response trainings. Such participation demonstrates commitment to the practice and the philosophical shift and underscores the state-county partnership in this system change.
- The fundamentals, procedural issues and practice of alternative response are integral to quality child welfare practice. An analysis of Ohio Child Welfare Training Program’s CORE curriculum, refresher CORE, supervisory CORE and integrate alternative response in all ongoing supervision should be conducted to assure that competencies associated with alternative response are incorporated in existing curriculum . Training should emphasize the import of both alternative response and the traditional response and that the child protection system requires more than a singular response to families in order to be responsive to their needs.
- Alternative response-experienced practitioners and managers from out of state should be used to assist with building the capacity for the state training program. A new way of doing practice means new trainings.
- Topical trainings should focus on engagement, solutions-focused approaches, strengths-based and family-led assessment, cultural understanding/respect (ethnographic interviewing), appreciative inquiry, and working with challenging issues- domestic violence, substance abuse and chronic families.

RECOMMENDATION: 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 used to answer the question ‘how are we doing?’ by obtaining the attainment of families’ feedback that assesses whether these fundamentals were observed or attained. An assessment and determination should be made as to whether such training already exists as a component of the OCWTP or whether the development of new training is required.

RATIONALE: Given the approval of the *Alternative Response Fundamentals in Support of Ohio's Child Protection Practice Model* and the recognition that the fundamentals articulated in this document are the linchpin of alternative response, it is imperative that training content and supervisory methods be driven by these fundamentals that are essential to the Ohio Child Protection Practice Model.

RECOMMENDATION: Fully integrate alternative response into Ohio Child Welfare Training Program training curricula and coaching.

RATIONALE: Similar to State policy and regional staff, Ohio Child Welfare Training Program (OCWTP) staff should be included in training, coaching, and mentoring opportunities within the counties, going forward, in order to assure long-term, in-depth capacity for integration of alternative response into the OCWTP.

RECOMMENDATION: Invest in immersion experiences or other cross-jurisdictional learning opportunities.

RATIONALE: Learning opportunities that had immense impact among the pilot counties include: "Minnesota immersion" experiences, where teams from Fairfield and Franklin counties had opportunities to visit county agencies in Minnesota; the National Differential Response Conference convened by American Humane in Long Beach, Calif., in 2007, Columbus in 2008, and Pittsburgh, Pa., in 2009; and coaching experiences with Minnesota child welfare professionals visiting Ohio's pilot counties. As implementation progresses, it is imperative that State staff and OCWTP personnel are provided opportunities to participate in these types of learning opportunities alongside county leadership, supervisors, or workers.

RECOMMENDATION: Continue to provide ongoing forums to support networking, communication, and problem-solving among counties and State staff.

RATIONALE: The in-person meetings have been a valuable support mechanism for both workers and supervisors throughout the pilot, and many have requested that these opportunities continue post-pilot. In-person meetings for pilot county alternative response workers and supervisors should be conducted quarterly basis. In these early stages of statewide implementation, a single meeting should be convened for all relevant staff to attend. Initially, until other arrangements are made, the State should assume responsibility for the logistics pertaining to these meetings. State policy staff should be encouraged/expected to attend whenever possible. Optimally, for the first year post pilot, these meetings should be run by an outside facilitator and agenda items and salient issues documented for future reference.

RECOMMENDATION: Evaluation findings indicate that alternative response workers tended to hold cases open longer than traditional response workers did and that the average number of face-to-face and telephone contacts was significantly higher for workers serving experimental families. Thus, there must be a 'commitment' on the part of the State and a

plan to examine the impacts of alternative response on workers' and supervisors' workloads. 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 the findings with the IAR. The results of the workload study should be examined and recommendations if feasible, should be carried out.

RATIONALE: 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. There is an essential need to invest in building a relationship between worker and family. If fidelity of 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.

RECOMMENDATION: Capitalize on the experiences of the initial 10 pilot counties by enhancing their capacity to mentor new alternative response counties prior to expansion.

RATIONALE: The pilot process from the earliest stages of planning until the present has culminated in a wealth of experiences and lessons to build on. The critical work of sustaining and growing momentum after a successful pilot effort now begins. Project milestones, successes, challenges, and feedback collected from county and State staff throughout the pilot process have provided insight into the areas of investment required to sustain this change effort. Some considerations going forward include: the provision of training on coaching for supervisors and frontline staff who may be called upon to mentor other staff; development of a specific plan for matching counties; and establishing a process for cross-county mentorship that is inclusive of State staff and builds capacity for technical assistance provision at the State level.

Effective State and County Partnership — Creating a Parallel Process

Throughout the planning process and implementation of the Ohio Alternative Response Pilot Project, there have been barriers and struggles to relationship-building between the State and the pilot counties. But, over the course of the project, there have been hard-fought gains in developing a foundation of partnership between the State and counties.

RECOMMENDATION: Create a specific plan to support further 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.

RATIONALE: As the pilot counties create a culture shift on the ground level with families, the State and counties also must continue to engage in a process to achieve a culture shift. This parallel process is still “under construction.” Several pilot counties

have offered opportunities for State staff to accompany them in the field with alternative response workers to see the practice firsthand.

RECOMMENDATION: Provide a vehicle and sufficient opportunity to carry out a State-county review of early decisions made by the Design Workgroup in light of the 18+ months of implementation experience.³

RATIONALE: To fully capitalize on the experiences of the pilot counties, it is essential to establish a thorough review process to guide planning for statewide implementation. As the Design Phase came to a close and decisions were being made to prepare for pilot implementation, members of the Design Workgroup were assured that there would be ample opportunity post-implementation to review decisions, tools, and procedures created early in the process. Utilizing technology support, a review process could be facilitated without the need for travel by the counties.

County Infrastructure and Capacity

RECOMMENDATION: Develop peer champions to help craft and communicate the message about alternative response going forward with new workers.

RATIONALE: In their reflections on the pilot experience, workers identified early messages that they found confusing or obstructive as they prepared to implement alternative response. In several instances, workers underscored the need to learn by example through peer discussions and shadowing, as well as in-the-field coaching.

RECOMMENDATION: Build on the foundation created by “change champions” from within pilot counties.

RATIONALE: Practice change and system transformations are dependent upon the investment of leadership in guiding and allowing the work to be done differently — or differentially. Across the 10 pilot counties, there is a disparate sense of the degree of change achieved through the pilot process. In counties where staff perceive the most significant changes, county administrators and supervisors have made deliberate choices to support fundamental changes in practice and internal agency processes. Some of these changes are not directly tied solely to alternative response, such as the implementation of group supervision processes in several counties. The pilot process provided the impetus for these changes. “Change champions” within and among the pilot counties will be a critical resource for mentoring other counties going forward.

RECOMMENDATION: Alternative response must be presented as one of two viable responses to screened-in reports.

RATIONALE:

³ A comparable recommendation was made in the Recommendation for a Differential Response Statutory/Rule Framework in Ohio.

It is important to frame the message about what alternative response is, and why alternative response is being implemented, in such a way that does not make workers and supervisors believe and/or feel that alternative response is better than an investigatory approach with families. This can set up an “us and them” mentality within an agency/county that can undermine successful implementation. It is important to emphasize alternative response as a system that needs both investigation and an alternative for families that do not require the fact-finding forensic approach. CPS will always require investigations, as they are necessary in some situations; however, ongoing emphasis that both (or all) responses are equally important is needed so that all work is valued, has a specific purpose, and is identified as significant.

Practice Recommendations

RECOMMENDATION: *Whenever feasible*⁴, workers should carry *either* alternative response or traditional response cases and not (unless requested by the worker) carry mixed caseloads.

RATIONALE: Workers who have carried *mixed caseloads*, for whatever reason, reported that alternative response cases tend to take a back seat to investigation cases. Due to the nature of investigation cases, they have *greater* urgency and increased compliance-driven requisites. Workers reported having difficulty switching from an alternative response approach to an investigation approach. They reported confusion and describe difficulty in changing how they work with families when they have to keep reverting to “old ways” of doing things.

RECOMMENDATION: *Whenever feasible*, supervisors should either supervise alternative response or traditional response staff:

RATIONALE: Supervisors who have supervised a unit of mixed staff report difficulty in “switching hats” when supervising both approaches to the work; they have difficulty institutionalizing a change in practice when they can’t focus on the practice change.

Findings from the first round of coaching indicate that it was easier for supervisors to model the proactive approach and ensure fidelity in counties in which workers carried only alternative response cases because neither the supervisors nor workers were required to switch between the pathway responses. It can be hypothesized that they were better able to focus on and practice the skills needed to competently perform this approach.

RECOMMENDATION: Establish a child welfare quality assurance process that is distinct from the Child Protection Oversight and Evaluation (CPOE) review process.

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 AR dedicated workers is not to be interpreted as an impediment to quality practice.

RATIONALE: Several counties, along with State staff, expressed a like interest in enhancing focus on the quality of practice. Many counties honed in on an incongruity between current monitoring processes and full integration of an alternative response approach from top to bottom in Ohio’s child welfare system. A quality assurance process developed jointly between the State and counties could potentially be a powerful mechanism to support ongoing learning and constructive exploration of quality of practice. Such a process might involve peer review between counties conducted in partnership with ODJFS technical assistance specialists; coaches’ assessments of workers’ quality of practice; and self-administered assessment tools.

RECOMMENDATION: Build on efforts to enhance supervisory support.

RATIONALE: Supervisors are a critical linchpin in quality of practice within agencies. Although supervisors were universally positive about the difference alternative response has made for workers and families in their counties, many indicated that additional support and specific opportunities for supervisory professional development would have been helpful prior to implementation. While this is certainly a “lesson learned” relative to new counties exploring alternative response, current supervisors indicated that ongoing learning opportunities provided later in the pilot were beneficial. Coaching opportunities provided during and after the pilot have been valuable, and many of these experiences have resulted in significant shifts in language and process within their counties.

RECOMMENDATION: Supervisors should set an expectation and periodic practice of accompanying supervisees (i.e., workers) on their field work with families.

RATIONALE: To competently supervise their staff, supervisors should possess the skills to observe their workers’ practices and provide consultation and feedback to the workers to model the use of engagement tools and strategies that enhance the quality of alternative response practice with families.

RECOMMENDATION: Group case consultation⁵ within and across units should be encouraged and ultimately institutionalized.

RATIONALE: Group supervision is an effective way of supporting the alternative response philosophy in that it creates a transparent environment in which workers share responsibility for the casework. Group case consultation can provide an excellent environment for strategizing solutions for worker and family concerns. Those pilot counties that initiated the use of this practice method sang its praises.

⁵ Models, strategies and processes that support group case consultation practices include Six Thinking Hats (E. De Bono); Mapping (A. Turnell, S. Lohrbach); and Structural Group Process ([Insoo Kim Berg & Susan Kelly](#))

RECOMMENDATION: To facilitate implementing the above recommendation, education and/or training must be provided to PCSA workers and supervisors on the philosophy behind and mechanics of group case consultation.

RATIONALE: The distinct models, skills and processes that support and promote group supervision and consultation practices require skill acquisition in order to maximize the potential benefits of this collaborative consultation. Education and training increases the likelihood that desired benefits will be achieved including the ability to sort through challenges and “murkiness” in practice change; encourage fidelity to the practice change; and enable ongoing discussion about best hopes and worst fears.



II. INTRODUCTION AND OVERVIEW

Alternative response, also referred to as differential response, dual track, multiple response, or family assessment response, is a form of practice in child protective services that allows for more than one method of response to accepted reports of suspected child abuse and/or neglect. This approach recognizes the variation in the nature of reports and the concomitant value of responding differentially, using either a traditional investigation or an alternative response. An alternative response assesses the needs of the child or family and offers services without requiring a formal disposition (substantiation) that maltreatment has occurred or that the child is at risk of maltreatment.

Historical Context

Over the past 40 years, the child protection system has been given increasing responsibility to address conditions that have been defined as child neglect. Given that the majority of families referred to child protection agencies today are families referred for neglect in situations that do not present *immediate* child safety issues, there has been a developing trend to respond to these families differentially — in a manner that recognizes that “one size does *not* fit all” family

needs. Existing protocols, developed to respond to reports of substantial child endangerment, have not always been a good match for these new responsibilities.

In response to this concern, a number of states began selectively applying a family assessment intervention to specified categories of accepted child maltreatment reports. These states continued to conduct a traditional protective services investigation when responding to reports involving substantial child endangerment. This flexibility in response allows the intervention to be adjusted to the family's needs. Differential response allows for a response that focuses on the front-loading of services for at-risk families with service needs, rather than proving or disproving a particular incident. At least 17 jurisdictions across the United States have implemented a differential response system over the past decade and a half, and at least six more are planning for implementation.

The evaluation of this approach has found that the safety of children was not compromised and, often, children were made safer sooner. More families received services, family cooperation increased, and recidivism decreased overall. Placement rates did not change, but the duration of placements decreased. Families, social workers, and community representatives preferred the family assessment approach. Thus, these projects have shown promise in the areas of prevention, early intervention, and differential response.

Ohio Alternative Response Pilot Project

It is within this context that the Ohio Alternative Response Pilot Project was conceived and launched. Ohio enacted legislation that allowed up to 10 public children services agencies to set aside the mandate to respond to all accepted reports with a traditional child protection investigation. Within the Pilot Project, public children services agencies offered the option of an alternative assessment and services response, in compliance with the criteria and policy developed under the project. The authorizing Ohio statute allowed Ohio rules to be temporarily changed, to be responsive to the Subcommittee's recommendations and the recommendations of the project's Design Workgroup.

Participating pilot counties were expected to be fully invested in the design phase of this project. Guided by the AIM Team, a Design Workgroup⁶ was formed that had diverse representation of project stakeholders. Each pilot had at least one Design Workgroup member who was expected to be actively engaged in the tasks and activities of this body. The experiences, protocols, and forms, etc., from other states engaged in alternative response were leveraged to support Ohio's Pilot Project. The activities of the Design Workgroup included, but were not limited to:

- building on the work of other states, and creating Ohio's Alternative Response System;
- designing Ohio's Alternative Response protocol;
- reviewing and revising screening protocols;

⁶ Appendix A is a membership list for this group.

- reviewing Safety, Family Assessment, and Risk Assessment tools;
- making training recommendations — both content and delivery;
- delivering training recommendations; and
- reviewing State-level infrastructure support, including communication vehicles and SACWIS integration.

Pilot counties were expected to apply this alternative response to at least 25% of their yearly child maltreatment reports using 2006 child protection experience as the base. The maximum number of reports any one county was allowed to contribute to this project was 500 for the project duration, even if that amount was less than 25% of a county's 2006 base. Project funding and research was limited to those reports selected for study.

Post-assessment services had to be provided to 40% of the reports selected for a family assessment. These service cases required a written service plan and documentation of resources used to address family needs and goals. Post-assessment funds provided by the State were used to finance agency needs related to the pilot, including county staff, or to purchase services from community agencies.

As a part of the project, pilot agencies received skill-based instruction to facilitate incorporation of the alternative response model into the system. Alternative response, however, is predicated upon an embrace of certain philosophical concepts that had to be accepted prior to initiation. Families' protective capacities and strengths were identified, respected, and used to protect children and reduce risk.

PROJECT FUNDING

Counties selected for participation were reimbursed for post-assessment service costs based on the number of families included in the project study.

For the 40% of families receiving services beyond the assessment, the reimbursement rate was \$1,000 per family. Counties had the discretion to treat the reimbursement allocation as a whole and not a required expenditure for each family. In addition to the targeted service dollars, each selected site received up to \$50,000 per year to allocate as needed to support other aspects of the design and implementation.

Applying this as the operational framework of the Ohio Alternative Response Pilot Project, this document provides an accounting of the activities that occurred during the Pilot Study (July 1, 2008 – January 2010) and the findings based on these activities. Recommendations are made by the AIM Team in eight areas:

- State
- State-County Partnership
- County and Community

- Families and Their Children
- Workers and the Agency
- Practice
- Procedures and Tools
- Other Considerations

These recommendations are intended to guide the actions of relevant stakeholders as Ohio leadership considers its future plans and actions related to alternative response implementation.



III. PROJECT BACKGROUND⁷

The Ohio Advisory Committee on Children, Families, and the Courts was appointed by Chief Justice Moyer⁸ 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

⁷ This section relies heavily on the information provided in Carpenter, C. (2007). *Children Families and the Courts – Ohio Bulletin*. Spring 2007; Vol. 3, No. 3. National Center for Juvenile Justice in conjunction with the Supreme Court of Ohio and the Ohio Department of Job and Family Services: Columbus, Ohio.

⁸ 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.

- make recommendations to standardize and make uniform Ohio statutes regarding abuse, neglect, and dependency cases.

Since 2004, the Supreme Court of Ohio's 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* was to initiate an "Alternative Response" child protection model in 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 Advisory Committee on Children, Families, and the Courts 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.

Ohio Senate Bill 238, enacted on June 21, 2006, included a provision authorizing an 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. Thus, statutory authority for up to 10 pilot sites was enacted.

In December 2006, the Supreme Court of Ohio released a Request for Proposals for an independent consultant to manage the design, implementation, and pilot evaluation of an Ohio alternative response protocol in cooperation with the Supreme Court of Ohio and ODJFS. Following a rigorous proposal review process, the AIM Team (American Humane Association, Institute of Applied Research, and Minnesota consultants) was selected for the project. The AIM Team initiated its work on the Ohio Alternative Response Pilot Project on June 1, 2007.

Figure 1 is a comprehensive description of the Pilot Project since the AIM Team initiated its work in Ohio.

Figure 1: Project Milestones

Project Milestones

2006

- January 26: Final report of Subcommittee on Responding to Child Abuse, Neglect and Dependency
- December 19: RFP issued by Supreme Court of Ohio

2007

- March: AIM Team selected by Supreme Court
- June 1: Ohio Alternative Response project begins
- June-July: Five Regional Forums on Alternative Response and RFP
- August: Minnesota Immersion
- September 12: Ten counties selected to pilot Alternative Response
- September 17-18: First meeting of Design Workgroup
- October 18-19: Design Workgroup meeting
- November 1-2: Design Workgroup meeting
- November 14-16: American Humane's 2nd Annual Differential Response Conference in Long Beach, Calif.
- November 29-30: Design Workgroup meeting
- November 30: Decisions of Design Workgroup finalized

2008

- January 28-29: Design Workgroup meeting
- February 11-12: Meeting of AIM Team and Ohio State Stakeholders
- March 13-14: Design Workgroup meeting
- May-June: Alternative Response training provided to all 10 pilot counties
- July 1: Nine of 10 pilot counties launch Alternative Response
- August: Alternative Response launch in 10th pilot county
- September 22-24: First in-person TA meeting with workers and supervisors
- September 25-26: Leadership Council meeting (previously called Design Workgroup)
- October: Released first issue of Ohio Alternative Response Quarterly newsletter
- November 12-14: American Humane's 3rd Annual Differential Response Conference, in Columbus, Ohio
- December 8: Presentation to Subcommittee on Responding to Child Abuse, Neglect and Dependency

2009

- January 12-14: In-person TA meeting with workers and supervisors
- February 23: Leadership Council meeting
- March 10-13: Solution-Focused Engagement training
- April 9: Presentation to Subcommittee on Responding to Child Abuse, Neglect and Dependency
- April 29-May 1: In-person TA meeting with workers and supervisors
- May 2: Family Listening Session in Columbus



Project Milestones

- May 14-15: Coaching in Guernsey County
- May 18-19: Leadership Council meeting
- June 15-16: Coaching in Tuscarawas County
- June 18-19: Coaching in Lucas County
- June 22-23: Coaching in Trumbull County
- June 25-26: Coaching in Licking County
- July 2: Presentation to Subcommittee on Responding to Child Abuse, Neglect and Dependency
- July 13-14: Coaching in Clark County
- July 16-17: Coaching in Ross County
- August 25-27: In-person TA meeting with workers and supervisors
- August 28: Research Brief issued on Accepted Child Abuse and Neglect Reports and Out-of-Home Placements After One Year
- September 8: Research Brief issued on Family Responses, Worker Responses, New Incidents and Placements After One Year
- September 14-15: Leadership Council meeting
- September 28-29: Coaching in Franklin County
- September 30: Randomized Control Trial ends
- November 11-13: American Humane's 4th Annual Differential Response Conference, in Pittsburgh, Pa.
- December 7: National Implementation Research Network training for Leadership Council
- December 8: Leadership Council meeting
- December 9: Meeting of AIM Team and Ohio State Stakeholders
- December 10: Revised Practice Training piloted in Trumbull
- December 13-14: Coaching in Fairfield County



2010

- January 4: "Signs of Safety" webinar
- January 7-8: Domestic Violence in Alternative Response training
- January 13: Two Research Briefs issued – one on Pathway Assignment and one on Preliminary Analysis of Select Family Feedback Concerning Alternative Response in Ohio
- January 14-15: Supervisory Coaching in Trumbull County
- January 19: Document titled *Alternative Response Fundamentals in Support of Ohio's Child Protection Practice Model* is finalized
- January 21-22: Coaching in Trumbull County
- March 9-10: Leadership Council meeting
- March 22-23: Coaching in Franklin County
- April 7: Final report presented to Subcommittee on Responding to Child Abuse, Neglect and Dependency
- April 28: Final report amended in response to Subcommittee feedback, submitted to Ohio Department of Job & Family Services and the Supreme Court of Ohio
- May 12: Advisory Committee approves report
- May 13-14: Ohio's Alternative Response Symposium





IV. PROJECT ACTIVITIES

On June 1, 2009, the AIM Team assumed its role as advisor and consultant to the State of Ohio and the planning, launch, implementation, and evaluation of the Ohio Alternative Response Pilot Project. Activities that were orchestrated, facilitated, and conducted by the consultation team provided a wealth of information from which to gain understanding of the environment impacted by, and the stakeholders invested in, the “adoption” of alternative response.

Request for Proposals

The Request for Proposals (RFP) was developed by the AIM Team in consultation with the Supreme Court of Ohio and ODJFS. The RFP was seeking applications from public children services agencies to become an Ohio alternative response pilot county. Specifically, the RFP invited applicants to:

1. Participate in a Design Workgroup that will guide the development of an alternative response system in Ohio. Participation will be ongoing throughout the life of the 27-month project.

2. Assess reports of child maltreatment using an alternative response family assessment model, as permitted under Ohio Statute, Amended Substitute Senate Bill 238.
3. Provide services for some families, as directed by the family assessment.
4. Participate in an experimental design evaluation of the program activities identified above.

The RFP was released and disseminated on July 24, 2007, with a proposal deadline of 5:00 p.m. Eastern time, August 31, 2007. Every county in Ohio received the RFP, and it was posted on the Ohio Child Law website (National Center for Adoption Law & Policy [NCALP]) — the host website for the project.

Regional Forums

Five Regional Forums, publicized by the Supreme Court of Ohio and ODJFS, were conducted at various locations in the state (i.e., Findlay, Akron, Lebanon, Athens, and Columbus) between June 25, 2007, and July 13, 2007. Representatives of each of the three AIM Team organizations conducted the 3-hour forums to provide the opportunity for representatives of counties that were considering applying as pilot sites for Ohio's Alternative Response Pilot Project to discuss alternative response concepts, gain consistent and clear information, and have their questions addressed regarding:

- The general features, characteristics, and philosophical constructs of alternative response systems;
- Various lessons from Minnesota's experience with implementation and how those lessons could support Ohio pilot sites;
- Evaluative results from child welfare systems implementing alternative response; and
- Project logistics and implementation issues, including:
 - Request for Proposals (RFP) process and timetable,
 - Design Workgroup,
 - pre-implementation readiness activities,
 - initial and ongoing training and technical assistance,
 - evaluation,
 - fiscal implications, and
 - roles, responsibilities, and expectations of pilot counties, the Supreme Court of Ohio and ODJFS, and the AIM Team.

All five of the forums were well-attended and provided public children's services agencies and their community partners with sufficient information to decide whether or not to respond to the RFP to become a pilot county for Ohio's Alternative Response Pilot Project.

Selection of Pilot Counties

Proposals from 13 counties were received in response to the RFP: Ashtabula, Clark, Fairfield, Franklin, Greene, Guernsey, Hamilton, Licking, Lucas, Ross, Sandusky, Trumbull, and Tuscarawas. The application review and selection process was the responsibility of the AIM Team. Eight members of the project team reviewed all of the proposals, based upon seven selection criteria set forth in the RFP: agency capacity, community capacity, target population, service delivery structure, evaluation capacity, anticipated challenges, and budget projections and financial commitments.⁹

Upon completing the review, the AIM Team recommended the following 10 counties for pilot status: Clark, Fairfield, Franklin, Greene, Guernsey, Licking, Lucas, Ross, Trumbull, and Tuscarawas. The counties selected for the pilot were representative of Ohio on the basis of geography, population, and public children service agency configuration. The recommendation was reviewed by ODJFS and the Supreme Court of Ohio and submitted to the Subcommittee on Responding to Child Abuse, Neglect, and Dependency for approval. The 10 selected counties were notified by telephone on September 12, 2007, and a *notice of selection* e-mail was sent the morning of September 13. Applicants that were not selected as pilot sites were notified by telephone (if available) on September 12, after the 10 selected counties had been notified. A *notice of non-selection* was sent via e-mail by the morning of September 13. The notice contained information on how to request review comments. The Supreme Court of Ohio and ODJFS issued a joint press release on September 13, after all applicants had received notification of the 10 selected proposals.

Ohio Design Workgroup/Leadership Council

The Design Workgroup was intended to be a governing body for the duration of the Ohio Alternative Response Pilot Project. It comprised two members from each of the 10 counties and constituent members, including representatives of State policy staff, National Center for Adoption Law and Policy, Public Children’s Services Association of Ohio, and the Institute for Human Services. Voting was limited to the pilot counties, and each county was entitled to a single vote. Decisions were made by majority vote, noting dissenting views, with opportunity to revisit a decision if relevant to do so.

The Design Workgroup had four major goals:

1. Develop the design elements for the Ohio Alternative Response Pilot Project, facilitated and supported by the AIM Team.
2. Formulate policies, guidelines, practice expectations, and other needs for implementation readiness.

⁹ These selection criteria are described in detail in the Request for Applications.

3. Identify Pilot Project evaluation expectations and the requirements and processes for implementation of the evaluation plan throughout the pilot's duration.
4. Establish and conduct an ongoing leadership forum for monitoring, review, feedback, and support throughout the project duration.

To date, there have been 12 Design Workgroup/Leadership Council meetings. The primary purpose of each meeting is identified below:

September 17-18, 2007: The primary purpose of the inaugural meeting of the Design Workgroup was to provide a project orientation, create a structure for working together, outline the deliverables that needed to be accomplished during the design phase, and provide an opportunity for pilot counties to explore their readiness for alternative response design and implementation.

October 18-19, 2007: The purpose of the second meeting was to provide all members with the reports of the individual Task Teams, provide a forum to discuss the work of each team, and integrate the separate areas into a comprehensive framework for the design of the Ohio Alternative Response Pilot Project. Based on a review of the framework, areas that required additional research, analysis, and/or discussion were identified so that work in these specific arenas could occur within each pilot county following the second meeting and in preparation for the third Design Workgroup meeting.

November 1-2, 2007: The third meeting was intended to provide all Design Workgroup members with the recommendations of the individual Task Teams, provide a forum to discuss those recommendations, and to decide, based on group deliberations, whether or not to accept each recommendation. The meeting provided the opportunity for each Task Team to continue its work through a face-to-face meeting. Based on a review of the progress to date, areas that required additional research, analysis, and/or discussion were identified, as well as strategies to address those areas. These specific issues were addressed with the participation of pilot county stakeholders following the third meeting and reported on at the fourth Design Workgroup meeting.

November 19-20, 2007: The primary purpose of the fourth meeting was to provide all Design Workgroup members with the decisions of the Workgroup to date, the recommendations of individual Task Teams, and a forum in which to discuss those recommendations, as well as to decide, based on group deliberations, whether or not to accept each recommendation. The meeting provided the opportunity for small-group topical discussions and for selected Task Teams to continue their work through a face-to-face meeting. There was a dedicated focus on the training and education needs of stakeholders. Finally, the work that remained to facilitate readiness for pilot implementation, and the vehicles by which that work would be accomplished, were identified.

January 28-29, 2008: The fifth meeting was intended to provide all pilot counties with an opportunity to present their preliminary alternative response design to the members of the

Design Workgroup and identify those areas that presented challenges and required assistance. The meeting provided ODJFS with an opportunity to respond to the decisions that had been made by the Workgroup to date. The SACWIS Steering Committee provided a detailed work plan to effectively address the needs of the Ohio SACWIS system. Selected Task Teams continued their work through a face-to-face meeting and a forum to discuss the recommendations of these teams. Finally, outstanding work that remained to be accomplished both by the pilot counties and the Design Workgroup was identified.

March 13-14, 2008: The primary purpose of the sixth meeting of the Design Workgroup was to ensure that all pilot counties possessed the information needed and, to the extent possible, the capacity to initiate their county-specific Alternative Response Systems beginning July 1, 2008.

September 25-26, 2008: The primary purpose of the seventh meeting of the Design Workgroup was to share and address initial alternative response implementation issues from multiple perspectives. The Design Workgroup members reviewed and updated the functions and responsibilities associated with the Workgroup and its Task Teams and created an action plan that is responsive to these revised roles and responsibilities. At this meeting, the Design Workgroup formally changed its name to Leadership Council to better reflect the functions it would perform from this point in time forward.

February 24, 2009: The eighth meeting of the Leadership Council was designed to share and address alternative response implementation issues since the September 2008 meeting. The Leadership Council members updated the functions and responsibilities associated with the Council, determined a scope of work for the future, and initiated the tasks associated with the updated work plan.

May 18-19, 2009: The purpose of this ninth meeting of the Leadership Council was to share and address alternative response implementation issues since the February 2009 meeting and develop the plans/processes to monitor quality and foster alternative response sustainability in existing pilot counties, as well as spread understanding of alternative response to the other 78 counties in Ohio.

September 14-15, 2009: The purpose of the 10th meeting of the Leadership Council was to share and address alternative response implementation issues and county-specific transition plans for the continuation of the alternative response pilot after the evaluation had concluded. The Leadership Council identified and planned activities and tasks that promoted the ongoing practice of alternative response and fostered model fidelity and sustainability in the midst of an economic downturn.

December 7-8, 2009: The purpose of the 11th meeting of the Leadership Council was to increase the understanding of implementation science and its relevance to Ohio's Alternative Response Pilot Project, develop consensus on a practice model among the Leadership Council membership, and identify ways to assess and measure fidelity to this practice model.

March 9-10, 2010: The purpose of the 12th meeting of the Leadership Council was to discuss preliminary information contained in the Final Report to be presented before the Subcommittee on Child Abuse, Neglect, and Dependency and to obtain input from the Leadership Council on areas in which gaps remain. Opportunities were provided to reflect on historical decisions, amend based on actual Pilot Project experiences, and consider the future roles and responsibilities of the Leadership Council as additional Ohio counties pilot alternative response. Five new members of the Leadership Council observed this process. They each represented one of the counties awarded as a research and demonstration site for the National Quality Improvement Center on Differential Response in Child Protective Services.

Task Teams

At the inaugural meeting of the Design Workgroup, it was readily apparent that much had to be accomplished in a short amount of time in order to launch the pilot sites in a timely way. Task areas and sub-tasks were identified by the AIM Team and disseminated to pilot leaders so they could select the task group(s) they would like to work on and designate particular individuals to particular groups. Pilot leads were asked to solicit the involvement of other agency staff and community/service providers so that others with expertise could benefit the task group.

Each of the Task Teams was facilitated by a member of the AIM Team, and multiple conference calls were convened to accomplish assignments between Design Workgroup meetings. The decisions of the Task Teams were presented to the larger group for discussion, deliberations, and decisions. The five Task Team groups launched in September 2007 were dedicated to these areas: Principles, Administration and SACWIS, Training and Education, Pathway Assignment¹⁰ and Assessment, and Post-Assessment to Case Closure.

Principles

The Principles Task Team was organized under the Design Workgroup during the September 2007 meeting to discuss terminology, client participation, and rights preservation and practice expectations. The team of seven county representatives, facilitated by Amy Rohm, AIM Team, and Carla Carpenter, NCALP, met by phone three times at the start of the project and met in person at the Design Workgroup meetings to finalize a terminology list for common understanding of language and a set of principles to guide the development and implementation of alternative response for Ohio. These documents were vetted and approved by the Design Workgroup in spring 2008, and the team members decided they had achieved their goals and would join other task teams.

Final principles approved unanimously by the Design Workgroup are as follows:

¹⁰ The Task Team was referred to as the *Screening* and Assessment Task Team. This created considerable confusion, as “screening” is typically understood to be the process by which there is a determination as to whether a report of alleged maltreatment is accepted by the child protection agency. To ensure accurate understanding of the material presented, the author has opted to use terminology that accurately reflects the domain of the Task Team.

Principles: All CPS Interventions

- Child safety comes first, and all policies, guidelines, and practices are child-centered and family-focused.
- CPS emphasizes engagement of families in strengths and needs discovery while attending to root causes and behaviors which interfere with child safety.¹¹
- Child safety is best achieved through active, collaborative, and respectful engagement of parents, family, community, and all other CPS stakeholders.
- When families cannot assure child safety, it is necessary for the agency, courts, community, and/or extended families to make appropriate efforts to provide protection.

Principles: Alternative Response Specific

- Families screened into the child welfare system and identified as eligible for alternative response have the opportunity to make an informed decision to participate in alternative response or to be served by the traditional response.
- Families are more easily engaged in a partnership when the labels of perpetrators and victims have been removed.
- Alternative response systems are designed to identify family needs and find creative solutions, including informal supports and formal services.
- Child protective agencies should respect family choices in the selection of services.

Terminology^{12, 13}

- Pathway terminology will be referred to as the *Traditional Response* and *Alternative Response*.

Administration and SACWIS

This Task Team, facilitated by the AIM Team's Barry Salovitz and ODJFS's policy staff member Julie Wirt, was charged with identifying, designing, and documenting rules, policies, and

¹¹ This principle was amended during the March 2010 Leadership Council meeting and replaced with the following two principles: *CPS emphasizes family engagement and involvement in all aspects of our practice* and *CPS supports assessment and intervention processes that focus on family strengths while addressing the underlying conditions and contributing factors that impact child safety*.

This specific change to the principles will be reflected in all relevant materials. The Leadership Council recommended (March 10, 2010) that time be allotted to provide a comprehensive review of the principles that were approved by this body in December 2007.

¹² Despite this terminology decision, the group continued to be baffled for the duration of the pilot as to the appropriate terminology to use for the two pathways.

¹³ Recommendations for future changes in this terminology are described in detail in *Section 3: Recommendations for a Differential Response Statutory/Rule Framework in Ohio*. An abridged version of these details is provided in this document's *Summary of Recommendations*.

procedures associated with the administration of the Ohio Alternative Response System. Five administrative components were identified for the Task Team's purview. *Confidentiality* and *records retention* policies and procedures were necessary to ensure that staff and key stakeholders have appropriate and necessary access to case information while maintaining the rights of clients to privacy protections. *SACWIS* is the system of record for provision and payment for agency resources. Support for Pilot Project implementation needed to include *SACWIS* functionality that was congruent with the design of the alternative response system's services coordination requirements. Pilot needs had to be identified, designed, and embedded within Ohio *SACWIS* to allow for decision support, documentation, data integrity, data retrieval, and report generation. *Disclosure* was incorporated to ensure that the administration of the pilot supported the principles of openness and transparency to both agency clients and community stakeholders. A focus on the *community* was added to ensure that policies and guidelines were developed to enhance project involvement and support by community stakeholders as key partners.

Final decisions relevant to the Administration and *SACWIS* Task Team, approved by the Design Workgroup, are as follows:

- Since policy regarding records retention cannot be altered, the Design Workgroup agreed to drop it as an issue for consideration.
- The Task Team will take the lead in developing a communication package and share it with the Design Workgroup and work with Casey Family Programs on further development.
- The Task Team will convene an ad hoc meeting, face to face, of selected pilot site representatives and fiscal officers with ODJFS fiscal officials to construct a clear and useful procedures guide for the receipt, use, and accounting of fiscal resources available to the pilot sites.
- Convene an ad hoc meeting of Task Team members, other interested Workgroup members, and selected *SACWIS* pilot site users, face to face, to identify specific *SACWIS* system locations, data elements, and rules that need to be changed. This examination would provide the foundation for a comprehensive change request package that would be presented to ODJFS for review and decision.

Recommendations from the Administration and *SACWIS* Task Team for the Principles Task Team (with regard to alternative response specific principles):

- Interactions and services are respectful and mindful of the rights of the families and children we serve.
- Families have the right to openness, transparency, appropriate disclosure, and protection of privacy.
- There is a mutual responsibility between Children's Services and service providers for openness, transparency, appropriate disclosure, and protection of privacy.

Training and Education

This Task Team was charged with specifying essential training and education needs and implementation strategies necessary to support the Ohio Alternative Response System. Four priority components have been identified. The *traditional assessment* was maintained as an assessment pathway option with an enhanced focus appropriate for the needs of these particular cases. Similarly, the alternative assessment pathway had specific *practice expectations* expected to enhance Pilot Project implementation fidelity and strengthen the achievement of positive outcomes. Both pathways required the identification of training needs and implementation strategies for child protection staff — practitioners, supervisors, managers, and administrators. SACWIS had been included to specify training requirements for Alternative Response System and SACWIS integration. A focus on *community stakeholder education* was included to ensure the identification of key information and learning points that best convey to the community the pilot's purpose, goals, processes, essential partnerships, and anticipated outcomes.

Final decisions relevant to the Training and Education Task Team, approved by the Design Workgroup, are as follows:

- The Training and Education Task Team should address the individual county training needs and strive to be responsive to each county as to how it would like the training to be delivered.
- Convene meetings with selected representatives of the AIM Team, Ohio Child Welfare Training Program, ODJFS, and representatives from the Design Workgroup to review Ohio and other relevant alternative response/differential response national curricula to further develop next steps and integrate them into Ohio's curriculum.
- Develop a universe of knowledge and skills (competencies) that represent best practice in alternative response and, as part of the process, develop and utilize an individual training needs assessment.
- Use the training curricula outline created and written in the November 5, 2007, Training Task Team minutes as a launch pad for discussion.
- All staff who perform child protection functions must complete relevant alternative response training.
- Screeners and their supervisors should be adequately trained and prepared to perform their functions.
- Review, support, and incorporate the work of the Child Welfare Research Partnership Task Force that will be developing practice standards for screening, and inform the task force of alternative response needs.

- Request that Olmsted County, Minn., AIM Team members, in consultation with the Training Task Team, provide training about their alternative response process to interested pilot sites.

Pathway Assignment¹⁴ and Assessment

This Task Team, facilitated by Minnesota expert Dave Thompson, was charged with identifying, designing, and documenting rules, policies, protocols, procedures, and activities associated with the Ohio Alternative Response Pilot Project, from the initial call receipt and screening decision through the case opening or closing decision.

Six practice-related components were identified for the Task Team’s purview. Design of the Alternative Response System *workflow* (see page 97) was to be established and to depict the key processes, activities, and timeframes for the primary pathways, decisions, activities, and outputs. The design of *pathway assignment* and *reassignment* established criteria and decision rules, along with associated policies and procedures for assigning or reassigning screened-in reports to the most appropriate alternative response pathway. A component of the workflow was the key *case activities* and related *timeframes*. The case activities delineated all the required and/or optional activities for implementation of the Alternative Response System, from the screening through assessment and case determination phase, congruent with established policies. Related timeframes would be established to set parameters for timely completion, model fidelity, and evaluation requirements. The *coordination of CAPMIS (Comprehensive Assessment and Planning Model - Interim Solution)* and *SACWIS* entailed multiple considerations to ensure appropriate integration of these two major initiatives with the pilot Alternative Response System. These considerations included differential application of CAPMIS tools and timeframes and the development of additional assessment and/or case planning tools. The design of the Alternative Response System workflow, related policies and procedures, and differential CAPMIS application were analyzed in relation to the current SACWIS design. SACWIS redesign requests would be specifically identified with rationales for Alternative Response System support criticality. *Tool development* necessitated an analysis of key case practice expectations, case decisions, decision criteria, and decision rules. The analysis was followed by the identification of appropriate documentation, information sharing, and decision support tools for implementation fidelity, accountability, fiscal, and evaluation purposes. Lastly, *case opening* is a key decision and outcome during or at the conclusion of the defined assessment period. Policies and procedures needed to be developed as part of the overall Alternative Response System design to support program goals, application consistency, and evaluation requirements.

¹⁴ The Task Team was referred to the *Screening* and Assessment Task Team. This created considerable confusion as “screening” is typically understood to be the process by which there is a determination as to whether a report of alleged maltreatment is accepted by the child protection agency. To assure accurate understanding of the material presented, the author has opted to use terminology that accurately reflects the domain of the Task Team.

Final decisions relevant to the Pathway Assignment and Assessment Task Team, approved by the Design Workgroup, are as follows (Table 1):

Table 1: Pathway Assignment Criteria

Traditional Pathway Required	Discretionary Guidelines
Felony child endangerment, felonious assault, felony domestic violence	Currently open traditional assessment
Criminal sexual conduct, including: <ul style="list-style-type: none"> ◦ Rape ◦ Sexual battery ◦ Unlawful sexual conduct with a minor ◦ Gross sexual imposition ◦ Sexual imposition ◦ Importuning ◦ Voyeurism 	Frequency, similarity, or recentness of past reports
Sexual abuse of a child or an abused child who is a victim of sexual activity	Long-term court-ordered placement will be needed
Homicide, including: <ul style="list-style-type: none"> ◦ Aggravated murder ◦ Murder ◦ Voluntary manslaughter ◦ Involuntary manslaughter ◦ Reckless homicide ◦ Negligent homicide 	Need legal intervention due to violent activities in household
Parent/legal guardian has declined services in the past	
Reports requiring a specialized assessment	Parent/legal guardian is unable or unwilling to achieve child safety
Reports requiring a third-party assessment	Past maltreatment concerns not resolved at previous closing
Reports requiring involvement of a Child Advocacy Center ¹⁵	Previous child harm offenses charged against the alleged perpetrator
Suspicious child fatality	Other local considerations

Additional decisions relevant to the Pathway Assignment and Assessment Task Team, approved by the Design Workgroup, are as follows:

- CAPMIS-related recommendations:

¹⁵ The Ohio Alternative Response Pilot Project interim rule specified that reports that require the involvement of a Child Advocacy Center be investigated. It is suggested that this requirement be reexamined.

- The CAPMIS safety assessment will be used for the duration of the pilot with a view toward changing traditional response language.
- Use of Family Assessment language should continue with an eye toward changing the traditional response language.
- Section 7 of the CAPMIS Family Assessment, with the exception of the risk assessment and final case decision that includes evaluation, will be eliminated.
- Conditions in which there is a pathway change from traditional to alternative response:
 - Upon further review, the case does not require a traditional assessment.
- Conditions in which there is a pathway change from alternative to traditional response:
 - County approves a traditional response, per family request.
 - New report that requires a traditional assessment.
 - Level of family engagement is insufficient to allow the completion of the assessment process.
- The criteria for opening a case beyond assessment are:
 - Unresolved safety issues.
 - High to intensive risk level, absent a discretionary override.
 - Joint agreement of services regardless of risk level.
- In considering what constitutes “initiating” an assessment¹⁶, it is recommended to expand the current rule to include additional options for initiating the assessment case, including:
 - Letter to the family (the letter must be standardized and must include a means to allow the family to speak to someone who is knowledgeable about the case after-hours or on holidays).
- Phone call to the family.
- Face-to-face contact with the family (preferably not a drop-in).
- Phone call with a collateral source with knowledge of the family and of child safety.
- Whenever possible and appropriate, counties are encouraged to utilize specialized workers, and alternative assessment workers will carry families through the completion of services.
- Using the Minnesota Service Plan as a basis, incorporate three sections of the Fairfield County Service Plan — identified supports, strengths, and needs information, and

¹⁶ The point of initiation is to assess/assure child safety.

aftercare service plan — in order to create a simplified case plan (Task Team amended service plan).

Timeframes

- Timeframe for screening emergency report will remain 1 hour from the time the referral was received.
- Screening decisions will be determined in no more than 4 hours¹⁷ after the receipt of the referral, and pathway assignment will be determined as soon as possible, no more than 24 hours after the report was screened in (the receipt of the referral).
- The current initiation timeframe of no more than 24 hours from the time the report was screened in will remain as is.
- Screening decisions must occur before initiation, and initiation can occur before or after pathway assignment.
- Extend the timeframe for completing the safety assessment and face-to-face contact to no more than 4 working days from the time the report was screened in, to be consistent with CAPMIS guidelines.
- Extend the timeframe for entering the safety assessment into SACWIS to no more than 3 working days.
- Up to 45 calendar days after the report was screened in to complete family assessment.
- Service plan completed within 15 working days of completion of the family assessment.
- All service plans reviewed every 90 calendar days.
- Face-to-face contact no less than monthly (risk guided and supervisory decided).

Post-Assessment to Case Closure

This Task Team, facilitated by Rob Sawyer from Olmsted County, Minn., was charged with identifying, designing, and documenting rules, policies, protocols, procedures, and activities associated with the Ohio Alternative Response System from the case-opening decision to subsequent case closing. Five practice-related components were identified for the Task Team’s purview. A component of the workflow will be key *case activities* and related *timeframes*. The case activities delineated all the required and/or optional activities for implementation of alternative response, from the post-assessment to case-closing phase, congruent with established policies. Related timeframes were established to set parameters for timely completion, model fidelity, and evaluation requirements. *Services coordination* was added to ensure that the design of the alternative response system establishes policies and procedures

¹⁷ This 4-hour rule was extended to 24 hours *during* the Pilot Project. This is consistent with the recommendation that was made early in the project to revisit the timeframe for screening decisions, prior to statewide implementation, with the intent of expanding the allotted time.

to provide services and resources to families beyond the initial assessment phase through case closing. *Core services* are identified as an important resource, and the expectation to establish a minimum array of services throughout all pilot sites required examination. The Task Team was charged with evaluating the importance of core services and identifying which services are appropriate for inclusion in the post-assessment to case-closing phase. *Case closing* is a key decision and outcome for post-assessment cases. Policies and procedures were to be developed as part of the overall alternative response system design to support program goals, application consistency, and evaluation requirements.

Final decisions relevant to the Post-Assessment Task Team, approved by the Design Workgroup, are as follows:

- The term “post-assessment services” means the point at which the assessment of safety has been completed and the family and the agency agree to services.
- Use the Family Assessment (minus the Preliminary Case Decision Matrix) to assist in making the decision to close the case or continue to provide agency services.
- Any new report or concern while in the alternative response track or in an “open” ongoing status will be screened back through intake and pathway assignment. If the new report is screened in, it will be directed back to alternative response, if it does not meet the traditional criteria, based on the presenting concern.
- All new abuse/neglect reports screened in that meet the criteria for traditional response will require any case in the alternative response pathway to be reassigned.
- Any open traditional response case cannot be considered for alternative response when there is a new screened-in allegation.
- Guideline (County Discretion): Court involvement will not necessarily disqualify alternative response pathway assignment or reassignment.
- Guideline (County Discretion): In instances where there is a new allegation and the case is screened in, worker assignment (whether the same alternative response worker or if a different worker is assigned) will be at the discretion of the county, on a case-by-case basis.
- Guideline (County Discretion): When the assessment of a new report on an ongoing case is assigned to a different worker, the ongoing worker should team with the new worker — whenever possible — for the duration of the new report.
- Guideline (County Discretion): Whenever possible, and as early as possible, the agency should engage community providers in partnership with the family. When the agency connects the family with community resources, it is recommended that this “personal introduction” occur in a face-to-face meeting with the agency, family, and community partner. Information about the family is shared in a respectful and family-friendly manner.

In-Person Meetings

Dave Thompson and Brenda Lockwood¹⁸ from Minnesota described an ongoing opportunity for workers and supervisors to gather quarterly, on a regional basis, to discuss their practice and provide peer consultation to one another. This group was formed by workers and supervisors who wanted to know more about how other counties were handling cases in alternative response. The 10 pilot counties in Ohio decided that a similar opportunity would be beneficial to them.

The AIM Team organized five sets of in-person meetings with workers and supervisors, beginning in September 2008 and running through February 2010. To make travel easier for outlying counties, the meetings occurred in Columbus, New Philadelphia, and Mansfield and ranged from 1.5 hours to 5 hours, depending on the desires of the group. Workers and supervisors met separately until August 2009, when the workers requested that their meeting be combined with the supervisors' meeting. Workers wanted their supervisors to hear the same messages, struggles, and strategies they were hearing during meetings, so the supervisors could support the workers once they were back in their agencies. The last three meetings were combined for workers and supervisors, which seemed to be an optimal structure for everyone.

Initially, the meetings focused on the differences between alternative response and traditional response, pathway assignment, the family service plan, and evaluation requirements. The meetings have shifted to more in-depth topics, such as how to handle substance abuse cases or mapping cases using the "Signs of Safety" framework. The workers and supervisors have commented numerous times on the benefits of these meetings, the knowledge they gain from their peers across counties, and the support they feel by attending.

Training

AIM Team Providers

Training for the counties has been steered by the competencies identified by the AIM Team and the needs identified by the Leadership Council. As mentioned earlier, a Training Task Team was initiated to identify the training needs for the counties. Amy Rohm also conducted a training needs assessment with all 10 counties to create and schedule the initial trainings. After each training delivery, feedback from each county was sought as a means to improve and revise the original curriculum. The second round of Practice training started in December 2009 and will continue through May 2010 for interested counties (see Table 2).

Supplemental trainings were also offered to the counties to support their practice and further improve the knowledge and skills of workers and supervisors. Casey Family Programs also invested significant resources in trainings that support the skill-building and engagement techniques related to alternative response. Continuing Education Units (CEUs) for social workers and Continuing Legal Education credits (CLEs) were offered for most trainings.

¹⁸ Brenda Lockwood is currently the Manager of Differential Response at the American Humane Association. Prior to March 2009, she worked for the Minnesota's Department of Human Services.

Table 2: Training and Coaching Dates from April 2008 through March 2010

County	2008 Orientation	2008 Procedures	2008 Practice	2009-2010 Overview	2009-2010 Practice	Coaching - Round 1	Coaching - Round 2	Coaching - Round 3 (Supervisors)
Clark	May 6, 2008	May 20, 2008	June 24, 2008			July 13-14, 2009		
Fairfield	April 29, 2008	May 5, 2008	May 7, 2008 (Fairfield, Licking & Ross)			October 13-14, 2009		
Franklin	April 30 & May 2, 2008	May 14 & 16, 2008	May 19, 2008	November 25, 2009	November 26 & 27, 2010-canceled	September 28-29, 2009	March 22-23, 2010	
Greene	April 30, 2008	May 22, 2008	June 24, 2008		March 2 & 3, 2010	October 28-29, 2009		
Guernsey	May 8, 2008	June 10, 2008	June 12, 2008 (Guernsey & Tuscarawas)			May 13-15, 2009	May 2010	
Licking	May 1, 2008	May 13, 2008	May 15, 2008 (Fairfield, Licking & Ross)			June 25-26, 2009		
Lucas	May 9, 2008	June 16, 2008	June 17, 2008	February 22, 2010	February 23 & 24, 2010	June 18-19, 2009		
Ross	May 1, 2008	May 6, 2008				July 16-17, 2009		
Trumbull	May 7, 2008	May 28, 2008	May 29, 2008		December 10, 2009	June 22-23, 2009	January 21-22, 2010	January 14-15, 2010
Tuscarawas	May 8, 2008	June 11, 2008				June 15-16, 2009		
Other Trainings for All Pilot Counties:	Solution-Focused/Strengths-Based Engagement (March 10-13, 2009)	Signs of Safety Webinar (January 4, 2010)	Domestic Violence and Alternative Response (January 7-8, 2010)	Implementation Science (December 7, 2009)				

Orientation/Primer

Orientation training was created by AIM to introduce alternative response to a wide audience, including all agency staff and any community partners and stakeholders. Each county scheduled at least one Orientation session, for a total of 13, 3-hour sessions between April 30, 2008, and May 9, 2008. These sessions provided participants with general knowledge about alternative response, the history of its development in Ohio, Ohio's alternative response approach, and data from other states supporting the practice. Many counties found this session to be the first of many opportunities to engage their local stakeholders and/or their entire agency in this practice. ODJFS sponsorship provided 2.75 CEUs and 2 CLEs for training participants.

Practice (Exceptional Engagement)

Practice training was developed to focus on the engagement and core practice skills, such as assessment, that are requisites in successful alternative response cases. The training focused on good social work practice skills and attempted to build upon the knowledge and skills workers already possessed. The 1-day workshop challenged participants to think about engagement differently, to learn techniques to enhance practices with children and their families, and to improve the experience of families involved in the child welfare system. This training was offered seven times throughout the counties between May and June 2008. ODJFS sponsorship provided 4.5 CEUs for participation in this training. As mentioned above, after the trainings concluded, feedback was solicited from each county, via phone, to find ways to improve the trainings. The Leadership Council urged AIM to create revised 1-day Practice training. Brenda Lockwood took the lead amending the curriculum, and it was first delivered in December 2009. The Practice training will be offered several more times before it is revised again for a final product to be shared with the contractors of this project. Through OCWTP sponsorship, 6.5 CEUs are offered to training participants.

Learning competencies and objectives for this Practice training offered in 2009-2010 are shown in Figure 2.

Figure 2: Learning Competencies and Objectives**LEARNING COMPETENCIES AND OBJECTIVES****COMPETENCY 1**

The participant is able to articulate elements of the history and guiding philosophy of alternative response processes.

OBJECTIVE 1.A. – Recognize how and why differential response has developed in the United States.

OBJECTIVE 1.B. – Articulate the development of alternative response within Ohio.

COMPETENCY 2

The participant knows the core principles and values of alternative response and how these principles and values align with and differ from those of a traditional investigation.

OBJECTIVE 2.A. – Examine his/her perceptions of the families served by child welfare systems and how such perceptions influence worker-family engagement.

OBJECTIVE 2.B. – Describe the commonalities between traditional and alternative response assessments.

OBJECTIVE 2.C. – Recognize the value of developing deeper partnership with families in examining and addressing their needs from an assessment and strengths-based perspective.

COMPETENCY 3

The participant is aware of family driven assessment and engagement strategies.

OBJECTIVE 3.A. – Describe the difference between, and strategies for, family-driven and system-driven case work.

OBJECTIVE 3.B. – Describe strategies to address family engagement challenges.

OBJECTIVE 3.C. – Understand the importance of family-friendly, partnership-based language.

OBJECTIVE 3.D. – Demonstrate how to incorporate culturally sensitive and culturally competent practices within an alternative response case.

COMPETENCY 4

The participant knows how to build partnerships with families to assess and address family needs.

OBJECTIVE 4.A. – Understand how individual interests and strengths-based practice support effective engagement with families.

OBJECTIVE 4.B. – Utilize the “Six Principles of Partnership” in developing relationships with families.

Procedures and Pathway Assignment (Rules, Tools, and Forms Training)

The Leadership Council voted and made several decisions regarding rules and tools that would be used during the Pilot Project. To communicate these changes and incorporate them into practice, a procedures training module was developed by AIM, focusing on the timeframe requirements and the use of forms and tools in alternative response. A second module accompanied the procedures training and focused on pathway assignment decision making, recognizing that deciding which reports would be eligible for alternative response was extremely important to the success of the evaluation. To challenge the thinking of workers and supervisors, this training focused on answering one of these questions: “How will utilizing a traditional response benefit this family?” or “What would you do differently in a traditional response that you can’t do in an alternative response?” Through ODJFS sponsorship, 4.5 CEUs were offered for attending this training.

Competencies for this training are:

1. Understands the differences between more-traditional strategies and alternative response strategies, and knows the circumstances under which each approach is used.
2. Knows the mandatory and discretionary criteria to be used for case assignment into traditional and alternative response pathways, and the circumstances under which a supervisor could override a case assignment based on these criteria.
3. Understands that families eligible for an alternative response may choose to have a traditional response.
4. Knows Ohio Administrative Code rules and agency procedures for cases assigned to the alternative response pathway and how these differ from rules and procedures regulating the traditional response.
5. Understands the importance of using safety and risk assessments to assure children’s safety in traditional and alternative response pathways.
6. Knows criteria to determine when alternative response cases should be closed and when they should be continued for post-assessment services.
7. Knows how to use the alternative response-specific tools and forms with families in the alternative response pathway.
8. Can work with the family in the development and review of a service plan in alternative response.
9. Can facilitate or deliver appropriate short-term services to families in alternative response tracks.

Domestic Violence

Rob Sawyer and Sue Lohrbach from Rochester, Minn., have been using their version of alternative response, called “family assessment response,” for over 10 years. They have created a unique way of responding to domestic violence reports and offered 2 days of trainings to all 10 pilot counties in Columbus on January 7-8, 2010. Thirty-eight people participated in this training to learn about how to integrate alternative response in cases where domestic violence is disclosed. Through sponsorship from OCWTP, 4 CEUs were offered to participants. Almost all participants felt that this training was very helpful and provided useful information, but they had concerns about the “how to” within their own agency and structure.

Solution-Focused and Strengths-Based

Dave Thompson of Minnesota provided numerous training suggestions for consideration by the Leadership Council. Bob Bertolino spent a significant amount of time training in Minnesota around solution-focused and strengths-based engagement in Minnesota’s child welfare system. With support from the Leadership Council, the AIM Team contracted with him to provide four days of overview training on March 10-13, 2008, in three locations. Through the OCWTP, 6.5 CEUs were offered to all participants. This training provided an introduction to the solution-focused and strengths-based concepts and language that workers can use when interacting with families, and which supervisors can use when interacting with workers. Bertolino comes from a therapeutic background, and some participants struggled with his examples from therapy, but his examples pushed workers to think of themselves less as “case managers” and more as social workers. Many found his concepts and examples to be very helpful.

Signs of Safety

On January 4, 2010, a Signs of Safety webinar was offered by AIM to provide more information around a concept that had been introduced to the counties in numerous other venues, including coaching, in-person meetings, differential response conference presentations, and Leadership Council meetings. Andrew Turnell’s framework, called Signs of Safety, is a solution-focused approach to child welfare which focuses on in-depth assessments, questioning approaches, and tools that assess and build safety for the child. Carver County, Minn., has been implementing Signs of Safety since workers were first trained by Turnell in 2005. This practice has spread across many counties in Minnesota, as well as other states and countries that have found that it creates extraordinary changes to their practice. About 30 phone lines called in for the webinar, with many people joining in groups from around the state. AIM hopes to offer this webinar again in the future, as there was very strong interest.

National Implementation Research Network Overview

In response to the collective interest of ODJFS, Supreme Court of Ohio, and American Humane, the services of the National Implementation Research Network (NIRN) were contracted to provide a 1-day “institute” on “System and Practice Change through an Implementation Lens.” This institute was convened on the first day of the December 7-8, 2009, Leadership Council meeting, and directors of pilot county agencies who were not already in attendance as

Leadership Council members were asked to join the meeting. Invitations were also extended to select ODJFS staff and additional staff of affiliated agencies. The goals of this institute were ambitious: to provide an orientation to Implementation and Systems Change Frameworks; provide an opportunity to “try on” the ideas with pilot and pre-implementation counties in mind; and explore the concept of scalability and next right steps in implementing the alternative response approach statewide. In debriefing the Leadership Council members about their experience with this NIRN institute, the most common response was their desire to have received this information earlier in the process. During the debrief of NIRN’s material, the following six themes came up, about which Leadership Council members were interested in pursuing additional information:

- Interview Process
- Coaching
- Readiness
- Drivers of Implementation
- Use of Teams
- Technical vs. Adaptive Work

In response to the 1-day institute, NIRN was asked to present foundational material during a general session at Ohio’s Alternative Response Symposium in May 2010 and a breakout/workshop session that would lend itself to additional details for those who want to explore implementation science in greater depth.

Training Provided by Casey Family Programs

Casey Family Programs supported a range of training and capacity-development opportunities that were identified by the county sites as most needed. These included programming for working with intimate partner violence in an alternative response framework and expanded mediation opportunities.

The **Domestic Violence/Intimate Partner Violence (DV/IPV) Collaborative’s** purpose is to develop a model response plan in relation to intimate partner violence when addressed through an alternative response pathway. The initiative will explore avenues for building internal agency capacity, as well as community partnerships and resource development. The following objectives were established:

- Develop worker response skills, particularly in relation to DV/IPV concerns.
- Engage service providers and assist community partners in developing programs and services that effectively address DV/IPV concerns.
- Develop screening and response protocols in relation to DV/IPV-related cases.

- Establish capacity within the child welfare agency as an IPV resource using technical assistance and consultation from both Ohio and nationwide experts and resources.
- Provide training for agency staff in order to support a sustainable Model DV/IPV Response Plan that will continue after consultation and technical assistance concludes.
- Collaborate with community partners to develop a sustainable Model IPV Response Plan that:
 - establishes a common vision among community partners who work with families on an ongoing basis;
 - includes strategies for meeting the needs of children and non-offending parents, as well as strategies for improving responses to the aggressor;
 - identifies and utilizes existing local and statewide resources, as appropriate;
 - includes instruction for batterer intervention counselors; and
 - develops a structure for peer case review and/or an equivalent, as identified by jurisdiction.

County demonstration sites participated in a series of training and technical assistance activities to develop a community-specific response plan addressing the intersection of child maltreatment and IPV. In October 2009, nine alternative response counties participated in an informational stakeholder meeting about the Ohio IPV Collaborative during the Ohio Domestic Violence Network’s *Prevention in Progress Summit*. Counties were invited to submit proposals to become a demonstration site for the Ohio IPV Collaborative. In November 2009, four counties — Clark, Fairfield, Franklin, and Ross — were chosen to participate in the project as demonstration sites.

David Mandel & Associates provided training and technical assistance to the counties based on their *Safe and Together* consultation model. The model is designed to “support the agency’s mission to promote the safety, permanency and well-being of children by improving case practice, elevating staff competencies and addressing practice, policy and resource challenges.”¹⁹ Consultants worked with agency staff to develop a model that:

- addresses the entire family unit;
- helps staff identify the impact of domestic violence on the children;
- assists staff in developing plans to intervene with the perpetrator, create effective partnerships with the protective parent, and meet the needs of the children in the home; and

¹⁹ Connecticut Department of Children and Families Domestic Violence Consultation Initiative: A State Child Welfare Agency Response to Domestic Violence. David Mandel, MA, Statewide Services Administrator, March 2008.

- assists staff in developing plans that are culturally competent and sensitive to the intersection of domestic violence and mental health issues and substance abuse.

Demonstration counties, the consultant team, and coordinators from the National Center for Adoption Law and Policy have established an aggressive schedule for training and stakeholder meetings.

Expanded Mediation Opportunities are a complementary element of alternative response programming. Project sites asked both for expanded access to mediators and enhancement of mediation skills for caseworkers. Working with the Dispute Resolution Section of the Supreme Court of Ohio, the State established an action plan and offered a menu of sessions that allowed participants to gain the skills and credentials that are appropriate to the need. Sessions were being offered on a regional basis and included:

- **Basic Mediation Training:** This training provided participants with the ability to differentiate between mediation and counseling, social work, or other helping professions. They learned the fundamental principles and core values of mediation, such as client self-determination, confidentiality, and empowerment. By covering the basic steps of mediation, this training enabled participants to improve interventions with clients, as well as communications to resolve self-conflict. This training also identified strategies that mitigate the effects of racial/ethnic disproportionality and encourage lasting connections to family friends and community, focusing on understanding the psychological dynamics of the parents and the impact of the conflict on the children. This training discussed the ethical issues inherent in this role and presents an overview of standards of practice.
- **Uniform Mediation Act Training:** The Uniform Mediation Act (UMA) was adopted in Ohio on October 29, 2005. This training was intended to familiarize participants of the act's provisions, including the scope of the act. Participants discussed specific privileges and exceptions to those privileges with a comparison to confidentiality, the role of party and non-party participants, and the rights of clients.
- **Domestic Abuse Issues:** Mediators and other professionals learn how to screen cases for the presence of domestic violence and how to assess which cases may be appropriate for mediation. They learned the dynamics of domestic abuse, how it affects clients who may appear for mediation, and appropriate techniques for safe termination, referral, or mediation. The objective of this program was to expose mediators and other professionals to the latest information regarding domestic abuse and how it might impact clients who may appear for mediation. The program taught mediators best practices to use for screening, mediating, and enhancing court/community resources for working with this clientele.
- **Representing Clients in Child Protection Mediation:** Child protection mediation is a group intervention and problem-solving process that addresses the issues surrounding the temporary or permanent placement of children in need of services where abuse,

neglect, or dependency is an issue. This training provided an overview of mediation, the value, and the process. It introduced participants to child protection mediation as an avenue for addressing concerns of safety, permanency, and well-being and providing a stable and safe environment for children. The training identified the roles of the various participants, identified points of entry for service, and examined preferred practices for system design.

Ohio Child Welfare Training Program

With members of the OCWTP Steering Committee on the Ohio Alternative Response Pilot Project's Leadership Council as non-voting members, new training needs have been identified as the pilot sites have implemented alternative response. Many existing Caseworker Core Training modules and Supervisor Core Training modules are relevant to the practice of alternative response. In particular, the current core curriculum addresses timeliness of initiating investigations, needs and services of children and their parents, child and family involvement in case planning, worker visits with parents, joint development of written case plan, and individualizing services. OCWTP will play a significant role in developing and delivering the training requisites of alternative response as implementation progresses.

Coaching

The Leadership Council discussed numerous options around training and technical assistance and concluded that a coaching model would be the most helpful for staff. Each county received its first round of coaching for 2 days, between June and November 2009. Coaching was provided by consultants from Minnesota and American Humane staff. Agendas for each coaching round were determined ahead of time and were tailored to meet the needs and requests of each county. Counties chose to spend their coaching time differently. Some counties focused on one-on-one consultation in the field, where a worker is accompanied by the coach for visits with families. Time was also spent in unit meetings or in staffing to educate and respond to general questions. Case consultations were also requested in numerous counties, often using the Signs of Safety framework discussed earlier. The second round of coaching started in January 2010. Counties continue to find coaching opportunities to be especially helpful with staff — both workers and supervisors.

Technical Assistance to Counties

Calls to Counties by the AIM Team

Site-specific technical assistance by telephone was initiated in October 2008. Members of the AIM Team were “assigned” to two specific counties to respond to technical assistance needs, and counties were informed of this plan. This technical assistance was in addition to the advanced trainings or the work of the Leadership Council (formerly the Design Workgroup)

Responsibilities of AIM Team members included:

1. Contacting the alternative response lead in the assigned county (beginning October 2008), and schedule telephone consultation with him/her and whomever else on their team they would like to invite.
2. Calling every other month with these leads or their designees.
3. At the conclusion of the call, AIM Team members were to write up a brief report that identified: (a) challenges the county is experiencing; (b) questions asked and some solutions generated; (c) successes; and (d) any other themes.
4. Each county was to receive 2 days of in-person technical assistance this budget year (July 1-June 30, 2009). If they chose to forego their in-person visit, the plan was to reallocate those days to another county, if there is a need.

The implementation of this plan was less than seamless, and the intent not realized. Many counties experienced no real urgency for technical assistance.

AIM Team members were reluctant to continue this approach if it had limited value. Pilot counties were notified of the “on-call” status of their designated AIM contact and invited to request assistance. The offer to provide consultation, where beneficial, remained open.

AIM Team member Dave Thompson observed, “In many ways, I think the absence of technical assistance requests reflects the great work that was done in designing and preparing for the Pilot Project.”

Conference Calls With Workers and Supervisors

As part of AIM’s ongoing work to provide technical assistance to the counties, calls were scheduled with workers and supervisors to discuss successes and struggles, share new information about the pilot, and discuss practice. At the beginning of the pilot, July-October 2008, calls were monthly for both groups. In November 2008, the calls were reduced to every other month for each group, until May 2009, when both groups decided they should convene together. As mentioned earlier, a similar transformation occurred with the in-person meetings. The agendas for each call were guided by topics posed by the counties, issues encountered with tools and rules, practice guidance, and stories shared by the counties. The last call took place in December 2009.

Technical Assistance to State (and State Partners)

February 11-12, 2008, Meeting of AIM Team and Ohio State Stakeholders

The primary purpose of the February 11-12, 2008, meeting convened by the AIM Team was to ensure that the State of Ohio had: (1) a comprehensive and cohesive alternative response approach that the State could endorse and promote, and (2) an adequate plan and capacity to provide the necessary support of and guidance to each of the 10 pilot counties as they launched their county-specific alternative response systems. To bolster State readiness for the counties’ alternative response implementation, the AIM Team members collaborated with

State representatives to identify essential supportive documentation that had to be developed and instituted in a timely fashion. In addition, a number of outstanding issues that impacted the operation of the model at both the practice and organizational levels required discussion, in some instances resolution, and in other instances approval.

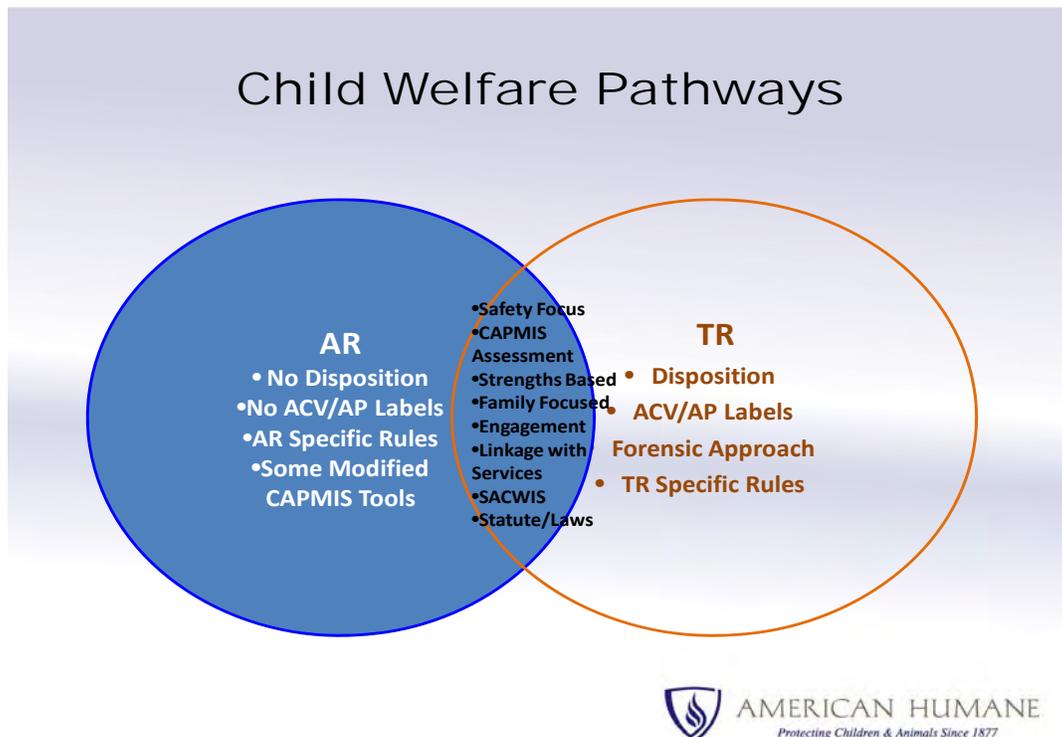
Alternative Response Fundamentals in Support of Ohio's Child Protection Practice Model

The discussion of the development of a “practice model” by the Leadership Council during the fall of 2009 was both labored and illuminating. It shed light on several enduring themes that were deliberated by the Leadership Council throughout the course of the Pilot Project. First was the ongoing issue of differentiation between the traditional response and the alternative response. Given that much of the work is grounded in quality child protection practice and, thus, common to both responses, it was easy to understand why pilot counties proclaimed, “*We are already doing that.*” The second issue was the level of specificity desired by this “practice model.” Several members of the Leadership Council were looking to this resource to tell them *exactly* what the practice of alternative response is and what they were to *do* in their practice. Given these two issues, there was confusion as to what a “model” specific to alternative response means.

The AIM Team provided the Leadership Council with practice models from different states, and it became apparent that a model of practice is relevant to the entire agency, not a selected group of staff or practice, and that it guides thinking and structures beliefs about families. A child welfare practice model is a “conceptual map and organizational ideology of how agency employees, families, and stakeholders should unite in creating a physical and emotional environment that focuses on safety, permanency, and well-being of children and their families” (National Child Welfare Resource Center on Organizational Improvement, 2008).

Thus, it was agreed that the fundamentals of alternative response should be articulated and the relatedness with traditional practice be demonstrated (See Figure 3). Core principles and tenets of the work were delineated, and selected practice indicators were identified that provide a hint of the specificity that many of the Leadership Council members wanted to see reflected in this document. (See Appendix B, Alternative Response Fundamentals in Support of Ohio’s Child Protection Practice Model.)

Figure 3: Child Welfare Commonalities Between Alternative Response (AR) and Traditional Response (TR).²⁰



Development of Continuous Quality Improvement Tools

The AIM Team was asked by ODJFS and the Supreme Court of Ohio to create several products for the pilot counties that focus on model fidelity. From the vantage point of the State, it was important at this stage to ascertain:

1. What is different between the agency’s alternative response practice and the agency’s traditional response practice? As noted above, one or two counties had difficulty articulating a difference, and that needed to be examined.
2. How closely were counties’ practices aligned with one another, and what does this mean in terms of model fidelity? This was to inform the development of the core

²⁰ Developed by Franklin County Leadership Council members in February 2010.

elements of a State-specific model with sufficient room for county flexibility. Alternative response is an approach with promising evidence. For us to obtain positive outcomes, we need to assure that we are implementing alternative response in accordance with the design that was created by the Leadership Council.

3. The State wanted to identify the commonalities between counties that report making progress.
4. The State was interested in knowing what the counties were doing in the pilot implementation. In many instances, the State had some familiarity with the progress and challenges of specific counties; there are a couple of the pilots for which there is insufficient information to gauge the actual changes that have been made and the day-to-day practice of alternative response.

The issue of practice consistency was highlighted, as it was identified in Ohio's Child and Family Services Review as an area in need of improvement. Draft continuous quality improvement and benchmarking documents were developed by the AIM Team for consideration at the September 2009 Leadership Council meeting. The tools were straightforward and easy to use (and customize, to be more meaningful to each county). There were numerous questions about the purpose, need, and operational use of such tools. Members of the consultation team understood the inherent contradiction between promoting a practice approach that, whenever possible, is *voluntary* in nature and the development of a continuous quality improvement process that was to be administered with the expectation of *compliance*. Thus, this remains a matter of "unfinished business." There are, however, numerous interim solutions to address this issue. As has been identified previously in this report, workers' quality of practice can be gauged via peer-to-peer reviews; on-site assessments conducted by coaches; and self-administered performance assessments. These tools can provide the foundation of the continuous quality improvement of a alternative response system.

Other Learning Experiences

Family Listening Sessions

On Saturday, May 3, 2009, American Humane facilitated a "Family Listening Session" in Columbus under the National Quality Improvement Center on Differential Response in Child Protective Services. Families that have experienced an alternative response were invited (by their worker) to participate.

Families that participated were asked to share their thoughts and ideas about how the child protection system impacts families that are reported for a child maltreatment concern, and how the system could change in order to better address the needs of families. Seven families and three workers participated in the session. The objectives of the listening session were: (1) to listen to what families that have experienced an alternative response approach to a child welfare concern had to say about the experience, (2) to listen to what families had to say about what is important to them when experiencing a child protection intervention, and (3) to listen

to families' perspectives on how the child protection system can better serve families that become involved with child protection.

Throughout the day, participants were open about their experiences with their worker and of alternative response. By far, the overwhelming message from participants was that it is important for them to have a good working relationship with their worker. They found most value in the time that the worker took to spend with them — listening to them and helping them with certain tasks. The families had a lot of positive remarks about their experience with the alternative response process.

Minnesota Immersion

A significant milestone of the pre-pilot planning stage, prior to pilot county selection, was the opportunity for pilot personnel and stakeholders, including members of the AIM Team from American Humane and the Institute of Applied Research, ODJFS, the Public Children Services Association of Ohio, and the pilot chronicler, to visit the state of Minnesota for a 3-day learning lab or “immersion” experience in the Minnesota Differential Response model. This experience provided a critical learning opportunity that would influence the vision and approach to Ohio’s pilot process by those who were able to participate. Members of the team spent time meeting with key personnel at the Minnesota Department of Human Services and were able to have hands-on discussions with Hennepin, Ramsey, and Olmsted counties, providing a first-person perspective of alternative response in practice on both individual and systemic levels.

As a follow up to this *immersion* experience, ODJFS attempted to facilitate this opportunity for pilot sites to enrich their understanding of alternative response through *immersion*. This arrangement between Minnesota and Ohio was deemed a state-to-state courtesy (outside the AIM contract), and travel costs were assumed by the participating counties. Although ODJFS and Minnesota attempted to do their best, all interested counties did not get the experience desired. For those Ohio delegates who did get to participate, it was expected that they share their experiences and contribute to the transfer of learning to all pilot sites.

Ohio Delegation to 2007 Differential Response Conference

In November 2007, Casey Family Programs sponsored 45 Ohio delegates to attend the Second Annual Differential Response Conference in Long Beach, Calif. This was a wonderful opportunity for the pilot counties to be exposed to national leaders, cross-state peers, and those experienced with alternative response. American Humane provided a reception during the conference especially for the Ohio delegates to interact, socialize, and foster their connections to one another.

2008 National Differential Response Conference in Columbus, Ohio

The Third Annual National Conference on Differential Response was convened in Columbus, Ohio. All but one pilot county sent a team of agency staff and county stakeholders. Franklin County sent 29 staff and six community partners. This conference provided staff with the opportunity to enhance their knowledge and to network and learn what other states are



experiencing with alternative response. ODJFS and the Supreme Court of Ohio provided scholarships to enable many interested individuals to attend the conference who would not have been able to participate in the conference without this support. The Supreme Court of Ohio and ODJFS pooled targeted federal and grant funding to enable wide and diverse Ohio conference participation:

- Each of Ohio's 88 public children services agencies was allotted two scholarships.
- Each of Ohio's 88 juvenile courts was allotted two scholarships.
- Each of Ohio's 10 pilot sites was allotted three additional scholarships.
- Registration fee was reduced to \$275 for any Ohio resident.

Scholarships included registration fee and hotel room and tax for two nights for all counties, except Delaware, Fairfield, Franklin, Licking, Madison, Pickaway, and Union, which did not meet State travel criteria for room reimbursement. A reception was hosted by the Supreme Court of Ohio. More than 450 attendees from 24 states and five Canadian provinces participated in the conference.

Alternative Response Symposium (May 2010)

As the evaluation of the pilot counties concluded, the Leadership Council and the State became increasingly concerned with engaging other Ohio counties, bringing new counties on board, and sharing what they have learned during the pilot. AIM suggested a symposium to highlight the evaluation findings and lessons learned from the pilot, and to educate new counties interested in implementing alternative response.

The Alternative Response Symposium is scheduled for May 13-14, 2010, and it is guided by a steering committee that reports to the Leadership Council. Current plans include a welcome by Director Lumpkin, an opening plenary by Alison Metz from the National Implementation Research Network, a general session by Erin Sullivan Sutton from Minnesota Department of Human Services, and a presentation by the Institute of Applied Research on the evaluation results from the Pilot Project. The goal of the symposium is to not only educate and share the pilot experience, but to prepare interested counties for the proposal process. The symposium brochure was released on March 25, 2010.

Communication Vehicles

Brochures

Casey Family Programs was instrumental in the development of a communications package to market Ohio's new Alternative Response System. The goal was to establish a comprehensive communications package that introduced alternative response as a credible solution to problems that are shared within Ohio's communities, conveying that there is value to working cooperatively.

The foundational premises conveyed about alternative response were that it:

- *Maintains* child safety through family and community partnerships (child safety).
- *Changes* the way the State is doing business, by responding to community needs (values families).
- *Builds* on the practice improvements that the State has been working on for a long time (continuous quality improvement).
- *Creates* a “best practice” state to improve family well-being. The State is doing something, which is evidence-based, to make families happier and healthier (progressive and proactive approach — producing positive outcomes).

The Design Team identified a range of target audiences. The objectives may differ by audience, although the messages will remain consistent. Targeted audiences included:

- Families
- General public
- Community stakeholders and service partners
- Legislators and policymakers
- Media
- Other counties (non-pilots)
- National audience — material development and sharing
- Service providers — private, non profit
- Judicial community
- Other public agencies that serve families

Casey Family Programs’ consultant met with county and State staff in May 2008 to identify communication needs and target audiences, discuss the messages that should be conveyed, and establish a plan for developing materials to help deliver the messages. Drafts of materials were developed by the consultant and ODJFS and disseminated among the counties, State staff, and AIM Team for feedback and revision. Communications materials developed in this process included:

- A brochure about alternative response for families
- A more generalized brochure about alternative response for use with other audiences, such as community partners
- A county-specific fact sheet with information that could be customized by each county

Printing and reproduction activities for these materials were assumed by the State.

Website

For the purposes of sharing documents and resources with the Leadership Council, NCALP created a SharePoint site for the internal team. Meeting minutes, agendas, decision documents, tools, and many other project-related documents were posted on a regular basis. American Humane also created a webpage within the organization's external website to highlight the work of Ohio's 10 pilot counties and share public documents, such as press releases, newsletters, brochures, and legislation. This website has been accessed by more than 450 different visitors since it was activated. The website address is:

<http://www.americanhumane.org/protecting-children/programs/differential-response/ohio-alternative-response.html>.

Newsletter Production

The first issue of the *Ohio Alternative Response Quarterly* was released in October 2008. The newsletter was created as a resource to highlight the work of the pilot counties and the State, provide testimonials, share interim evaluation results, and raise awareness around alternative response. County and State staff, partners, and other stakeholders contribute most of the articles, and AIM serves as the editor and developer of the product. The newsletter has been a valuable tool for the counties and the State to engage stakeholders, learn from one another, and celebrate their success. The seventh issue will be released in spring 2010.

Subcommittee on Responding to Child Abuse, Neglect, and Dependency

The 2004 report of the Supreme Court of Ohio's Subcommittee on Responding to Child Abuse, Neglect, and Dependency clearly identified that an investigative approach is not always the most appropriate response to reports of alleged maltreatment, especially for low- to moderate-risk cases. Based on the data collected by the Subcommittee in its report, there is a clear understanding of how an alternative response system is a part of progressive child welfare reform that deserves consideration by Ohio.

The Subcommittee has been instrumental in the development of the Ohio Alternative Response Pilot Project and has worked closely with ODJFS and the Supreme Court of Ohio throughout the process of developing, implementing, and testing the Ohio Alternative Response System. Two members of the Leadership Council — Greene County's Rhonda Reagh and Franklin County's Eric Fenner — were members of the Subcommittee. Currently, Rhonda Reagh serves as Chair of the Subcommittee. In addition, Carla Carpenter, Associate Director of the National Center on Adoption Law and Policy at Capitol University Law School and the Chronicler of the Ohio Alternative Response Pilot Project, staffs the Subcommittee.

It is fair to say that, since the inception of the plan for this work, alternative response has been a topic of each of the Subcommittee meetings, culminating in the April 7, 2010, presentation of the Final Report by Caren Kaplan and Tony Loman of the AIM Team and Carla Carpenter and

Denise St. Clair of the National Center for Adoption Law and Policy. In addition to the initial presentation before the Subcommittee, the AIM Team made three presentations during the life of the project, and Carla Carpenter provided a presentation in April 2009 focusing on the field perspectives. On December 10, 2008, Kaplan and Loman conducted a presentation before the Subcommittee, detailing the changes that had occurred during the first year of the project; on July 2, 2009, Kaplan and Loman focused on the impacts of the economic downturn and the importance of resolve and ingenuity in continuing the Pilot Project.

Chronicling

During the early stages of Ohio's Alternative Response Pilot Project, the AIM Team suggested to the State that, in addition to the pilot evaluation, another type of documentation and study of the pilot process was needed in order to fully capture historical lessons of the pilot experience. This qualitative analysis of the pilot process was dubbed the "Chronicle." The Chronicle would detail project milestones, planning and implementation processes, challenges or barriers, successes, and lessons learned and their implications for future planning.

In addition to documenting the progress of the Pilot Project and observations, the chronicler conducted a series of individual and group interviews with key project stakeholders. Interviews have been conducted at various points throughout the life of the pilot, from the conclusion of the design phase to early implementation lessons, mid-pilot experiences, and end-of-pilot reflections. Interview subjects have included State leaders, ODJFS staff, Leadership Council members, frontline staff and supervisors in each of the 10 pilot counties, and AIM Team project consultants. The chronicler visited each of the 10 pilot sites. This series of interviews has provided considerable insight regarding:

- State and county reactions to the pilot planning and design process that will inform planning for any future expansion of the project;
- model fidelity concerns and balancing the need for county autonomy for some elements of the alternative response model;
- family and workers' responses to alternative response practice and changes in services to families resulting from the alternative response model;
- internal changes in practice within county agencies initiated as a result of the pilot;
- the impact of alternative response on community partnerships;
- practice challenges for workers and supervisors as well as overall systemic challenges or barriers; and
- guidance from workers, supervisors, and other key stakeholders that should inform the future direction of alternative response in Ohio.

Process Perspectives: Chronicling Ohio's Alternative Response Pilot Project Experience is submitted with this report in Section 4.

Evaluation

Leadership for conducting the evaluation of the Ohio Alternative Response Pilot Project was provided by the Institute of Applied Research. In response to the original RFP, the evaluation examines outcomes in four categories: child and family service review outcomes, judicial system outcomes, consumer-related outcomes, and economic outcomes. The evaluation design includes both process and outcome measures and multiple data collection methods.

Evaluation methods include an outcome evaluation, with a study group selection based on the use of a random design. Special design considerations were made in response to the role of CAPMIS data. Nine data collection procedures and associated outcome measures are used. The goals and requirements specified in the RFP were translated into outcome research questions. Outcome variables, data sources, and measures related to each research question were developed, and an outcome analysis was performed. The process study examined project implementation and context, model fidelity, and program variability, along with reactions of stakeholders.

Integrated Methods

The various parts of the evaluation are conceptually distinct, but in practice the methods, research procedures, and data sources overlap significantly. For example, most of the outcome results can only be fully understood in light of the knowledge gained through the approaches of the process study, which includes both quantitative and qualitative analyses. And the biases and data limitations that affect the validity and reliability of the outcome study can only be discovered through the investigations that make up the process study. At a fundamental level, however, program reform is premised on the idea that changes in practice will bring about changes in outcomes. Put another way, it is assumed that better outcomes will occur *because* new program practices were adopted or the existing practices were modified. This required an integration of process and outcome evaluation at a more basic level, reflecting a theory of how changes can produce improvement in programs (sometimes called a “theory of change”).

The Ohio Alternative Response Pilot Project began in July 2008. Random assignment to the experimental and control groups was completed at the end of September 2009. Follow-up data collection from SACWIS was extended through the end of January 2010. This amounts to a maximum of 580 days. The follow-up time for most families was much shorter — a year or less for families that entered the study in 2009. Experiences in prior alternative response evaluations suggest that a minimum of 18 months of follow-up is necessary to begin to show differences between alternative response and traditional cases. For this group, the minimum follow-up period was 7 months and the maximum was 19 months, with an average (median) of slightly more than 1 year.

The Evaluation Report of the Ohio Alternative Response Pilot Project is submitted in conjunction with this Final Report and is located in Section 2.

Stakeholder Support

Stakeholder involvement and support is a foundational tenet and essential ingredient of the alternative response approach. Engaging stakeholders in alternative response design and implementation increases the likelihood of successful implementation and sustainability. Engagement of stakeholders also increases the likelihood that agency policies will be well-informed and faithfully implemented. Stakeholders provide knowledge of community resources; support and services to families; and consultation to agency staff.

Throughout the Ohio Alternative Response Pilot Project, success has been shown when practice and policy are concurrently reflected at each level or stage of the process, so that it is not just “State” or “county.” This has, perhaps, been no more apparent than with the engagement of stakeholders. County sites frequently will ascribe a portion of success to the early community collaboration and interest that was generated by the concept of an alternative response to child maltreatment. The State management of the Ohio Alternative Response Pilot Project has benefited from the support of a range of stakeholders who provided valuable resources in terms of finances, professional credibility, and programmatic knowledge.

FINDING: Educating State and agency staff and community stakeholders and getting them on board with alternative response was another challenge for many pilot counties. Several counties expressed concern about the lack of understanding within their communities about alternative response, and the need to do more outreach in bringing their stakeholders to the table.

Casey Family Programs

On July 30, 2007, Marva Hammons, Managing Director, Strategic Consulting Systems Improvement of Casey Family Programs, met with (then) Director of ODJFS Helen Jones-Kelly to discuss a potential partnership between the two organizations. Director Jones-Kelly described the State’s vision as two-step: (1) building upon existing court and child welfare collaborations that focus on quickly and safely reaching permanency for children who come before Ohio’s courts, and (2) building collective will to change the State’s overall approach with families and children. The projected outcomes of maintaining children within their own homes, reducing children’s entry into public care and reducing the depth to which families penetrate the child welfare system closely aligned with the Casey Family Programs Strategy for the Year 2020. Most exciting to ODJFS was Casey Family Programs’ vision of this collaboration as a lasting relationship, rather than the more-typical situation of time-limited funding. This longer-range approach opened up new opportunities to make meaningful, systemic change.

In written follow-up, Director Jones-Kelly proposed a potential partnership with three stages of support:

1. *Immediate:* Short-term (calendar year 2007 and early 2008) activities that provide direct response to urgent issues.

2. *Long-Term*: Extended (2 to 3 years) activities that bolster progress toward existing goals.
3. *Enduring*: Far-reaching transformation that is yielded from early efforts and extends beyond the current focus.

FINDING: Through the ensuing partnership that is renewed annually, Casey Family Programs has provided a range of technical and financial support resources to the Ohio Alternative Response Pilot Project. In many cases, this outside support can be seen as a distinct element that resulted in a significant and positive outcome. Examples follow.

Development of project “champions”

Targeted funding from Casey Family Programs enabled five member teams from each of the 10 pilot sites to attend the 2007 Conference on Differential Response in Long Beach. This opportunity for a cross-section of individuals — representing each county’s child welfare system, community partner agencies, and the legal community — to interact at this early stage with knowledgeable and enthusiastic professionals who already were offering an alternative response to families created a groundswell of interest, innovation, and support that contributed immeasurably to counties’ capacity to transform their system. Its value in assuaging an understandable fear of whether doing something different might compromise children’s safety was immeasurable. Many of the pilot sites cite this trip as the turning point in their ability to visualize change. Casey Family Programs funding also could be used for the purpose of “learning lab” immersion trips to Minnesota, Ohio’s mentor state. For many reasons of practicality and county priority, only two of the counties used funding for that purpose. The impact in practice that resulted in the counties that chose to use funds in that manner was significant and observable.

Financially supported the cost of organizational change

These dollars acknowledged that pilot sites had committed a substantial investment of resources, time, and community will, at a time when all were in scarce supply. Although not significant in terms of overall child welfare funding, the Casey Family Programs dollars were recognition that change is not without cost. By awarding the funds directly to pilot sites — rather than the more traditional process of State pass-through — Casey Family Programs reflected the flexibility and local (family) control that is inherent to alternative response.

Responsive to specialized needs identified within an alternative response

As sites became more comfortable with the alternative response pathway, staff identified various environmental factors and/or practice skills that required enhanced or specialized competencies. Casey Family Programs supported the development of model programs, such as one on Intimate Partner Violence, and training models for adaptation into the Ohio Child Welfare Training Program, such as with ethnographic and advanced interviewing skills.

Provided technical assistance

Casey Family Programs has access to an array of content experts and was able to respond to the project's various needs by using this pool of resources; for example, a marketing professional who assisted the sites in developing materials to convey their messages to families, the general public, and the community.

Funding and established contact with various funding sources

Pilot Counties received financial support from Casey Family Programs in several fashions:

1. Casey supported the 5 members' team travel to Long Beach for the 2007 National DR Conference; this was pre-operational and very helpful in terms of organization.
2. Casey Family Programs provided pilot counties with \$50k per county over the course of the pilot.
3. A number of counties received additional Casey dollars that were available due to under spending of other state's programs. These were time limited and required liquidation in a very short period of time. Trumbull County received an additional \$10,000.
4. As a national foundation, Casey Family Programs was able to establish connection with the funders' community.

The significance of Casey Family Programs' ongoing contributions has been acknowledged by including the Casey Family Programs logo in the masthead footer of all project communications.

Ohio Children's Trust Fund

Pilot sites were asked to contribute staff and financial resources to serve families and children in a way that had been shown to be initially more expensive than traditional methods. These same studies, however, indicated long-term cost savings through successful preventive intervention, e.g., findings that indicated reductions in recurrence, penetration into the system, and entry into care. Because these findings were consistent with the overall mission of the Ohio Children's Trust Fund, and because the concept of reducing child welfare costs and reinvesting those savings into preventive programming is one that supports overall positioning of the Ohio Children's Trust fund, a partnership was established.

To assist county agencies in shouldering the burden of the sometimes more expensive approach, a post-assessment services subsidy of \$1,000 per family was made available through Ohio Children's Trust Fund dollars. The funds were available only for services, but were not linked to a specific family, which provided flexibility and accessibility to non-traditional services that counties reported to have considerable impact.

The significance of this contribution has been noted by including the Ohio Children's Trust Fund logo in the masthead footer of all project communications.

Public Children's Services Association of Ohio

PCSAO is a membership-driven association serving Ohio's 88 county public children services agencies through the support of program excellence and sound public policy for safe children, stable families, and supportive communities. The organization was represented on the Design Workgroup/Leadership Council from the project outset, initially by Max Bucey, subsequently by Crystal Ward, and currently by both Crystal Ward and Rhonda Reagh. Alternative response workshops were offered at each of the PCSAO conferences since the inception of the project.

In September 2009, AIM Team members Tony Loman and Christine Shannon presented the interim alternative response evaluation findings. In September 2008, AIM Team members Rob Sawyer and Sue Lohrbach presented on their Olmsted, Minn., experiences with the alternative response approach. There can be no doubt that PCSAO will provide ongoing and notable contributions to the development of the alternative response approach across Ohio.

National Center for Adoption Law & Policy (NCALP)

NCALP, at Capital University Law School, has served the Subcommittee since 2004, assisting the Subcommittee in its efforts to research and craft recommendations for child welfare reform in Ohio, including the Subcommittee's recommendations to adopt a Child in Need of Protective Services (CHIPS) statutory structure and to implement a differential response practice approach. NCALP and the American Bar Association Center on Children and the Law (ABA) were retained by the Subcommittee to perform project work under the Subcommittee's oversight, input, and direction. Over an 18-month period, the Subcommittee and its contractors conducted extensive research to identify statutory, administrative, and practice-based barriers to consistent and effective child welfare responses.

ABA and NCALP conducted a national review of statutory frameworks and practice models related to child abuse and neglect screening and investigation with an eye toward potential reforms for Ohio. Additionally, NCALP conducted a complete review of Ohio law to identify inconsistent, ambiguous, and confusing language. Upon completion of the legal and field research, ABA and NCALP reported their findings to the Subcommittee, and under the Subcommittee's direction, developed alternative proposals for statutory and regulatory reform. The Subcommittee considered various options for reform, ranging from simple revisions of existing law to the complete overhaul of key terminology and its application. Over the next 18 months, NCALP continued to work with the Subcommittee to conduct educational sessions with more than two dozen stakeholder groups, including juvenile judges, prosecuting attorneys, defense attorneys, public children services agencies, medical professionals, mental health professionals, educators, guardians ad litem and court-appointed special advocates, and many others throughout Ohio. NCALP's involvement with the Subcommittee from the earliest phases of the project created a natural fit for conducting the work of the chronicling effort. The analysis and recommendations of the statutory and rules framework provides a legislative roadmap for the future of alternative response.

Institute for Human Services and Ohio Child Welfare Training Program

The Institute for Human Services has been a non-voting member of the Leadership Council since the project's inception. Represented first by Ron Hughes and subsequently by Nan Beeler, these individuals and their host organization have made significant contributions to the AIM Team, the Leadership Council, and the Ohio Alternative Response Pilot Project as a whole. Support has been provided by participation on the Training Task Team, the development of competencies and training, the issuance of Continuing Education Units for project trainings, the ongoing provision of regional training center training venues, and the provision of Classroom Performance System equipment for AIM's use in convening the Family Listening Session.

Currently, as the State considers expansion of alternative response, OCWTP is building capacities to be responsive to anticipated needs. Monies that were spent on CORE training can now be spent on coaching — an expensive endeavor. There will be training for trainers on how to be coaches, and the Institute for Human Services is also looking to identify agency staff and develop their coaching skills. OCWTP intends to have its trainers attend the Practice Training conducted by AIM for alternative response workers and supervisors. Counties are invited to communicate with their Regional Training Coordinator, who will plan training that meets the stated need.

OCWTP will make significant contributions as alternative response expands to additional counties.

Anthem Foundation

The Anthem Foundation of Ohio, a \$21 million supporting organization of The Greater Cincinnati Foundation (recently renamed the HealthPath Foundation of Ohio) took early notice of alternative response as an approach that aligned with its mission of advancing the health of underserved Ohioans. The HealthPath Foundation of Ohio has special interest in the use of community-based strategies to prevent family violence, and it supports approaches that take advantage of community strengths and empower individuals and organizations to work together toward a common goal. Alternative response, as programming that is family-focused and responsive to the needs of diverse populations, was consistent with the nature of its preferred programming.

The HealthPath Foundation of Ohio supported the development of Ohio's Intimate Partner Model by leveraging the involvement of the Ohio Domestic Violence Network. The result is a partnership among a wide range of stakeholders to ensure integrated and comprehensive services and support for families where there may be violence between partners.

Domestic Violence Collaboration

Pilot counties are participating in a series of training and technical assistance activities to develop a community-specific response plan addressing the intersection of child maltreatment and intimate partner violence (IPV). In October 2009, nine alternative response counties participated in an informational stakeholder meeting about the Ohio IPV Collaborative convened during the Ohio Domestic Violence Network's *Prevention in Progress Summit*.

Counties were invited to submit proposals to become a demonstration site for the Ohio IPV Collaborative. In November 2009, four counties — Clark, Fairfield, Franklin, and Ross — were chosen to participate in the project as demonstration sites.

Future Stakeholder Support – Midwest Child Welfare Implementation Center

The Midwest Child Welfare Implementation Center (MCWIC) is one of five Child Welfare Implementation Centers established by cooperative agreement with the Children’s Bureau in October 2008. In Spring 2008, MCWIC released a Request for Applications soliciting concept papers that describe implementation projects designed to facilitate sustainable systems change and build the capacities of child welfare systems for improved performance and positive change. ODJFS submitted a concept paper to MCWIC to assess the State’s readiness for and prepare for the fourth phase of its Ohio Child Welfare Law Reform Initiative that focuses on statewide system implementation.

The State was notified before the release of this report that it has been awarded the implementation project. Ohio’s partnership with MCWIC will focus on developing a State model that supports and reinforces an enhanced relationship with county agencies and stakeholders and which mirrors the tenets of partnership as embodied in alternative response.

Ongoing Support and Leadership

There is no doubt that significant investments were made, meaningful work performed, and notable overall progress accomplished by the execution of the many project activities described in this section. This all became possible through the involvement of charismatic, steadfast leaders and vigilant stewards of this work.

Three substantive administrative changes were made at ODJFS since the beginning of this project, with each accompanied by varying levels of internal reorganization:

1. Under former Gov. Robert Taft II, Barb Riley oversaw the Department's interest in the establishment of the Subcommittee (and was the individual who championed first statutory authority for alternative response and initial piece of AIM selection. (Director Riley chaired the Subcommittee until January 2008).
2. Under Gov. Ted Strickland, Helen Jones-Kelly oversaw the beginning of the project, selection of sites, establishment of Design Workgroup, and launch of "go live." (Director Jones-Kelly resigned December 2008.)
3. Current Director Doug Lumpkin took office in January 2009 and oversaw completion of the Pilot Project and development of expansion and implementation planning.

It is remarkable that alternative response has maintained administrative commitment throughout these transitions, even between political parties. Three consecutive directors of ODJFS — Barbara Riley, Helen Jones-Kelley, and Douglas Lumpkin — have all identified this work as a priority and were champions of alternative response.

At the State agency level, the project has benefited from the consistent and ever-competent leadership of Kristin Gilbert, Administrator of Justice Services at ODJFS, and Steve Hanson, Manager of Children, Families, and the Courts Programs at the Supreme Court of Ohio. These two individuals demonstrate the essence of leadership — an unwavering, pervasive commitment to the alternative response approach and practice. They invited and maintained an inclusive developmental process and guided this process with transparency to all involved and, in so doing, modeled a core tenet of alternative response.

Finally, the pilot county leadership — both at the table of the Leadership Council and in the trenches of “home base” — has shepherded a philosophical shift in what we believe about the families in our communities and how we must respond to their needs.

It is these leaders, and others who contribute to this goal, who have enabled the project activities detailed in this section to come to fruition. With few exceptions, these activities can be considered successes of the Ohio Alternative Response Pilot Project.



V. RECOMMENDATION AND RATIONALE FOR STATEWIDE IMPLEMENTATION OF ALTERNATIVE RESPONSE IN OHIO

Alternative response is a relatively new practice approach, and is therefore replete with continuously emerging knowledge gaps. To date, only one randomized control trial has been conducted and only one evaluation has examined issues of costs. Foundational questions, such as *“Is alternative response an effective approach in child protective services?”* and *“What are the specific elements that make it effective?”* have not been answered.

The Ohio evaluation findings are comparable in directionality and, in many instances, in magnitude to the Minnesota evaluation research. But, as compelling as those findings are, perhaps the most telling moment of the Ohio Alternative Response Pilot Project was when the formal evaluation — both randomization of cases (September 2009) and termination of data collection (January 2010) — came to a close and all 10 of the pilot counties opted to

affirmatively continue this approach. Each county created transition plans to institutionalize and expand its alternative response practices.

The quantitative and qualitative results, detailed in the Evaluation Report, reinforce this unanimous choice by the pilot counties. Based on 18 months of intensive field work — data collection that supports the positive results from the field — and with evidence of ongoing State, county, and local leadership in the promotion and support of the alternative response approach, both systemically and in child welfare practice, Ohio’s consultation team recommends that Ohio proceed with statewide implementation of alternative response and continue to monitor and assess the effectiveness of alternative response in meeting the needs of families that are screened in and assigned to this specific pathway.

Statewide Implementation

RECOMMENDATION: Statewide Implementation. The findings of the Ohio Alternative Response Pilot Project and the AIM Team indicate that **Ohio 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.

RATIONALE:

- The overall distribution of change in child safety was similar for experimental and control families, with no statistically significant differences. This finding indicates that the replacement of traditional investigations by alternative response family assessments did not reduce the safety of the children. Children were as safe under alternative response as under traditional approaches.
- While controlling for the differences between families in previous contacts and also the controls provided by random assignment, the use of an alternative response family assessment resulted in a reduction in new reports of child abuse and neglect.
- The major positive effects of alternative response on new reporting of child maltreatment occurred in African American families. The difference in the number of new reports for African American families between the experimental group and the control group was greater when compared to the same difference in the entire study population.
- Although study families as a whole were largely in poverty, African American families were substantially more impoverished than Caucasian families. Race was taken as a proxy measure for poverty. The findings indicate that alternative response has its greatest effects among the poorest families in the population.
- Only 102 families, or 2.8%, of the 3,659 total families in the 360-day study group experienced out-of-home placement. The control group had a higher proportion of

these removals: 3.7% of children had been removed on the control side compared to 1.8% in the experimental group ($p < 0.001$). Alternative response appeared to reduce the number of child removals and out-of home placements.

- Families in the experimental group were more engaged, more satisfied with their workers, and more satisfied with services they received.
- Families in the experimental group received and participated in more services, particularly basic needs and poverty-related services.



VI. FINDINGS AND RECOMMENDATIONS

Through observation, experience, and discussion, many insights were gleaned from the design, launch, and implementation of the Ohio Alternative Response Pilot Project. These insights are viewed as discoveries or *findings* and, where relevant, they are proposed as *recommendations* for consideration by the Subcommittee and other relevant stakeholders for the next phase of this work. Findings and recommendations are detailed in eight levels of impact: State (includes statutory and rules framework), State-County Partnerships, County and Community, Families, Workers, Practice, Procedures and Tools, and Other Considerations. Some findings are relevant to multiple areas; in those situations, the author made a determination as to the dominant level of impact.

State

RECOMMENDATION: Capitalize on the experiences of the initial 10 pilot counties by enhancing their capacity to mentor new alternative response counties prior to expansion.

- Some considerations going forward include: providing training on coaching for supervisors and frontline staff who may be called upon to mentor other staff; developing a specific plan for matching counties; and establishing a process for cross-county mentorship that is inclusive of State staff and builds capacity for technical assistance provision at the State level.

RECOMMENDATION: Maximize the availability of *flexible* monetary resources to use, as appropriate, in responding to families’ needs.

- The flexibility of resources/funding streams is inherent to the practice. While no county would refuse additional money, the funding is not most important. What is essential is that the State continues to advocate for flexible resources for counties to use, as needed, to respond to the needs of families that come to the attention of the child protection system. The ability to provide creative services tailored to individual family needs has been a key element in the success of the pilot.

RECOMMENDATION: 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.

- SACWIS requires modification so that all tools and forms can be accessed for alternative response as it is for traditional response, including, but not limited to, Family Service Plan, 90-day reviews, and case closure. Develop SACWIS enhancements that will fully support alternative response practice. While counties are appreciative of the current level of SACWIS enhancement, there are still significant challenges around tracking details included in Family Service Plans; lack of access to Case Reviews, which are tied to the Case Plan in SACWIS but still are needed for alternative response cases that remain open for 90 days or longer; and difficulties with the functionality of pathway changes. Several counties expressed concerns about their capacity for internal expansion, as well as broader implementation of alternative response within the state, in the absence of complete accommodation of alternative response in SACWIS.

RECOMMENDATION: Efforts must be dedicated 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.

- For statewide implementation to be feasible, there must be a critical mass of individuals at multiple levels of the agency — including the executive office — who understand and champion the alternative response approach. Roles, responsibilities, and performance expectations must be specified to ensure that there is role clarity and that essential functions are “assigned” to individuals who are accountable for performing them.

Training Requirements

RECOMMENDATION: Priority must be given to upfront discussion and training on the management of change, implementation science, and the operations and practice of Alternative Response.

- Training should be offered immediately before implementation and should be followed quickly with coaching for workers *and* supervisors to support the work.
- All staff should be required to attend foundational alternative response training.
- Supervisors, managers, and administrators must understand alternative response practice; they should be expected to participate in training and shadow workers to learn the *art* of working with families using this approach.
- State staff should also be expected to participate in alternative response trainings. Such participation would demonstrate commitment to the practice and the philosophical shift and would underscore the State-county partnership in this system change.
- As indicated previously, the fundamentals, procedural issues and practice of alternative response are integral to quality child welfare practice. An analysis of Ohio Child Welfare Training Program’s CORE curriculum, refresher CORE, supervisory CORE and integrate alternative response in all ongoing supervision should be conducted to assure that competencies associated with alternative response are incorporated in existing curriculum. Training should emphasize the import of both alternative response and the traditional response and that the child protection system requires more than a singular response to families in order to be responsive to their needs.
- Alternative response-experienced practitioners and managers from out of state should be tapped to assist with building the capacity for the State training program. A new way of doing practice means new trainings.
- Topical trainings should focus on engagement, solution-focused approaches, strengths-based and family-led assessment, cultural understanding/respect (ethnographic interviewing), appreciative inquiry and working with challenging issues, such as domestic violence, substance abuse, and families who come to the attention of the child welfare agency on multiple and/or periodic basis.

RECOMMENDATION: 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 used to answer the question ‘how are we doing?’ by obtaining family-feedback that assesses whether these fundamentals were observed or attained. An assessment and determination should be made as to whether such training already exists as a component of the OCWTP or whether the development of new training is required.

- Learning opportunities that had immense impact among the pilot counties include: “Minnesota immersion” experiences, where teams from Fairfield and Franklin counties had opportunities to visit county agencies in Minnesota; the National Differential Response Conference convened by American Humane in Long Beach, Calif., in 2007, Columbus in 2008, and Pittsburgh, Pa., in 2009; and coaching experiences with Minnesota child welfare professionals visiting Ohio’s pilot counties. As implementation progresses, it is imperative that State staff and Ohio Child Welfare Training Program personnel be provided opportunities to participate in any of these types of learning activities alongside county leadership, supervisors, or workers.

RECOMMENDATION: Invest in immersion experiences or other cross-jurisdictional learning opportunities.

Similar to State policy and regional staff, OCWTP staff should be included in training, coaching, and mentoring opportunities within the counties, going forward, in order to assure long-term capacity for integration of alternative response into the OCWTP.

RECOMMENDATION: Fully integrate alternative response into Ohio Child Welfare Training Program training curricula and coaching.

Ohio Administrative Code or the Rules of Superintendence Change Required for Implementation

Ohio Legal Review: Preliminary conclusions from the review of Ohio child protection statutes and administrative code provisions that guided the development of statutory recommendations included the following:

- Current Ohio child protection law allows only for an investigative response to reports of child abuse, neglect, or dependency. Rather than adding an alternative, or secondary, response option to this “one size fits all” approach, consideration should be given to amending the ORC to establish an overarching differential response model that allows for assignment of cases to either an assessment or investigative response. Creating a separate code section establishing the framework for cases assigned to an assessment pathway, similar to that currently applicable to investigated cases, within the statutory framework for a differential response systemic approach would be the preferred approach for ORC reform. Amending all existing statutes and rules that apply to traditional case investigations and practice that are inconsistent with differential response to incorporate dual-track directives is not practical and may lead to confusion in application; for clarity, separate provisions specific only to differential response cases assigned to an assessment pathway should be added to the statutes and rules.

- Otherwise, most of Ohio’s child-protection statutes, to the extent that they apply only to an investigative approach, do not need to be altered. A few, however, will require revision for consistency with a differential response approach, including those related to case-planning.

Review of law and practice in other alternative response states:

Although 17 states are using some form of differential response practice, NCALP selected for the closest study only those states with practice models closely resembling that used by the Ohio AR pilot. These states are: Louisiana, Minnesota, Missouri, North Carolina, Oklahoma, Tennessee, Virginia and Wyoming.

- Of these eight states, seven states include authorizing language and/or policy statement in statute rather than administrative rule.
- States have taken widely different approaches in drafting their alternative response legislative scheme. Some states codes, such as those of Tennessee and Minnesota, contain detailed statutory provisions, while other states, such as Virginia, only address the core tenets of Differential Response in statute, leaving detailed process and requirements to administrative rule. Many states set forth and define available responses within a comprehensive definition statute.
- According to the National Quality Improvement Center on Differential Response, and review of alternative response state law and policy, a core component of a differential response approach is that the identity of individuals receiving a family assessment response are not entered into the state central registry system. The majority of differential response/alternative response states have taken this approach, while Vermont has taken a different approach by creating a tiered registry to “balance the need to protect children and the potential employment consequences of a registry record.”²¹
- All eight states permit a case originally assigned to an assessment or differential response to be later re-tracked to an investigative response, if appropriate. At least three of these states also permit a case originally assigned to investigation to be re-tracked to assessment as well.
- Most of these states integrate elements of differential response/alternative response throughout their statutory scheme. However, two states - Virginia and Tennessee - have a single statute which outlines the core elements of the DR/AR response instead of integrating the elements throughout other code sections.

Field Interviews: Conclusions from interviews with pilot county staff include:

²¹ Vt. Stat. Ann. Tit. 33 § 4911

Conclusions from interviews with Pilot Project county staff include:

- In general, agency staff approve of the Pilot Project rules; they offered few suggestions for change.
- Staff believe that current statutes and rules do not pose a great barrier to an alternative response approach.
- There was no consensus regarding terminology for the systemic practice approach and the individual responses within the system. Many workers preferred retaining “alternative response” as the name for the approach, since it is now familiar throughout Ohio and a change in terminology could create confusion. Others were open to changing the terminology now, prior to further implementation, to more accurately describe the system and two distinct response pathways.
- Agency staff believe that the interim pilot rule regarding what cases are required to be assigned to an investigative pathway provides sufficient guidance. Workers like the flexibility of the pathway assignment requirements, which permits discretion as to which cases to assign to alternative response. Some staff raised concerns regarding the appropriateness of pathway assignment to alternative response of certain cases, including sexual abuse cases, serious drug addiction cases, and cases involving domestic violence.
- Agency staff believe that cases should be permitted to be reassigned from the alternative response pathway to the traditional response²² pathway, and vice versa. There was some concern that allowing traditional response cases to be re-tracked to the alternative response pathway may lead to alternative response becoming a “dumping ground” for traditional response cases.
- Agency staff would like to see extended timeframes applicable in alternative response cases (45 days to conduct the assessment, for example) implemented for all cases, as longer timeframes allow caseworkers more time to get to know the family and fosters family engagement in sound decision-making.
- Most agency staff believe that if they need or desire to have court involvement in an alternative response case, it can be done, but would involve creating a case plan, which is not currently permitted within SACWIS for alternative response cases. Agency staff admittedly had never tried seeking court involvement in an alternative response case (other than by re-tracking to traditional response), but suggested this be an option to be explored in the future.

²² Although recommendations as to changes in terminology are made herein, throughout this report, terminology used in the Ohio Alternative Response Pilot Project, such as “alternative response” and “traditional response,” is retained when reporting comments from field interviews.

- Staff strongly suggested that a minimal statutory framework for an alternative response approach is preferable for maintaining maximum flexibility as alternative response practice expands statewide; detailed practice guidance is better left to rule and policy documents.
- Topics identified for inclusion in statute:
 - Statement of intent or philosophy
 - Implementing language
 - Mandatory pathway assignment
 - Definitions for key terms
 - Process in cases with court involvement
 - Reassignment from one response pathway to another
 - Initial family contact timeframe
- Topics identified for inclusion in rule:
 - Timeframes (other than for initial family contact)
 - Notice requirements
 - Assessment process
 - Services potentially available to families
 - Case record requirements and processes
 - Detailed guidance for pathway reassignment

SUMMARY OF STATUTORY AND RULE RECOMMENDATIONS:

1. An implementing statute directing phased-in statewide adoption of a differential response approach under a specified timetable should be added to the 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 an FAR approach in cases not requiring an investigative approach in order to preserve child safety and well-being.
2. 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.

3. 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.
4. 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.
5. 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 results 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 (PCSA).
6. A new section outlining core practice in FAR cases, 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.

Additional Suggestions

Several concerns about other provisions in current Ohio law and/or policy that may challenge effective practice surfaced during the course of legal and practice research. Some of these issues are outside the scope of this project, but are flagged for future study; others relate to next steps to better inform and finalize recommendations for statutory/rule reform.

Issues to Flag

- Consideration should be given to the treatment of cases currently outside the scope of either alternative response or traditional response within the context of a differential response system, including:
 - Families in Need of Services (FINS) – Rule review and staff interviews reflect that this case category receives inconsistent response from county to county, and that the current practice of tracking a repeat FINS report to a traditional response path may not best serve families.
 - Stranger danger – Consideration should be given to removing cases in which there is no indication of parental or caregiver involvement from the PCSA primary jurisdiction, or to automatically track these cases to a family.

- An assessment response path to assess whether parental engagement is warranted.
- Dependency – Consideration should be given to whether dependency should continue to be assigned to an investigative path.
- Related to the above, consideration should be given to establishing additional response pathways for cases which, on their face, require a determination as to whether parental/caregiver engagement is necessary and, if so, whether by an investigative response or an assessment response. Those pathways could include:
 - FINS response pathway
 - Stranger danger response pathway
 - Dependency response pathway
- A number of issues related to the central registry were identified that are either outside the scope of this project or are already under consideration by State and county policymakers. These include:
 - Inclusion/exclusion of reports assigned to a FAR pathway in the central registry
 - Amendment of the central registry to allow for reporting/expunging tiers based on a future risk analysis
 - Inclusion of dependency reports in the central registry

Next Steps

These recommendations were made without the benefit of extensive field review. In order to allow for additional input informed by the pilot experience and by stakeholder input, it is suggested that:

- The recommendations should be reviewed by the Subcommittee and targeted key stakeholders after the completion and distribution of the Final Report of the AIM team, and modified to reflect any additions or modifications indicated by that report or by subsequent AIM team/Leadership Council decision-making.
- Decisions made early on in the Pilot Project design phase should be revisited, and any modifications to pilot practice suggested by such review should also be considered in drafting the modified recommendations.

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 this practice shift:**

Alternative response is based on the premise that decision making and power is shared. Historically, in many state-supervised/county-administered states, the state has

assumed the role of “parent,” while the counties have been required to conduct their activities as “children” who must comply with the head of the household. This analogy is important because it emphasizes the significance of the parallel process addressed below. The success of the alternative response practice paradigm is that those who are most impacted by decisions (i.e., families, counties, etc.) have a greater voice in choosing that which is best for *them*. If State agencies are not aware and mindful of this, they run the risk of being perceived as “business as usual.”

- **Parallel process needs to be emphasized by all agencies and individuals involved:**
Parallel process, in this instance, means applying comparable expectations about the actions and behaviors of one group to all groups involved. This means that all parties involved in this shift in practice must be willing and able to be guided by the same goals that lead to comparable conduct. If you are asking workers to be transparent and strengths-based with the families they serve, then their supervisors have to be transparent and strengths-based with their workers, administrators with their supervisors, and State staff with county staff. What we are essentially saying is that, as Gandhi stated, “You must be the change you want to see in the world.” We all must model the behavior — top down, bottom up.
- **Engage regional technical assistance specialists and policy staff** early in the planning process for expanded implementation. These individuals will be vital to the success of any broader implementation effort. (It is important to recognize that these positions are responsible for monitoring and assuring compliance with a federal consent decree. Thus, it may be difficult for individuals to change roles and be credible to counties that practice alternative response.)
- **Create a specific plan 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. Several of the pilot counties have requested that State staff shadow alternative response workers in the field to observe the practice firsthand.
- **Establish a child welfare quality assurance process that is distinct from the Child Protection Oversight and Evaluation review process.** The quality assurance process should be developed jointly between the State and counties as a mechanism to support ongoing learning and constructive exploration of quality of practice. Such a process might involve peer review between counties, jointly conducted with ODJFS technical assistance specialists; coaches’ assessments of workers’ quality of practice; and self-administered assessment tools.
- **Continue to hold ongoing forums 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. The in-person meetings of workers and supervisors have been a valuable support mechanism for both workers and supervisors throughout the pilot, and many have requested that these opportunities continue post-pilot. While conference-call opportunities were appreciated, feedback generally indicated that workers and supervisors did not feel that was the best medium to engage everyone.

In the early stages of statewide implementation, a single meeting should be convened for all relevant staff to attend. Initially, until other arrangements are made, the State should assume responsibility for the logistics pertaining to these meetings. State policy staff should be encouraged/expected to attend whenever possible. Optimally, for the first year post-pilot, these meetings should be run by an outside facilitator, and agenda items and salient issues should be documented.

- **Provide sufficient opportunity to review early decisions made by the Leadership Council in light of > 18 months of implementation experience.** As the Design Phase came to a close and decisions were being made to prepare for pilot implementation, members of the Leadership Council were assured that there would be ample opportunity post-implementation to review decisions, tools, and procedures created early in the process. It would be impossible to fully capitalize on the experience of the pilot counties without establishing a thorough review process to guide planning in advance of broader implementation.

Technical Assistance From the State to Counties

- Currently, technical assistance from the State to the counties related to practice does not exist. Technical assistance is around policies, rules, tools, SACWIS, and timeframes. These aspects of technical assistance are compliance-based. There is a need to create more capacity and defined roles at the State level related to practice shift.
- 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 as relevant to alternative response. RTCs will recruit and certify new trainers from the pilot counties to build training capacity.
- As indicated above, the State will need to take over 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. One possibility is to have a county person co-lead each meeting with a regional staff person or State staff person.
- In addition to the in-person meetings for alternative response workers and supervisors, the Leadership Council should continue to have quarterly meetings, with the State's

involvement and support. The membership of the Leadership Council may change as alternative response grows, both by the number of involved counties and the tenure of practice (e.g., one member per pilot county, ongoing representation of State SACWIS staff, etc.).

County and Community

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

It is important to frame the message about what alternative response is, and why alternative response is being implemented, in such a way that does not make workers and supervisors believe and/or feel that alternative response is better than an investigatory approach with families. This can set up an “us and them” mentality within an agency/county that can undermine successful implementation. It is important to emphasize alternative response as a system that needs both investigation and an alternative for families that do not require the fact-finding forensic approach. CPS will always require investigations, as they are necessary in some situations; however, ongoing emphasis that both (or all) responses are equally important is needed so that all work is valued, has a specific purpose, and is identified as significant.

- **Involve stakeholders/partners early and often.**

Strong relationships between child welfare services agencies and community service providers are important for creating a comprehensive system to support families in need. Informing the community about alternative response and securing stakeholder support is essential to developing and sustaining networks of supports for families served by the child protection system.

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

It is particularly important to involve those who have formal roles in the child protection system to minimize misconceptions and provide assurances that child protection professionals will continue to have a vital role to perform once alternative response is implemented. In addition, it is important to inform professionals that there is more than one way, i.e., removal, to keep children safe and address the needs of families.

- **Stakeholders need to be educated about the families that will be served better through this kind of a system, i.e., cases that have been unsubstantiated through investigation and are typically of low or moderate risk of harm (the vast majority of cases!):**

This theme has been detailed previously. Many of the families that receive services in the alternative response approach would not receive services via the investigation response to reports of maltreatment.

- **The entire community needs to support the safety of children — it is not something CPS can do alone.**

When educating community partners about this work, it is an opportune time to start messaging child protection as a community responsibility. The CPS system cannot do it alone, and alternative response is heavily reliant on access to community services and supports. The shared responsibility of families in a community shows that the CPS agency is willing to collaborate and share resources and power. This is a parallel process to the practice between workers and families.

- **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.** Judges and magistrates, though naturally somewhat removed from the daily process of alternative response, generally had a positive opinion of alternative response as well, and 9 out of 10 recognized the potential for alternative response to avert children from placement.

Families and Their Children

Families who were ‘enrolled’ in the pilot study were the subject of a CPS report, screened in based on the characteristics of the report, and determined to be eligible for alternative response, whether or not they were assigned to the experimental group. The composition of families determined to be appropriate for alternative response averaged 1.8 adults and 2.1 children. A little more than half the families had only one parent included in the intake report. The majority of caregivers were between 18 and 34 years of age. More than 9 of 10 reports included an adult woman and, in more than 8 of 10, she was a female parent, including biological, step, adoptive, or foster. When race could be determined, about 72% of families were Caucasian and 28% were African American. Records indicated only a handful of other ethnic/racial designations. Some Hispanic families were found in three of the more urbanized pilot counties.

Families assigned to alternative response are among the poorest families in Ohio. While 8% of Ohio families as a whole had incomes less than \$15,000, 68.1% percent of alternative response families were in this category, and 93.9% of such families had incomes less than \$20,000. These families typically experience problems associated with poor housing, rent, utility payments, furniture and appliances, transportation, and, at various times of the month and year, food and clothing purchases.

Alternative response families, and alternative response-eligible families, experience various challenges among their children. Of particular interest was that 17% indicated delinquent behavior; 19.9% indicated aggressive behavior toward others in the household; 27.1% indicated

problems learning in school; 14.2% said a child had a developmental disability (the question specifically mentioned “mental retardation”); and 17.4% noted possible child depression.

Sources of self-identified stress to these family caregivers included relationships with other adults and living arrangements (reported as stressful [*a lot or some*] by 29.1% and 32.5%, respectively). Areas in which the most family caregivers reported stress/worry were related to finances: current job or job prospects, 55.5%, and money available each month, 77.2%.

The majority of families in the experimental and control groups had been the subject of one or more past child abuse and neglect investigations prior to “current” involvement with child protection during the Pilot Project. *Most of these reports were allegations or substantiations of child neglect, and the more past reports received, the higher the proportion of past reports of child neglect.*

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 alternative response families more frequently felt the following:

- Optimistic
- Encouraged
- Positive
- Grateful
- Reassured
- Comforted
- Thankful
- Pleased
- Helped
- Hopeful
- 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. Families in the control group indicated feeling “tense,” “confused,” “worried,” “anxious,” “irritated,” “stressed,” and “angry” statistically more often than experimental families.

Alternative response families were in a positive state of mind after they first met with their worker, and this may be a necessary precondition to establishing a subsequent positive relationship. Families in the experimental group who received the alternative response

assessment were significantly more likely to indicate that they were satisfied with the way they were treated by the worker. Family respondents were asked whether their worker tried to understand their family's situation and needs. Families in the experimental group significantly more often answered *very much* (73.8%) compared to control families (63.8%) while answering lower percentages in the other three categories: *somewhat, a little, or not at all*.

These findings suggest that alternative response families were slightly more likely to have active discussions with their worker about their families' needs and to be involved in any decisions made, but the shifts in attitudes of family caregivers under alternative response are modest. One of the striking findings is the level of positive response of control cases. For example, while nearly 6 in every 10 experimental families were very satisfied, half of the control families were also very satisfied. Similar results are evident in the other figures. This speaks to the strong family-friendly practice that was already in place in the pilot counties. Only a minority of families in approach — the traditional or alternative response — were dissatisfied or felt that they had not been included. On the other hand, the statistical analysis indicates that the modest shifts observed through the introduction of alternative response can be understood as real changes in practice.

Family Engagement

Alternative response represents a change in emphasis and goals in approaching families reported to CPS. Child safety remains as a primary concern for workers visiting families, but a broader focus on the welfare of the family and children is also part of the assessment. In addition, the goal is to solicit the family's participation in decision making. To accomplish this, workers must build rapport and trust with families — that is, engage the family.

In the evaluation, the hypothesis is that if families are more engaged through alternative response family assessments, the emotional responses of families in the experimental group would be more positive and less negative than those of the families in the control group, and that families in the experimental group will express greater satisfaction than do families in the control group.

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.
- A greater sense of participation in decision making: Involvement in decision making increased under alternative response, as 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.

These findings indicate that, on the whole, the major goals of alternative response were met during the pilot period. The improvements in family engagement and services are prerequisites for the emergence of other longer-term positive outcomes concerning child safety and family welfare.

Services to families also shifted, and alternative response families reported receiving significantly more poverty-related services, especially “hard” services, such as food or clothing, basic household needs, utilities assistance, appliances or furniture, or other financial help. According to workers, families were more likely to act on the service information provided to them and participate in services.

Evaluation Findings

New Reports on Experimental and Control Group Families

New accepted reports in the experimental and control groups for families in the 360-day group revealed that 13.3% of control families had new reports, compared to 11.2% of experimental families. The corresponding figures for families entering during the first 240 days were 19.7% for the control group and 16.5% for the experimental group. *The difference for the 360-day group was 2.1% and was statistically significant. The difference for the 240-day group was 4.2% and was also statistically significant.* On average, 1.7 children were removed from families — two or more children in about 40% of cases.

FINDING: Alternative response appeared to reduce the number of child removals and out-of-home placements.

Alternative Response: Mother-Only Families and New Reports

Mother-only families are the most impoverished families, and they received the most services under alternative response. Slightly more than 62% of mother-only experimental families in the family survey sample received at least one service, compared to 50.3% of non-mother-only families. Thus, one of the effects of alternative response apparently was an increase in services for this kind of family.

Alternative Response: Race, Poverty, and New Reports of Child Abuse and Neglect

In comparing the effects of alternative response on the two large racial groups in this study — African American and Caucasian families — analysis suggests that alternative response produced the best results among African American families. Predicted racial patterns were reversed, as African American families as a group were being assisted to a greater degree than Caucasian families through alternative response. This pattern has less to do with race directly and more to do with the degree of poverty. The criterion for success was reduction in new accepted reports of child abuse and neglect. Among African American families in the 360-day group, 15.9% of the control group had new reports, compared with 11.1% of the experimental group. The raw percentage difference was 4.8%. The difference for the entire study group was 2.1%. Both the control variable (previous reports) and the experimental-control group difference were statistically significant.

FINDING: In this evaluation, it is evident that the major positive effects of alternative response on new reporting of child maltreatment have occurred among minority families.

Out-of-Home Placement

Alternative response has been conceived, by and large, as aimed at families whose safety problems are less severe or can be quickly dealt with so that the focus can shift to child and family welfare issues. Whether alternative response may have some effect on out-of-home placement has been considered a misplaced question because it is thought that alternative response families are not likely to be the kinds of families where children are removed.

Focusing on the 360-day group of 3,659 families that entered the study from July 2008 through June 2009, only 102 families (2.8%) had a child removed by the end of data collection in January 2010. This proportion is low, but it is roughly comparable to the percentage of children removed at a similar point in time in the Minnesota alternative response evaluation mentioned earlier. Within the Ohio Alternative Response Pilot Project control group, 3.7% of children had been removed, while 1.8% had been removed in the experimental group.²³

On average, 1.7 children were removed from families — two or more children in about 40% of cases. Statistical tests support the idea that, while the differences are modest, they are very likely real. Like Minnesota and as stated previously, alternative response appeared to reduce the number of child removals and out-of-home placements.

²³ 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 pathway changes.

Workers and the Agency

Forty-seven percent of experimental families said they were very satisfied with the services offered or received, compared to 34.4% of control families. This difference was substantial and statistically significant. Satisfaction with services was the primary correlate of satisfaction expressed by families with their treatment by their worker. When family satisfaction was controlled for level of satisfaction with services received, experimental and control differences disappeared. In this analysis, therefore, satisfaction with services was a dominant factor associated with a positive response from families. Determining whether improved family engagement under alternative response is a function of the change in approach or the change in service emphasis is complex. Previous work has suggested that both elements have an effect. Approach and services cannot be easily separated. The approach emphasized under alternative response is more than being non-threatening and sympathetic. It involves active listening to expressions of need, planning with families to solve problems and meet needs, and follow-through of workers, as well as families, in carrying out the plans.

- The majority of workers involved with the Alternative Response Pilot Project found that alternative response has affected their approach to families positively and in important ways. Comments from workers show that engagement with families became less blame-driven and more holistic. More services were provided, and workers reported being more able to intervene effectively. Alternative response was viewed as providing a way to approach the family in a friendlier, non-accusing manner and allowing the family a better way to participate in decisions and case planning.
- Most workers saw families as being more cooperative when they are served through alternative response. Assessments of the relative impact of the alternative response approach versus the extra funding available suggested that workers found the approach to be slightly more important for affecting outcomes.
- Most staff involved with the alternative response pilot felt that the alternative response approach would have a positive effect on families even if there were not additional funds for services. In addition, nearly 40% of staff involved in alternative response stated that alternative response has encouraged them to stay in the field of child welfare.

FINDING: Alternative response impacts worker retention: When asked whether the introduction of alternative response has made it any more or less likely that they will remain in this field of work, 18.6% of alternative response county staff responded “much more likely” and 20.3% responded “a little more likely.”

- 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 relevant in this case as in most other organizational matters. An examination of the impacts of a ‘union shop’ on the

implementation of alternative response would be most beneficial so guidance can be developed for relevant child protection agencies.

- 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.
- **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. The more communication about the “what and why” of alternative response — both in terms of frequency and different audiences — the more likely this new practice can be integrated into the day-to-day work of the agency.
- **Peer champions can be enlisted to help craft and communicate the message about alternative response going forward with new workers.** In their reflections on the pilot experience, workers keyed in on early messages they found confusing or obstructive as they prepared to implement alternative response. In several instances, workers underscored the need to learn by example through peer discussions and shadowing, as well as in-the-field coaching.

Practice

- ***Whenever feasible*²⁴, it is recommended that workers carry either alternative response or traditional response cases and not (unless requested by the worker) carry mixed caseloads.** Workers who have carried *mixed caseloads*, for whatever reason, report that alternative response cases tend to take a back seat to investigation cases. Due to the nature of investigation cases, they have *greater* urgency and increased compliance-driven requisites. Workers also report having difficulty switching from an alternative response approach to an investigation approach. They report confusion and describe difficulty in changing how they work with families when they have to keep reverting to “old ways” of doing things.

FINDINGS from Coaching Round I:

- *All counties in which the workers were expected to carry both alternative response and traditional response cases expressed that carrying a “dual” caseload was difficult because it was hard to “switch hats” and because alternative response cases were likely to take a back seat to traditional response cases given the mandates and*

²⁴ 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 AR dedicated workers is not to be interpreted as an impediment to quality practice.

- characteristics of most traditional response cases. Workers were less satisfied with their work with families and expressed frustration with not being able to do alternative response cases the “right way” because the traditional response cases were higher priority and thus, “trumped” the alternative response cases.*
- *Counties in which a dedicated alternative response unit was created — Fairfield, Franklin, and Trumbull — expressed the greatest satisfaction with implementation, while counties with dispersed alternative response staff and supervised by different supervisors expressed dissatisfaction and greater confusion.*
 - **Recommend that supervisors either supervise alternative response or traditional response staff:**

Supervisors who have supervised a unit of mixed staff report difficulty in “switching hats” when supervising both approaches to the work; they have difficulty institutionalizing a change in practice when they can’t focus on the practice change.

FINDINGS from Coaching Round I: *It was easier for supervisors to model the proactive approach and ensure fidelity in counties in which workers carried only alternative response cases because neither the supervisors nor workers were required to switch between the pathway responses. We can hypothesize that they were better able to focus on and practice the skills needed to competently perform this approach.*
 - **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’. Although very positive overall about the difference alternative response has made for workers and families in their counties, many supervisors indicated that they wished they had received more support and specific opportunities for their own professional development related to alternative response prior to implementation. While this is certainly a lesson learned relative to new counties exploring alternative response, current supervisors also indicated that they appreciated the ongoing learning opportunities provided later in the pilot. Several supervisors commented that the coaching opportunities provided during and after the pilot have been exceptionally valuable, and many of these experiences have resulted in significant shifts in language and process within the counties, even when offered later in the pilot.
 - **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 the findings with the IAR . The results of the workload study should be examined and recommendations if feasible, should be carried out.**
 - .

FINDINGS: Evaluation findings indicate that alternative response workers tended to hold cases open longer than traditional response workers did and that 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. There is an essential need to invest in building a relationship between worker and family. If fidelity of 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.
- There were various levels of understanding of the practice changes by supervisors and an even longer lag by State policy staff, compared to frontline workers. It was challenging not to view this as a passing fancy of the child welfare agency. Acknowledging its endurance, alternative response is best understood if changes in the way families are treated, participate, and respond are observed.

RECOMMENDATION: 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.

- Workers reported feeling more able to intervene effectively with families receiving the alternative response than with other families. On a scale from 1 to 10 (1 = very negative, 10 = very positive), alternative response was highly impactful for those who participated in its implementation; the mean rating was 7.87. When asked to report on whether alternative response has influenced a change in work style or performance, 62.3% of county staff involved with the Alternative Response Pilot Project reported that it had affected how they approach families “a great deal” or “in a few important ways.” Another 26.3% found involvement in alternative response to have affected them “in small ways.” Very few workers involved with alternative response felt their performance was not affected (8.2%).
- Workers and agency staff need to understand the difference between *desired* practice and *safety-based* practice exceptions. A number of practice expectations — such as notifying the family before a visit is made by the worker, and meeting with the caregivers and children together to discuss the reported concerns — are respectful, engaging, and purposeful. The reality is that, because *safety* of the children is the agency’s first and foremost priority, exceptions to the desired practice are appropriate if, for instance, seeing the child without his/her parents is the only way a worker can

ensure the safety of the child in a timely manner. The caveat is that these practices should be the exceptions, not the rule.

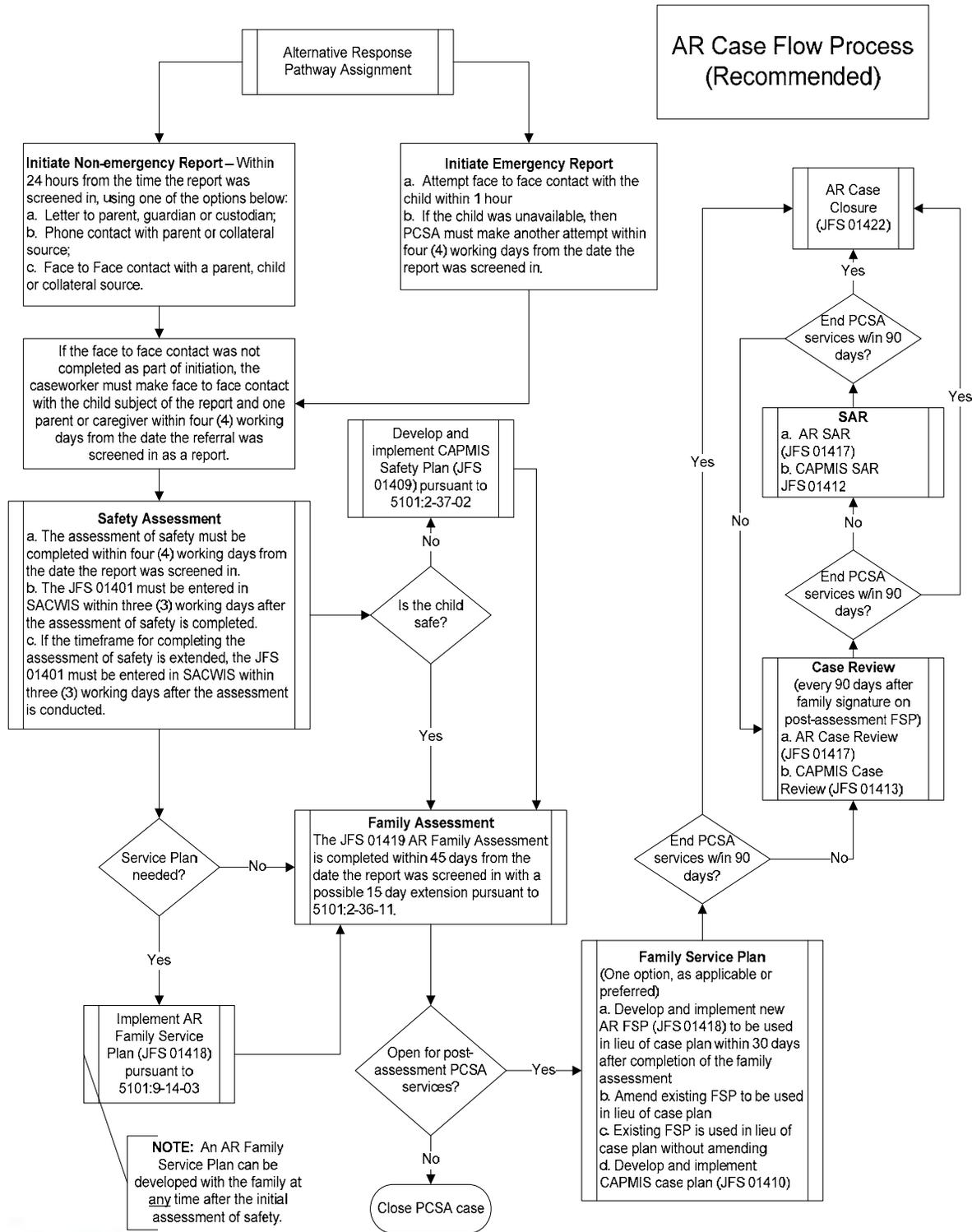
Recommendation: Ongoing technical assistance on alternative response from the State to pilot counties is essential:

- ODJFS and/or the Supreme Court of Ohio should appoint one individual at the State level whose dedicated role is to provide ongoing technical assistance and support for counties regarding the alternative response practice. This *support person* should have knowledge of and, preferably, direct experience in alternative response and would be available to provide regular mentoring and coaching on both an as-requested and as-warranted basis.
- **Supervisors should set an expectation and periodic practice of accompanying supervisees (i.e., workers) on their field work with families.** Supervisors should possess the skill to observe their workers' practices and provide consultation and feedback to the workers to model the use of engagement tools and strategies that enhance the quality of alternative response practice with families.
- **Group case consultation²⁵ within and across units should be encouraged and ultimately institutionalized.** Group supervision is an effective way of supporting the alternative response philosophy in that it creates a transparent environment in which workers share responsibility for the casework. Group case consultation can provide an excellent environment for strategizing solutions for worker and family concerns.
- **In order to facilitate the above item, education and/or training must be provided to PCSA workers and supervisors on the philosophy behind and mechanics of group case consultation** The distinct models, skills and processes that support and promote group supervision and consultation practices require skill acquisition in order to maximize the potential benefits of this collaborative consultation. Education and training increases the likelihood that desired benefits will be achieved including the ability to sort through challenges and “murkiness” in practice change; encourage fidelity to the practice change; and enable ongoing discussion about best hopes and worst fears.

²⁵ Models, strategies and processes that support group case consultation practices include Six Thinking Hats (E. De Bono); Mapping (A. Turnell, S. Lohrbach); and Structural Group Process ([Insoo Kim Berg & Susan Kelly](#))

Procedures and Tools

Figure 4: Alternative Response Case Flow



NOTE: An AR Family Service Plan can be developed with the family at any time after the initial assessment of safety.



The workflow diagram depicted in Figure 4 details the process by which an “alternative response case” moves through the child protection system – identifying procedures and tools that are to be followed/completed at various stages in the process.

The AIM Team is a proponent of tools that fit practice, not the other way around. Simple is key! The focus must remain on what makes sense to families while also making sure that what needs to be reported for CFSR is being recorded.

Pathway Assignment Tool

Ohio Alternative Response Evaluation, Research Brief 3: Pathway Assignment (January 13, 2010): It would be worthwhile to 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 screens²⁶. 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. The terms “inappropriate” and “appropriate” in the descriptions of discretionary items must be explicitly defined in accompanying instructions because these items should not exclude a family from an alternative response assessment.

In terms of reassignments, 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.

As described earlier, criteria were established by the Design Workgroup regarding pathway assignment for the duration of the pilot. These initial criteria are compared in Table 3 to those criteria that are recommended at this time, by the project evaluators, with the benefit of the learnings of the 18 month pilot study.

²⁶ 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.

Table 3: Pathway Assignment Criteria Comparison

TRADITIONAL PATHWAY REQUIRED ORIGINAL:	TRADITIONAL PATHWAY REQUIRED PROPOSED REVISION	DISCRETIONARY GUIDELINES ORIGINAL:	DISCRETIONARY GUIDELINES PROPOSED REVISION
Felony child endangerment, felonious assault, felony domestic violence	Allegations of serious harm to a child (multiple items, if necessary)	Currently open traditional assessment	Currently open traditional assessment
Criminal sexual conduct, including: <ul style="list-style-type: none"> ◦ Rape ◦ Sexual battery ◦ Unlawful sexual conduct with a minor ◦ Gross sexual imposition ◦ Sexual imposition ◦ Importuning ◦ Voyeurism 		Frequency, similarity, or recentness of past reports	History with agency: types of past reports makes an alternative response family assessment inappropriate
Sexual abuse of a child or an abused child who is a victim of sexual activity	Sexual abuse allegations of a child	Long-term court-ordered placement will be needed	Substance abuse makes an alternative response family assessment inappropriate
Homicide, including: <ul style="list-style-type: none"> ◦ Aggravated murder ◦ Murder ◦ Voluntary manslaughter ◦ Involuntary manslaughter ◦ Reckless homicide ◦ Negligent homicide 		Need legal intervention due to violent activities in household	Law enforcement involvement occurred or is likely - - - - - Past or present criminal activity makes an alternative response family assessment inappropriate
Reports requiring specialized assessment	Reports requiring a specialized assessment	Past maltreatment concerns not resolved at previous closing	Past unresolved maltreatment concerns make alternative response family assessment inappropriate
Reports requiring a third-party assessment	Reports requiring a third-party assessment		History with agency: lack of cooperation makes an alternative response family assessment inappropriate
Parent/legal guardian has declined services in the past		Parent/legal guardian is unable or unwilling to achieve child safety	Mental health and emotional stability concerns make a traditional response assessment necessary
Reports requiring involvement of a Child Advocacy Center		Other local considerations	Other risky conditions make a traditional response assessment necessary (specify)
Suspicious child fatality	Suspicious child fatality or homicide	Previous child harm offenses charged against the alleged perpetrator	Previous child harm offenses charged against the alleged perpetrator

Family Service Plan

In the fall of 2007, the Post-Assessment Task Team began discussing the Family Service Plan in depth as a replacement to the very time-intensive case plan that is used in the traditional pathway. There was much conversation about the tool's content, utility, language, and purpose. The group looked at examples of comparable tools from Minnesota and a tool Fairfield County had been using. A compilation of these two tools formed the first iteration of the Family Service Plan, which was shared with the Design Workgroup in January 2008. The goal was to create a Family Service Plan that had all of the required documentation for the CFSR, was easy to understand by families, and was quick to complete with the family present. Open-ended questions were amended by the Task Team and with the Design Workgroup's approval. The policy staff at ODJFS reviewed the tool and identified the following elements as the minimum requirements for the Family Service Plan:

- identify participants (children and adults),
- implementation date,
- document children protected under the Indian Child Welfare Act,
- document issues of safety and risk,
- document the link between the assessment and the activities,
- identify service provision and the recipient of the service,
- document how the family participated in the development of the plan, and
- signatures of participants prior to completion of the Family Assessment and parent(s), guardians(s), custodian(s) after completion of the Family Assessment.

After several iterations, a Family Service Plan was approved by the Design Workgroup and approved by ODJFS for use during the Pilot Project. The glitches with the document became apparent quickly, as workers started using it with families. A case plan in a traditional case is completed after the Family Assessment. In the alternative response, it could, during the pilot, be completed at any time, but must be completed within 45 days. This was the first major difficulty because the purpose of the Family Service Plan got slightly diluted when the Design Workgroup decided it should be used as the marker for the \$1,000 per family for post-assessment services that each county was eligible for. This monetary tie was an incentive in counties to complete the Family Service Plan sooner in a case if concrete services were offered. In a traditional path, concrete services can be offered without completing a case plan, so this was somewhat confusing to intake staff. Workers felt strongly that the Family Service Plan did not work well for concrete services. The second challenge came when workers started confusing a *service* plan with a *safety* plan. Workers also did not like the language of "safety concerns" on the Family Service Plan, since it was discouraging to families when engaging them.

A column on the Family Service Plan also created confusion for workers trying to document progress on a service.

Improvements have been made since these difficulties but more are still warranted. It does not fit with the other CAPMIS tools to guide decisions and move a family through the system. Franklin County is looking for solutions to this problem. One solution is to pull different sections from the Case Plan in CAPMIS, as it will allow for systematic review of the service plan, which is not the case with the current Family Service Plan. Although the Family Service Plan is quite useful in working with families, it does not work in tandem with other tools in a complementary way. The CAPMIS 90-day review is also a good tool for use in the alternative response approach (goal-directed). However, the report generated by SACWIS is not useful in alternative response practice.

RECOMMENDATION: The use of the Family Service Plan will 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. It is imperative that alternative response-specific tools be reexamined, tested in the field, and amended in response to practice wisdom and experience. The purpose and expectations of their use must be understood by all users and those impacted by their use. In particular, should there be an expectation that tools are completed with and in the presence of families, it is essential that this can be executed as flawlessly as possible in order to effectively meet the needs of both the families and the agency in keeping children safe.

RECOMMENDATION: The State, in collaboration with the Leadership Council, should form a workgroup to address practice tools and determine what requires SACWIS modification.

Timeframes That Guide the Practice of Alternative Response

At the March 9-10, 2010 meeting, the Leadership Council formally reviewed the timeframes that were initially established for the pilot study. A comparison of the two is provided in Table 4. The timeframes in the second column reflect the recommendations of the Leadership Council to the State should statewide implementation of alternative response become a reality.

Table 4: Timeframe Comparison

Timeframes (December 2007)	Timeframes (March 2010)
Timeframe for screening emergency report will remain 1 hour from the time the referral was received.	No change.

<p>Screening decisions will be determined in no more than 4 hours²⁷ after the receipt of the referral, and pathway assignment will be determined as soon as possible, no more than 24 hours after the report was screened in (the receipt of the referral).</p>	<p>Screening and pathway assignment decision must occur as soon as possible and no more than 24 hours after the report was screened in (the receipt of the referral).</p>
<p>Recommendation: Before there is statewide implementation, the timeframe for screening decisions is revisited with the intent to expand the allotted time.</p>	
<p>The current initiation timeframe of no more than 24 hours from the time the report was screened in will remain as is.</p>	<p>Statutory/Rule Framework Recommendation: Amend the reporting statute to include an exception to the requirement that all accepted reports of abuse and neglect receive an investigative response within 24 hours, to allow for a FAR during an extended timeframe.</p>
<p>Screening decisions must occur before initiation, and initiation can occur before or after pathway assignment.</p>	<p>No change.</p>
<p>Extend the timeframe for completing the safety assessment and face-to-face contact to no more than 4 working days from the time the report was screened in, to be consistent with CAPMIS guidelines.</p>	<p>No change.</p>
<p>Extend the timeframe for entering the Safety Assessment into SACWIS to no more than 3 working days.</p>	<p>The safety assessment will be completed in SACWIS within no more than 7 working days from the time the report is screened-in.</p> <p>If an extension has been approved, once you have completed the assessment of safety you have an additional three (3) working days to complete the safety assessment in SACWIS.</p>
<p>Up to 45 after the report was screened in to complete family assessment.</p>	<p>Up to 45 calendar days after the report was screened in to complete family assessment. A 15 day extension may be granted with approval should extenuating circumstances exist.</p>
<p>Service plan completed within 15 working days of completion of the family assessment.</p>	<p>Service plan must be completed within 30 working days of completion of the family assessment.²⁸</p>

²⁷ This 4-hour rule has been extended to 24 hours.

²⁸ The AIM Team would amend the wording of this designated time frame to, “The service plan should be completed as soon as possible following the completion of the family assessment and more than 30 working days of completion of the family assessment

All service plans reviewed every 90 calendar days.	All service plans review every 90 calendar days after signature on the post-assessment service plan.
Face-to-face contact no less than monthly (risk guided and supervisory decided).	No change ²⁹

Timeframes

RECOMMENDATION: Align the timeframes of both 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. A workload study should be undertaken at the conclusion of three years of alternative experience to inform agency and state policy regarding the amount of time required to do this work and compare the findings with the IAR .

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. Two field experiments by the Institute of Applied Research have been conducted to test the effects of introducing alternative response within child protection: (1) Missouri: 1995-1998, extended analysis 2003; and (2) Minnesota: 2001-2004, extended analysis 2006. In both instances, child safety did not diminish. The safety of children did not decline while families were receiving the new approach in either state. Workers in Minnesota reported more improvements under alternative response in child safety problems found during the first home visit. In Missouri, it was demonstrated that children were made safer sooner.
- **Alternative response is about building relationships with families.**

²⁹ The AIM Team does not support this time frame. “Monthly” is not interpreted as 30 days but rather by the name of the month. It is possible to adhere to this time frame and visit a child and his/her family face-to-face on August 1st and September 30th. The AIM Team does not believe that fidelity to alternative response practice can be retained within this framework. Several members of the Leadership Council did not support this time frame.

- In the *business*, it will always be difficult to balance the competing priorities. For example, it can be difficult for agencies to balance the statutory and policy mandates, as well as the desire to maintain the worker-family relationship, with managing caseloads and workloads among staff. Whenever possible, the prevailing guidepost must be *what is best for the family*. Decision making begins with this in mind; exceptions to this decision-making rationale must be closely examined.
- Relationship-building and collaboration are essential to successfully transform the practice. Compliance-based relationships threaten the success of alternative response implementation and undermine any progress that has been made. Parallel processes must exist between:
 - State agencies,
 - State agencies and county agencies,
 - counties,
 - county agencies and their communities,
 - county agencies, community providers, and line workers,
 - supervisors and workers, and
 - workers and families.
- **Full indirect costs were slightly more expensive for alternative response.**
 - The direct costs of services paid for by CPS, including placement, and the indirect or administrative costs for experimental and control families were examined. Reflecting increased worker time with families, AR was more expensive in the immediate term.
 - AR family assessments averaged \$940 per family compared to \$732 per family for TR investigations. Reflecting increased worker time with families, AR was more expensive in the immediate term.
 - For subsequent work, experimental families averaged \$145 per family compared to \$266 for control families. Total costs for control families averaged about \$999 per family compared to \$1,084 for experimental families. *At this point in the follow-up, experimental families were slightly more expensive (\$85 per family) overall in indirect costs than control families.*



VII. GUIDANCE FOR THE FUTURE

At the end of the Pilot Project, numerous stakeholders commented on the significance of the implementation process and the change created over time in their counties. The experiences of the pilot counties provide strong evidence of the factors that were the most-critical drivers of meaningful system change.

Building on these experiences and the evidence and recommendations of this report, Ohio will be pursuing a statewide child protection system that provides two responses to families who come to the attention of the CPS agency.

The proposed timeline that follows (Table 5) delineates the goals, activities in support of these goals and time frames associated with the milestones. It is not intended to be prescriptive but rather provide a template for consideration and deliberation.

**TABLE 5: PROPOSED TIMELINE FOR OHIO ALTERNATIVE RESPONSE STATEWIDE IMPLEMENTATION
[INCREMENTAL AND VOLUNTARY ROLLOUT]**

<p>GOAL: Develop a <i>statewide child protection system</i> that provides <i>two</i> pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.</p>	
BENCHMARK	IMPLEMENTATION ACTIVITIES OR EVENTS
CURRENT ALTERNATIVE RESPONSE PILOT	
July/August 2008 - Present	Ten Ohio counties launch and implement Alternative Response System for 18-month Pilot Project .
September 2009	<p>Pilot counties develop and implement Transition Plans to operate alternative response approach post-evaluation protocols.</p> <ol style="list-style-type: none"> In preparation for the September 14-15, 2009, Leadership Council Meeting, the AIM Team requested each county to develop a plan that clearly explains the county’s transition from the use of random assignment to control or experimental groups for all families that were ‘alternative-response eligible’ to not using the randomizer. The plans included the following items: <ul style="list-style-type: none"> Data collection consequences Staffing consequences Anticipated community services consequences Rationale for decision (“company line”) – What the public is told about why the county is going forward with the work. Through their agency-specific internal processes, each county developed a Transition Plan and submitted it to the AIM Team. Comments were provided on each Transition Plan. Counties presented their plans at the September Leadership Council Meeting. Transition Plans take effect and are implemented as of October 1, 2009. <p>All staff of the 10 pilot counties have an opportunity to receive additional training and coaching: updated practice curriculum; field training with coaches; supervisors’ training; specialized training, such as supervision, Signs of Safety, domestic violence, etc.</p> <ol style="list-style-type: none"> Assess individual county needs for training, coaching, and consultation via e-mail and telephone conversations. Identify available trainers/coaches to meet expressed needs. Crosswalk needs with availability and chart schedule for training/technical assistance. Conduct training and coaching, as planned.

GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK**IMPLEMENTATION ACTIVITIES OR EVENTS**

5. Solicit evaluations from each training.
6. Trainers/coaches submit follow-up reports that summarize their observations and the participants' responses to training/coaching sessions.

With guidance from the AIM Team, the core elements of the **Ohio Alternative Response Practice Model** are defined and agreed to by the Leadership Council. The model distinguishes items that are required of all Ohio counties by the State from those where there is flexibility and where counties have discretion.

1. Using decisions and discussions of the Leadership Council, the AIM Team creates *for discussion* a draft of the Practice Model for review by ODJFS and the Supreme Court of Ohio.
2. Feedback from ODJFS and the Supreme Court of Ohio is addressed.
3. Revised draft Practice Model is vetted with each of the 10 pilot counties.
4. Another iteration is created, and any outstanding issues are noted.
5. Practice Model is finalized and agreed to by all pilot counties at the December 2009 Leadership Meeting.
6. Develop and implement continuous quality improvement process to assess alternative response practice model fidelity.

Final Report presented by the AIM Team to the Subcommittee with evaluation results of the Pilot Project and statewide recommendations based on those results.

1. Analyze data and summarize evaluation findings.
2. Review other sources of information, e.g., Chronicle documents, Casey reports.
3. Share project results with ODJFS and the Supreme Court of Ohio.
4. Develop Final Report outline.
5. Write initial draft report.
6. Internal review; ODJFS and Supreme Court of Ohio feedback.
7. Write final version of Final Report.
8. Present findings before Subcommittee.

A **statewide Ohio Alternative Response Symposium** is held to bring alternative response counties together to learn from one another, celebrate their achievements, and create momentum. Provide information-gathering opportunity for counties interested in participating in the second pilot group.

1. Develop hotel specification sheet
2. Request hotel contracts

GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK

IMPLEMENTATION ACTIVITIES OR EVENTS

3. Identify advisory committee and define roles
4. Identify and invite keynote and plenary speakers
5. Develop public relations strategy
6. Develop Call for Presentations with attention to 10 pilot counties
7. Develop preliminary program
8. Set deadline for abstracts
9. Review abstracts
10. Notify presenters and non-presenters
11. Monitor hotel pick-ups
12. Send confirmation letters to speakers, presenters, entertainers, etc.
13. Prepare registration packets
14. Convene Symposium
15. Send thank-you letters

The Ohio Alternative Response Leadership Council convenes quarterly throughout implementation to guide decision making and planning in relation to the future of alternative response. In preparation for statewide implementation of alternative response, the Leadership Council will **provide recommendations** on pathway assignment criteria, timeframes for decision making, staffing and workforce capacity, training, policy rules, documentation requisites, and forms.

Alternative response procedures, tools, and documentation

1. Pathway assignment criteria
2. Identify expected response timelines for:
 - ♦ screening
 - ♦ first contact
 - ♦ assessment completion
 - ♦ service plan
 - ♦ services
3. Identify tools to assess:
 - ♦ safety
 - ♦ risk
 - ♦ family needs and functioning
4. Develop:
 - ♦ case opening criteria
 - ♦ case plan format
 - ♦ Family Service Plan

GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK	IMPLEMENTATION ACTIVITIES OR EVENTS
	<ul style="list-style-type: none"> ◆ safety and risk reassessment tools ◆ case closing criteria

PREPARATIONS FOR 2ND PILOT GROUP

April 2010 *Comprehensive public awareness, education, and outreach campaign*

1. Determine communications capacity — staff, time, budget, other resources.
2. Identify goals of communication campaign.
3. Identify target audiences.
4. Frame the issue — message development and messengers.
5. Identify and develop deliverables.
6. Prioritize options.
7. Track and assess impacts and outcomes.
8. Tailor additional communication vehicles.
9. **Continue to produce quarterly newsletter.**

Activities to support culture change among local and state stakeholders to establish common vision and performance expectations.

1. Assemble a critical mass of key stakeholders.
2. Articulate the desired change and the ways it benefits the stakeholders.
3. Develop a change management strategy with an awareness of the groups being impacted by the change and the need to include them.
4. Identify potential risks and anticipated points of resistance, and develop specific plans to mitigate or address the concerns.
5. Gather information, evaluate results, and present findings in an easy-to-understand manner.
6. Develop communication plan, coaching plan, training plan, and resistance management plan.
7. Deploy active and visible coaches to facilitate adoption of alternative response.
8. Identify resistance and performance gaps, and address them.
9. Create rewards and reinforcement mechanisms and celebrations of success.
10. Establish teams to integrate supportive activities into the overall alternative response plan.
11. Assess resource capacity and cultivate growth of flexible funds.

Alternative Response Policy Changes



GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK**IMPLEMENTATION ACTIVITIES OR EVENTS**

1. Establish legislative authority to implement alternative response (with CHIPS legislation).
2. Draft new agency rules responsive to the alternative response approach.
3. Orient agency rules and procedures to match the practice model.
4. Identify financial implications and strategies to provide flexible funds.

Modify the SACWIS system to support alternative response protocols; provide opportunity for end-user feedback and field tests.

1. Identify automation needs to support alternative response protocols.
2. Follow a standard process to initiate change requests.
3. Generate a change request summary and submit it for approval.
4. If approved, implement and manage the change request.
5. Program end users and data personnel work collaboratively to fill the gap in the information technology system.
6. Opportunity to test the “fix.”
7. Training provided, as warranted, on the modification.

Develop and execute a plan for ongoing evaluation to determine the enduring effectiveness of alternative response. Data collection is focused on elements that measure outcomes which allow for continuous improvements in policy, structure, practice, and training.

1. Plan developed between ODJFS and counties to continue data collection on agreed-upon measure and to share this data with the State and other counties.
2. Semi-annual reports will provide analyses that address the following general issues:
 - ♦ Child safety under alternative response
 - ♦ Pathway assignment: alternative response assessment or traditional investigation
 - ♦ Organization of alternative response
 - ♦ Workforce capacity
 - ♦ Model fidelity
 - ♦ Services
 - ♦ Community development
 - ♦ Subsequent reports of child abuse and neglect
 - ♦ Family and child well-being
 - ♦ Subsequent removals and placement of children
 - ♦ Referrals to juvenile/family court

GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK**IMPLEMENTATION ACTIVITIES OR EVENTS**

- ♦ Cost of alternative response

Convene forum at Alternative Response Symposium to counties interested in joining the ten pilot counties with the introduction to alternative response in their county.

1. AIM Team members convene alternative response orientation session at the May 2010 Alternative Response Symposium. This session will provide an opportunity for representatives of neighboring counties to participate in an open dialogue about the alternative response approach.

Issue Request for Proposals and select 10 additional pilot counties.

1. Develop RFP.
2. Identify reviewer and detail the review process.
3. Review proposals.
4. Select pilot counties.

Provide initial and ongoing training (orientation, procedures, practice); specialized training; technical assistance; coaching). Develop train-the-trainer capacity.

1. Assess individual county needs for training, coaching, and consultation via e-mail and telephone conversations.
2. Identify available trainers/coaches to meet expressed needs.
3. Crosswalk needs with availability and chart a schedule for training/technical assistance.
4. Conduct training and coaching as planned.
5. Trainers/coaches submit follow-up reports that summarize their observations and the participants' responses to training/coaching sessions.
6. Create opportunities to develop intra-state training capacities.
7. Develop a train-the-trainer curriculum.
8. Deliver the train-the-trainer curriculum.

Transition the current Leadership Council to the Alternative Response Advisory Council, which is comprised of one representative from each of the 25 alternative response counties.

Assess staff structure and workforce capacity. Ensure sufficient numbers of staff who have specialized skill sets to work the pathway of their choice, whenever possible. Best practice indicates a preference for social worker continuity from assessment through service completion.

In-person discussions and surveys will allow for information gathering

GOAL: Develop a **statewide child protection system** that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK	IMPLEMENTATION ACTIVITIES OR EVENTS
	<p>from workers, supervisors, and administrators on:</p> <ul style="list-style-type: none"> ◆ structure of practice ◆ workflow ◆ workforce capacity/caseload ◆ competencies and skill sets ◆ worker satisfaction
<p>LAUNCH OF 2ND PILOT GROUP</p>	
<p>July/August 2010</p>	<p>Ten additional counties launch and implement alternative response systems.</p>
	<p>Inclusion of alternative response core competencies in Ohio Child Welfare Training Program (curriculum plan development). Collaboration between AIM Team and Institute for Human Services will allow for and begin the adoption of alternative response core competencies within the Ohio Child Welfare Training Program.</p>
	<p>Mentorship of State alternative response “champions” who will be able to do the work that the AIM Team has already begun (target State policy staff). Plan/convene a Leadership Academy for select State and county staff who will be groomed as “champions” for the new child protection system. These individuals will serve as “change agents” charged with building political will, addressing and breaking down resistance, marketing the practice changes, brokering partnerships, and sustaining and solidifying the base of support.</p>
	<p>Provide ongoing training, technical assistance, and coaching in response to identified needs. Make significant investments in training child protection workers in a strengths-based and collaborative intervention model and sustaining those skills on an ongoing basis.</p> <ol style="list-style-type: none"> 1. Assess individual county needs for training, coaching, and consultation via e-mail and telephone conversations. 2. Identify available trainers/coaches to meet expressed needs. 3. Crosswalk needs with availability and chart a schedule for training/technical assistance. 4. Conduct training and coaching as planned. 5. Trainers/coaches submit follow-up reports that summarize their observations and the participants’ responses to training/coaching sessions. 6. Create opportunities to develop intra-state training capacities.

GOAL: Develop a *statewide child protection system* that provides *two* pathways — an investigation pathway and an alternative response pathway — and which assesses and responds to the unique safety concerns, risks, and protective capacities of each family that is the subject of an accepted report of child maltreatment.

BENCHMARK	IMPLEMENTATION ACTIVITIES OR EVENTS
	<p>7. Deliver the train-the-trainer curriculum.</p> <p>Regularly convene and institutionalize <i>quarterly regional staff meetings</i> focused on sharing practice wisdom.</p> <p>With the addition of 10 counties, the AIM Team will ask workers and supervisors to formalize their own quarterly regional staff meetings in which the agenda and the meeting is established by alternative response staff. AIM Team members will be on “standby” to provide support, if warranted.</p> <p><i>Monitor and facilitate organizational change process</i>; e.g., continue to advise on conceptual planning, facilitate stakeholder meetings, and facilitate activities to assess strengths, weaknesses, challenges, threats/opportunities (SWOC/SWOT analyses) that involve multiple stakeholders (AIM Team). Set the stage for “open season.”</p> <p><i>Collect and synthesize data from all 20 pilot counties</i> and package results in multiple formats for specific target audiences. These results are to be shared, at a minimum, every 6 months.</p> <p><i>Convene the Ohio Alternative Response Advisory Council quarterly</i> to address common administrative, policy, practice, and evaluation issues. Learnings will inform roll-out of the remaining 68 counties.</p> <p><i>Conduct systematic review of State policies and tools</i> to ensure “goodness of fit” with the practice of alternative response.</p>
ALTERNATIVE RESPONSE “OPEN SEASON”	
January 2011	<p>Alternative response “open season” begins: Any of the remaining 68 Ohio counties may launch and implement the Alternative Response System.</p> <ul style="list-style-type: none"> ♦ <i>Build capacity</i> ♦ <i>Provide training...and more training, technical assistance, coaching</i> ♦ <i>Monitor model fidelity</i> ♦ <i>Monitor financial and service impacts</i> ♦ <i>Develop an action plan to address financial and service impacts</i> ♦ <i>Data collection; evaluation results; continuous quality improvements</i>
STATEWIDE ALTERNATIVE RESPONSE IN OHIO	
January 1, 2015	88 Ohio counties implementing alternative response.

Going to Scale³⁰

Scalability: An evidence-based intervention, practice model, or systems-change initiative that reaches 60% of the population that could benefit (National Implementation Research Network, March 2010).

Alternative response is currently a “boutique operation” in Ohio. There are convincing demonstrations that alternative response can be implemented in 10 counties. There is reason to think the implementation should go statewide, but

- What does Ohio mean by “going to scale?” (e.g., In every county? Or are there other factors to consider?)
- What will it take to have statewide replications of alternative response in every county that produce increasingly effective outcomes for years to come?
- Can Ohio go to scale?
 - Are policy-practice feedback loops currently in place in pilot counties?
 - What form do they take?
 - How can policy-practice feedback loops be established in each county and statewide?
 - What processes are in place to ensure “lessons learned” are shared?

There are numerous scalability challenges. This long and winding road requires *aligned* changes at many levels. The infrastructure costs to build the road are not understood or accepted. Not all implementation strategies are “scalable” (e.g., all frontline practitioners go to a single State location for training).

In thinking about scalability and innovation, deliberation must occur to determine what is required, recommended, and optional. It is essential to create a “roadmap” to determine who (e.g., State, pilot counties, and technical assistance provider) will do what. Is there “slack in the system” to deal with heavy startup costs?

Competence needs to be developed and sustained — selection, training, coaching, and fidelity measures all help change and support new practitioner behavior and skill. Organizations and systems must change: Data systems need to be used to make decisions; facilitative administrative practices and systems interventions create hospitable environments; and policy enables new practice, and this practice will inform policy.

Scaling up requires establishing implementation capacity. The environment is in motion and, thus, the work is never done. Improvement cycles are critical, and the *right* leadership and leadership strategies are needed for the issues at hand. According to the National Implementation Research Network, implementation occurs in stages and is an ongoing process. It takes 2 to 4 years to “complete” implementation. Full implementation is reached when at

³⁰ Adapted from the NIRN presentation to the Ohio Leadership Council on December 7, 2009.

least 50% of the currently employed practitioners simultaneously perform their new functions acceptably (APSAC Advisor. Volume 19, Numbers 1 & 2, Winter/Spring).

Congratulations, Ohio! May you continue to embrace the journey of alternative response implementation with the zeal and fortitude you have demonstrated thus far. The children and families of Ohio are counting on you.

