



# Collaboration, Innovation, & Best Practices:

*Lessons and Advice  
from Leaders in Child Welfare*

**CO-EDITORS**

**Christine James-Brown**

*Child Welfare League of America*

**Julie Springwater**

*New England Association of  
Child Welfare Commissioners and Directors*



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their appreciation to Joette Katz, whose ideas served  
as an initial impetus for this essay collection.*

## **Foreword:**

### **Communicating the Vision**

**A**s a former state child welfare director, I know that there is nothing more important than a clear vision that is shared among key players in the child welfare system. It is not enough for the child protection agency to declare a vision that other critical stakeholders cannot identify with and use to drive their work with children and families. It is also not enough to put that vision statement into a nice frame on the wall for all to see. It must be supported by policies and practices that reflect that vision in every interaction with children and families, every day. Our vision represents who and what we are as a system—and when, if we ask children and families to describe their experience with us, the words they choose do not comport with our stated vision, we still have lots of work to do.

Now, more than ever, our children and families deserve a vision that is solidly rooted in strengthening the protective capacities of families and preventing the initial occurrence of child maltreatment. This stands in stark contrast to a traditional view of child welfare that is reactive, mobilizing interventions after children have been harmed, and remedial, trying to repair trauma rather than trying to prevent it. In order to bring a new vision to life, it is necessary to change our expectations of the broad child welfare system and to be inclusive of those entities that affect the lives of children and families, particularly the legal and judicial system. That means being willing to cede absolute control and to share responsibility for strengthening lives and supporting communities.

It is also more important than ever to listen to and act on the voices of children, youth, and parents who have experienced the child welfare system's successes and failures firsthand. Without the benefit of their wisdom and guidance, we are seriously disadvantaged in our effort to help them grow and thrive.

I challenge each state child welfare director to be brave and bold in what you expect from and put into your child welfare system. I challenge you to think not of tweaking programs that are not achieving the best outcomes for children and families, but of reimagining what we can do collectively to chart a new course for child welfare in our country. And once you have that shared vision, I challenge you to stick with it, even when things go wrong—as they inevitably will—rather than retreating into the safety of practices that do not serve children and families well, and often harm them.

**Jerry Milner**

*Associate Commissioner, Children's Bureau*

*Acting Commissioner, Administration on Children, Youth and Families*

## **Introduction: Creating Space to Talk with Peers**

Two of the most critical, complicated, and underappreciated jobs are commissioner or director of a public child welfare department or system. Commissioners and directors live from day to day, and night to night, with the thought of whether or not every child under their care will be safe and if they will leave their care better than when they arrived. There is no special school, course, or book that prepares one for the job of commissioner or director, and people arrive in these positions from a variety of backgrounds and experiences.

The Child Welfare League of America (CWLA) and the New England Association of Child Welfare Commissioners and Directors (NEACWCD) are organizations whose members value learning from those in similar situations. NEACWCD was created in 1984 by commissioners and directors in New England who recognized the importance of having the opportunity to talk with peers about the common challenges and responsibilities that come with leadership roles, irrespective of administrations or organizational size. CWLA was founded in 1920 by a group of public and private organizations from across the country to, in part, facilitate peer-to-peer learning and increased understanding of the common goal that the public and private sectors have: better outcomes for children and families.

During our time with CWLA and NEACWCD, we have observed the commitment and dedication that people bring to their jobs. We also have seen the connection that is sparked when they are with their peers—with others who understand the complex nature of their jobs and the weighty responsibilities of their staff members. Peer-to-peer discussions about which data collection system provides the best information, how to motivate staff members, how to work with the media, or how to deal with experiences of secondary trauma seem to be healing and motivating.



CWLA and NEACWCD, as well as foundations like Casey Family Programs, the Annie E. Casey Foundation, and others make these types of opportunities for sharing possible, but they never seem to be plentiful enough.

The purpose of asking a group of retired and active commissioners and directors to write about their experiences is to provide a different type of opportunity for networking and peer-to-peer learning. Who better to talk about how to take on these important roles than people who have been in their positions for a considerable amount of time? We tried to identify people who could write from a variety of perspectives and who have faced a variety of challenges. This is our initial group of storytellers; we are working with other leaders to participate in the future, as well. Once we have a critical mass of stories, we will produce a hard copy book—but in the meantime, we will share this publication electronically with all of the current U.S. commissioners and directors.

We welcome your comments and suggestions.

**Christine James-Brown**

*President and CEO, Child Welfare League of America*

**Julie Springwater**

*Executive Director, New England Association of Child Welfare Commissioners and Directors*

# Recognizing Challenges, Working Collaboratively

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*David Sanders*

*Executive Vice President of Systems Improvement,  
Casey Family Programs*

I have had the incredible fortune of leading two large urban child welfare agencies. The role of a child welfare director, particularly in a large city, is both one of—if not the most—important government responsibilities and the most difficult public sector job. The safety of our citizens is the most fundamental government responsibility, and the child welfare director is the lead government official who ensures the safety of children who are vulnerable.

I was surprised when this opinion also was expressed by successful business leader and philanthropist Eli Broad during my tenure in Los Angeles. He told an audience of business leaders that he had always been of the opinion that the superintendent of the Los Angeles Unified School District had the most difficult job in the city of Los Angeles. However, as he became more familiar with child welfare, he revised that opinion and stated that the most difficult job was the director of the Los Angeles County Department of Children and Family Services.

There are numerous challenges to running a child welfare agency, particularly in an urban setting. First and foremost is the public's perception of the agency and its work. Communities most impacted by the child protection agency's work sometimes, if not often, view the agency as threatening, bureaucratic, uncaring, and even worse, set up to destroy families and communities. The general public often knows too little about the agency's work. The views of the public are often shaped by the occurrence of a tragedy and the considerable attention it receives. That view is sometimes, if not often, negative, and many in the public either ignore the agency or view the agency as incompetent.

This is exacerbated by two important factors.

First is the fact that as a field, we have not done the necessary work of identifying agency success. We are clear when a failure occurs. However, we have not put together a set of measures that, if achieved, would be consensus measures of success. The result is that neither we nor the public consistently point to and celebrate excellence in child protection agency performance.

Second, both the agency and the director often operate in isolation. This is in spite of the fact that child safety is both a multi-agency and community responsibility. The agency is often saddled with so many responsibilities that it is unable to fulfill its fundamental responsibility of ensuring child safety. By trying to do too much, the agency is often caught in a cycle of overwork and continual crises and is unable to successfully engage others to ensure that child safety is truly a community responsibility.

It is imperative that child welfare agency directors work with the community to define success and to engage the broader community in working collectively to ensure child safety. Successful organizations in any field focus their efforts, identify important measures to gauge success, and continually measure and improve strategies and tactics necessary to achieve their goals. Successful child welfare agencies identify measures of success and work with the community to achieve their goals.

The challenges can be daunting and seem overwhelming. However, success is achievable. The turning point is when the public believes that the agency cares as much about children as they do, and that the agency is fulfilling its public obligation to keep children safe.

# Practice Innovations are an Ethical Imperative for Leaders

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*Vicky Kelly*

*Former Director, Delaware Division of Family Services*

This is a story about how we transformed a fear-driven system to promote practice innovation—the journey that brought me to that opportunity also shaped how I approached it.

My first encounter with child welfare came in 1978, when started my first MSW field placement at the Office of Human Development in New Orleans, Louisiana. The 1970s were the height of what came to be known as “foster care drift,” as evidenced by the stacks of files awaiting me in my cubicle of cases that had no documented contact for months, even years. After some brief shadowing of a colleague, I joined the field as the prototypical naïve 22-year-old, hoping to do some good.

I could have never dreamed that 34 years later, I would be running a state child welfare system in another part of the country. Indeed, the road between these two positions was long and circuitous, taking me on pathways through child welfare and child mental health in both public and private agencies in Louisiana, Maryland, Pennsylvania, and eventually Delaware. In retrospect, I see how these varied experiences offered some valuable preparation and even pushed me, albeit somewhat unwittingly, toward an eventual leadership role.

Late in my career, I was the clinical director for a multi-service community agency that worked closely with the public child welfare agency. This position provided a valuable platform to advocate for children and families. My outspoken support and, at times, critique of the public child-serving systems seemed a necessary and predictable part of this phase of my career. The unpredictable part was that I would end up recruited into the new administration of Delaware Governor Jack Markell. I first served

for a year as the Deputy Director of the Division of Prevention and Behavioral Health before being recruited to assume the leadership role of the state's child welfare agency.

For almost five years, between 2011 and 2015, I was honored and humbled to serve as the Director of the Division of Family Services (DFS) for the State of Delaware, a state-administered system with five regions. Although it is a small state, Delaware is a microcosm of the country, with all the urban problems of an older city, suburban sprawl, large rural areas, and a diverse population of immigrants. I was humbled to assume this role, especially when I realized that so many of the agency's leaders, both in the central office and the regions, had dedicated more than 30 years to the agency. They were welcoming yet cautious as they oriented me. I was immediately struck by how many staff hesitantly asked about my vision. My genuine response was, "Shouldn't that be something we figure out together?" Their responses ranged from vague smiles to caution. This was my introduction to a common phenomenon in the field—"initiative or reform fatigue," if not more basically a symptom of a chronically disempowered workforce.

The first few weeks were spent visiting the regional offices, listening to staff and stakeholders, and accompanying workers on visits. Clients were only told I was new and in training. I accompanied a seasoned worker on visits and witnessed her masterfully de-escalate arguments between family members and engage parents in developing collaborative service plans. On the ride back to the office, I told her how impressed I was by her skill and compassion. She shrugged off the praise and responded by saying, "you all should probably just look to hire paralegals." I was stunned and confused by her response, as few paralegals I had ever known had the clinical skills she had demonstrated. She responded, sadly, "most of what we do now is try to implement court orders. There is so little ability to do casework anymore." Several other workers lamented that it seemed the system thought it "could prosecute away the problem of child maltreatment." These experiences shaped so much of how I came to understand the challenges and opportunities ahead.

Since it had been almost 20 years since I had worked directly in a public child welfare agency, I was stunned to see the proliferation of

federal and state laws and their corresponding regulations. The voluminous agency Policy Manual was so overwhelming that there was also a lengthy User's Guide. There was abundant information on "what to do or not do," yet almost nothing on how any of that should be done. Consequently, our Statewide Automated Child Welfare Information System (SACWIS) focused on capturing compliance with tasks, yet offered little of depth in understanding the unique circumstances and needs of our clients. Briefings on child welfare data were confusing and overwhelming. The reams of data did not help us understand where we stood as a state, much less offer a purposeful way to improve outcomes.

After about a month of my due diligence assessment, I met with our Statewide Leadership Team, which included Program Administrators from the Central Office as well as leadership from the regional offices. I shared my initial assessment of the strengths, challenges, and opportunities. I wanted to work with them to build a collaborative vision for our path forward. While I did not know all that might entail, it seemed clear that our collective efforts needed to align with the understanding that the real expertise in child welfare existed in our agency. It seemed to me that this fundamental recognition largely had been eroded, likely due to the significantly expanded legal and other public accountability structures that had grown dramatically in recent years. This intention clearly resonated with the group, sparking the first glimmer of hope of a partnership for practice innovation.

The contextual issues facing any innovation effort were significant, varied, and complex. For the purposes of this article, one has the most far-reaching impact. In 1997, following a highly publicized death of a 4-year-old child who had history with the agency, the Child Protection Accountability Commission (CPAC) was created by state statute. This body includes a range of public entities as well as citizen representatives and was envisioned to build effective cross-system partnerships to protect children. The result was successful in creating strong interdisciplinary (e.g., law enforcement, legal, and child protective services [CPS]) policies and practices for forensic investigations—considered best practice in cases with the most serious safety issues. And yet, as is

true nationally, the overwhelming majority of cases referred to the agency were for neglect, not for serious safety issues. Where significant state efforts had developed best practices for cases involving critical safety issues, there was no corresponding effort to bring other best practices appropriate for the majority of the cases. In 2001, CPAC's statutory authority had been broadened further to focus on the well-being of children in CPS, yet opportunities to align practice with research on well-being for the majority of cases still never happened. Instead, practice innovations not in strict alignment with the legalistic forensic approach were easily dismissed with dire warnings of the risk of the next child death. The name of the child who tragically died in 1997 was still used as a kind of sword of Damocles with anyone who dared raise the specter of other approaches.

The creation of CPAC, however well-intended, was always tied to a child death and, whether implied or stated, the continuing narrative about DFS had been one of an inadequate and broken, if not dysfunctional, agency that required intensive external oversight. The pernicious impact on DFS was significant. In a fear-driven environment, heavily regulated through both statutes and very public accountability, agency staff were intensely, anxiously compliance-focused. This environment did not promote either effective client engagement or practice innovation. Neither was this a good environment for achieving outcomes for children. As expected, Delaware did well on national safety measures, but had the fifth-highest rate in the country of youth aging out of care without permanency! Telling the story of this unconscionable failure to address children's well-being became an urgent call to action to the whole system.

Public agencies have statutory duties that require commitment to stewardship of public funds and, more importantly, public trust. Compliance and accountability are necessary tools to assure that stewardship is achieved. Our field has not always adequately lived up to that stewardship, for a host of reasons that are beyond the scope of this article. When the noble, urgent goal of protecting all children from all harm proves unattainable, the default often is to the belief that total control of

the process of service delivery must hold the answer. However, total control is unattainable in a complex, dynamic system of an agency. Adherence to that misguided belief can have profound, unintended consequences of de-skilling and discouraging the workforce. Workers are critical first responders, not only to child victims of maltreatment, but also to families who are vulnerable, desperate, and often the victims of generational economic insecurity, violence, substance abuse, and other social challenges. Workers choose to do this difficult work out of a desire to make a difference in people's lives. Under-resourced agencies operating in fragmented and limited social service systems cannot realistically achieve the aspirations of CAPTA that national policy should strengthen families to prevent child maltreatment, provide support to prevent unnecessary removals, and promote appropriate reunification. It is not just the chronic exposure to trauma, but also the effects of "emotional labor"<sup>1</sup> and "moral injury,"<sup>2</sup> which are the psychic costs of trying to make a difference in the face of insurmountable constraints that profoundly interfere with the intent so intrinsic to workers' motivation.

Child welfare agencies face an enduring conundrum to balance compliance with effective practice addressing the complex, ever-changing circumstances of families who are vulnerable. However, struggling to try to achieve some balance versus acquiescing to an imposed state of rigid fear-based compliance is critical to promoting quality in services, retention of staff, and the achievement of well-being outcomes for clients. Our intentions to promote practice innovation began to coalesce as an ethical imperative.

How does a traumatized agency do this? We needed to create a greater sense of safety and shared meaning while beginning to empower staff to make the changes they could. We needed to do this in a way that recognized that reciprocity is the essential ingredient in human relationships. So, instead of *doing to*, we needed to model *doing with* staff. We could

<sup>1</sup>Emotional labor occurs when employees must suppress their emotions in the performance of their jobs. See Hochschild (1983).

<sup>2</sup>Moral injury occurs when one perpetrates, witnesses, or fails to prevent acts that violate their moral values. See Dresher et. al. (2011).



not expect staff to do with families what we would not do with them. Typical reform efforts are imposed from the top down, but this does not engage and empower staff. Instead, we focused on becoming more of a learning organization—not a defensive agency.

We first needed to change the narrative about the agency. A broad assessment by the Annie E. Casey Foundation helped contextualize our data to tell a more complete story of our strengths and our challenges. We drew on lessons from other high-risk fields like medicine and the airline industry about “complex failure,”<sup>3</sup> stressing the need for accountability without blame and broadening the lens to acknowledge and learn from the chain of events that impact the worker in the field. Internally, we stressed that to reclaim our expertise meant we needed to be grounded in research on best practices. We invited national experts to provide overviews of various best-practice approaches. We included many stakeholders in these meetings, through an intentional, albeit it unnerving, effort at being more transparent. This was framed around our shared responsibility for outcomes and was also an intentional plan to develop new external champions. We developed an Entry Cohort Longitudinal Database to help us better track changes in outcomes versus the existing aggregated data sets.

One of the many opportunities that made charting a different direction possible, was the support and expertise that was offered by many consultants. Governor Markel had engaged the Annie E. Casey Foundation, which led to our long-term involvement with their Child Welfare Strategy Group. Additionally, we partnered with Casey Family Programs, the National Resource Center on In-Home Services, and the Children’s Research Center. These partnerships lent critical credibility to this effort.

One of the early pivotal events was a statewide Permanency Summit, involving more than 400 stakeholders, primarily sponsored by Casey Family Programs. We used data to tell a more complete story of our strengths and opportunities. We framed permanency not just as an

<sup>3</sup> Cohen, R. (2000). *How Complex Systems Fail*. Chicago: University of Chicago Cognitive Technologies Laboratories.

aspirational goal at the end of child welfare services, but as the centerpiece of well-being for all children. Using the framework of safely “staying home—going home—finding home,” we offered workshops by national experts providing overviews of various models and strategies. While no onetime event can change a culture, this was the beginning of involving stakeholders in the shared process of planning practice innovations and changing the prevailing narrative.

We encouraged different regions and units to “try on” various strategies, building on local interest and early adopters, who became internal champions. We created workgroups for each approach that included staff from all levels and across the state. Given high caseloads/workloads, we were stunned to see that each workgroup was over-subscribed and had waiting lists of staff eager to participate. As these workgroups convinced their colleagues of the value of these approaches, the overall reform initiative took shape. We branded the initiative as “Outcomes Matter” and created a one-page map showing how all the components fit together to improve outcomes. The byline became “enhancing practice and transforming lives,” the latter referring to both clients and staff.

Below are highlights of a few of the approaches we adopted:

**Hotline.** From 2008 to 2011, the reports to the hotline had doubled due to many factors from the recession to the passage of a new state law, effectively making everyone a mandated reporter of child abuse and neglect. The screening tool used at the hotline had been in place since the late 1980s. Consequently, one of the first priorities was to implement a new, evidence-informed tool. The Structured Decision-Making (SDM)<sup>TM</sup> screening tool was selected. The tool had to be fitted to the definitions in Delaware statutes. Then there was an involved process of developing consensus around these definitions, including examples to help guide staff. This was a daunting undertaking, but the workgroup became so impressed with the improved validity and reliability of the decisions it supported that they successfully advocated for the adoption of additional SDM<sup>TM</sup> tools across investigation and ongoing services. Staff felt better equipped to articulate their reasoning, which helped feel more confident when challenged by system partners.

***Differential Response/FAIR.*** CPS caseloads were high and continuing to rise. With record state deficits due to the recession, neither the governor nor the legislature wanted to increase the number of state employees given both the short- and long-term financial liabilities that would create. Instead, we seized this opportunity to explore contracting out some subset of cases as a pilot Differential Response initiative. There had been state statutory authority for this since 1997, but never the political will to implement! Different types of cases were identified as the potential focus: low risk, domestic violence, infants who were drug-exposed, and teens referred for parent-child conflict type issues. Over a six-month period, this workgroup met monthly to hear from external experts in the respective areas and discuss possible approaches. After this lengthy and involved process, the workgroup voted for a pilot focused on teens. The Governor included funds to contract for this service in his annual budget request. A local provider successfully bid on the RFP and a public-private partnership was launched including a RED Team at the hotline to make joint decisions about which cases would be referred to the program. The program adopted a tiered response of evidence-informed and -based models. A ROI analysis showed this approach paid for itself within less than two years and garnered \$250,000 in additional savings.<sup>4</sup>

***Practice Model.*** As the interest in SDM™ tools grew, so did the awareness of the need to enhance the skills of staff who came with different levels of preparation. Safety Organized Practice (SOP)™ offered skills and tools in effectively engaging families, utilizing critical thinking and decision support tools, and developing more comprehensive safety plans, which enhanced the professionalism of our workforce.

***TDM.*** Probably the most significant approach was the move toward teaming around critical decisions. Teaming helped deepen engagement with families to create more comprehensive safety plans and mitigate fear for individual workers by creating shared decisions. Considered

<sup>4</sup> Annie E. Casey Foundation. (2016). *Crisis and Opportunity in Delaware's Child Welfare System: A Case Study*. Baltimore, MD: Author.

Removal Team Decision Making (TDM) was implemented when there was a risk of removal or within 48 hours after an emergency removal.

***A Few Early Outcomes.*** From 2011 to 2015, there was a 45% reduction in foster care entries, while the federal safety measures remained better than the national average and stable. In the Differential Response Program for teens, 91% were safely able to remain in their families. Feedback from families and workers was overwhelmingly positive.

## **Lessons Learned**

Much of the reform done in child welfare systems is “top down,” which is understandable from traditional compliance perspectives. Our experience of attempting more of a “bottom up” approach, unnerving at times as it was, helped us take a trauma-informed approach to the level of the system. We focused on safety for clients and staff, collectively worked to make meaning of what was happening and why we were trying new things, and empowered staff to invest in approaches that resonated with their intentions of service and improved their professional competencies. Instead of struggling to enforce compliance, we unleashed tremendous pent-up demand for creativity in and recommitment to the work at the front-line levels of the agency. That is the best hope that living systems can have for flexibility and adaptability<sup>5</sup> and the most constructive reactions to inevitable challenges and fear. My hope is that these experiences will continue to support staff through the challenging work of child welfare, so that they can indeed achieve the outcomes that matter.

<sup>5</sup> Wheatley, M.J. (2006). *Leadership and the New Science: Discovering order in a chaotic world*. San Francisco: Berrett-Koehler Publishers.

# **You Can Go Home Again:**

## **My Child Welfare Leadership Story**

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*Allison Blake*

*Former Commissioner,  
New Jersey Department of Children and Families, May 2010-2019*

As I finalize this essay, our country is mourning the death of George H. W. Bush, the 41st president of the United States. One of the more endearing stories being shared was his practice of writing notes to people—perhaps most importantly the note he left for his successor, Bill Clinton, offering advice and goodwill. As a country, we have come to learn the value and impact this simple gesture had on Clinton. It is a practice that has been repeated by subsequent presidents. Reading these essays from my colleagues, I now imagine this collection, while less intimate, could serve a similar purpose.

Cognizant that it is unlikely anything can truly prepare you for a public child welfare leadership role, I share my story in the hope that it provides some insight for the next generation of leaders. From the outset I want to emphasize that you cannot spend every day of your tenure worried about being fired due to a critical incident. This is your time, your opportunity. Make sure you spend it focused on improving the well-being of the children and families of your state, and the well-being of the staff who protect those children and families every day.

My child welfare commissioner story is one of a homecoming of sorts. I worked for 18 years at the New Jersey Division of Youth and Family Services (DYFS) in a variety of direct service and administrative positions. My latter years were spent with the agency's chief counsel, who was working with the state attorney general's office to fend off a class action lawsuit brought by Children's Rights Inc. (CRI). Essentially, Children's Rights was suing the state over the safety of children in foster care. When

I left DYFS to pursue other career goals in 2004, the state had just settled the case and entered a multi-year reform plan that was to be supervised by the federal court.

In the ensuing years, New Jersey made significant strides in its child welfare reform. When I was appointed as commissioner in May 2010, it was a pivotal time for DCF; New Jersey was beginning to garner national attention for its practice change, and the state's new governor was interested in meeting the remaining requirements of the decree and seeking an exit from federal court oversight. From my perspective, I was an unlikely choice for a cabinet position with the first Republican governor to be elected in a blue state like New Jersey in almost a decade. However, the newly elected governor's initial candidate for commissioner of the recently created Department of Children and Families struggled to get confirmed and the nomination was ultimately withdrawn. At that point, the governor's team was looking for a subject matter expert to lead the department regardless of political affiliation. Although I was from a different political party than the newly elected governor, I was nominated for the position.

When appointed in May 2010, I was the fourth commissioner to lead the department in four years—not necessarily a predictor for success. The department had grown considerably since being created by the legislature in July 2006, but in many respects, it was still all about the lawsuit. Some staff referred to it as “department of DYFS.”

As I began to build a team and we began to establish priorities, it became apparent that significant change had been accomplished across the department and real innovation was underway, both in child abuse prevention and children's mental health. But the only thing being communicated publicly was from the federal monitor overseeing the child welfare consent decree. That message was one of steady progress, but many years of court oversight still were anticipated.

We decided to engage in a long-term strategic planning process that would involve staff and stakeholders at all levels and help us to establish priorities for the entire department beyond the child welfare consent decree. As part of that commitment, we also determined the need to

develop a concurrent communications strategy that would allow us to define our own narrative and help tell the story of our good work, both internally and externally.

Over the course of several months, with the assistance of a consulting firm, we developed a three-year strategic plan that reflected the priorities of the entire department and its stakeholders. This was an exciting if not labor-intensive process, but it helped us to accomplish many of our objectives. Beyond the obvious, we created a team of about 30 staff from all levels of the department—some of whom I had never met before. This team became our champions for the strategic plan. But more importantly, we simultaneously engaged in a team-building/leadership development process that would strengthen our team for the duration of my tenure. Through this process we learned to trust each other and to rely on each other's expertise to achieve our goals. My belief has always been that the members of the leadership team of an organization need to reflect different skills and points of view from the leader herself. They need to feel empowered to provide input, even when it differs from the opinions of the commissioner or director. I think of the leadership team as a kaleidoscope.

Once our strategic plan was finalized, we identified a champion—a.k.a. project manager—who also managed our implementation plan. This was a critical step, as frequently in organizations, once the strategic plan is developed, it gets put on a shelf to collect dust. We made a commitment to revisit our progress implementing our strategies on a regular basis and to communicate what we found as we attempted to “track and adjust.”

This process served the department well as it created a focal point for all staff. We slowly began to move away from measuring our value through biannual reports from the federal monitor to a place where we were becoming a learning organization. We were able to share a variety of data points and other qualitative information about our work. The plan also became a tool we used to explain decisions regarding resource allocations to staff and stakeholders. It provided common language for our large department to use for grant applications and conference presentations.

Although the work of some of our divisions differed, there was a common mission guiding our work as well as a set of values that we all committed to.

This work and our communications strategy around this work also created opportunities for us to share information with staff at multiple levels throughout the department. Child welfare agencies are very busy places, often besieged by negative media and crises. Although we experienced our fair share of crises, we also began to develop a sense of pride in our work and in our accomplishments. We refused to allow the consent decree to be the story. We learned how to talk about the value added from our practice, programs, and our partnerships in the community.

One important aspect of our strategic plan was our commitment to organizational and leadership development. We wanted the department to be a career choice for staff at all levels, and we wanted to create opportunities for them to develop their skills beyond their normal job functions. The consent decree had established requirements for an annual number of training hours for frontline child welfare staff, but we knew we needed to create more advanced professional development opportunities for adult learners. We worked with several state and national partners to establish a managing by data program, a leadership fellows' program, and a specialized certificate in Violence Against Women and Children. These required year-long commitments from the staff involved, and ultimately became factors as staff sought promotions within the department. In fact, more than half the staff who completed these programs were promoted within DCF.

Staying with our commitment to organizational development and becoming a learning organization, we entered a long-term lease for a training site that became the Professional Center at DCF. The PC, as it was known, was a place staff from all parts of DCF gathered not only for professional development, but for internal and external meetings with stakeholders and community partners. I maintained an office there, and there was shared space for other members of the leadership team as well. I took as many opportunities as possible to work from that location—even if it was only part of a day. As the leader of the agency, it



is vital that staff can interact with you on a regular basis. They need to have a sense of who you are and see evidence that you are interested in who they are. The PC was an essential part of my strategy to develop and sustain those connections. The value of the PC as a gathering place was another critical aspect of our culture change efforts. Government agencies can be very large, and staff can be separated by significant geography. Having a central meeting place served to counteract the impacts of that separation and helped people get to know each other as they had many more opportunities to spend time together. In fact, we celebrated the department's tenth anniversary at the PC in July 2016. This was an incredibly proud day for all members of the New Jersey DCF family.

Celebrating your success without losing sight of your history is an important part of any child welfare agency's culture. If the leadership team does not purposely develop mechanisms to communicate the good work done every day, then the focus will be on day-to-day crises. I found that on any given day, I received letters, emails, and phone calls complimenting our staff's work. There were amazing stories of how families were helped, how public/private partnerships were forged, and how the community was experiencing our culture change. We wanted to be careful not to appear boastful, and we understood every positive comment could not be posted on the website. Therefore, we worked with our IT department to add a section to our intranet called the KUDOS board. It was a shared space that allowed me to post comments from emails and attach letters from families and community partners. Despite my busy schedule, I did review every one of those letters and posted them myself. It was important for me to be able to internalize this feedback. It kept me grounded, helped me keep perspective during the more difficult times, and gave me the energy to keep moving forward.

Although you can plan for many things when working in a government agency, no one could properly have planned or anticipated what was needed to prepare for and respond to Superstorm Sandy. This massive storm made landfall along the entire coast of New Jersey on October 29, 2012. In many respects, it changed the focus of our work at

DCF for years to come. With little advance knowledge or appreciation for the magnitude of the damage this storm would do to New Jersey, my team at DCF began to prepare for the worst. Our initial and long-term response was almost flawless, and served the people of our state well. I will always attribute that success to the team building we had already been engaged in prior to the storm making landfall. I will always be proud of the men and women of the New Jersey DCF, who selflessly responded to the state police headquarters and emergency shelters across the state to assure the well-being of New Jersey residents. These same professionals demonstrated amazing resilience as they balanced their normal work with the need to participate in mitigation meetings, learn about purchasing and installing generators, arrange for service providers to receive gas cards for the state gas pumps, and assure thousands of foster and adoptive parents across the state had power and/or were in a safe place as the state struggled to restore power and ultimately a new normal for its residents.

When people ask me about the child welfare reform and what I would point to as the strongest evidence of its success, I think my answer surprises them. During the worst natural disaster to strike the state, the New Jersey child welfare system's child abuse hotline never lost power, continued to answer calls, and became the call center for all other services and supports necessary for families and community partners. The system that had been under siege just a few years earlier was suddenly the "go-to" contact for those in crisis. That accomplishment belongs to the staff and leadership of the DCF Division of Child Protection and Permanency, before, during, and after the storm. For me, the measure of an organization's success is not how it performs on point-in-time measures, but how it responds to real life situations while continuing normal operations. So, my answer to the question has never been to point to consent decree requirements or federal performance measure; rather, it is to point to an organization that had matured to a place where it was able to fulfill its mission, even under the worst of circumstances.

Another opportunity for future leaders to consider as they develop and implement their strategies concerns open and transparent communication,

in good times and in bad. I think it is fair to say that as the leader of the public child welfare agency, you can never please all people all the time. That's leadership. However, as a public servant, you should strive to be as transparent as possible. In a field often driven by crisis, it is easy to hide behind federal or state confidentiality laws. The reality in public child welfare is that often, the crisis is exacerbated by both internal and external stakeholders' *lack* of knowledge about what happened or didn't happen. By establishing protocols for how you will communicate with your executive—whether that is a governor or mayor—when a crisis occurs, and how you will communicate with the media and with the public, you will develop a rhythm that will guide you through the event. You will also gain the trust and confidence of your stakeholders as they will be able to anticipate what to expect in the way of communication when something does go wrong. In my experience, the more forthright you are, the more confident staff will also be in their ability to continue to do their jobs and make the right decisions during a time of intense scrutiny.

I would be remiss if I did not offer any advice regarding consent decrees given that my entire tenure was spent in one. It is no surprise that class action litigation continues to be viewed as a successful tool to bring much needed funding to the public child welfare system across our country. The consent decree in New Jersey not only brought in significant new state dollars, but also allowed the state to reduce caseloads to manageable levels and maintain a supervisor-worker ratio that set the stage for real supervision. But while much good comes from the infusion of additional funding and positions, there is an untended consequence, as well: There is a stigma attached to these consent decrees. The battle over these lawsuits is often fought in the media, and while the people controlling the purse strings are policy-makers and elected officials, it is the frontline staff who suffer from the negative media campaigns. Policy-makers are not portrayed as incompetent or uncaring in these media stories, but the child welfare caseworkers are—every day. I am sorry to say that I have heard colleagues say, “That system deserved to be sued.” And I have thought to myself, “Do you mean that you believe

the child welfare administrator and their staff are intentionally not meeting all the federal measures or not completing visits or investigations in a timely manner?” In my 30-plus years in child welfare, I have never met a child welfare administrator who was not trying to do the right thing. I have said to colleagues who are quick to criticize that they should walk in that individual’s shoes before they make judgments about the internal operations of a public child welfare agency. Unfortunately, the majority of critics have never had the responsibility of running a public agency, and many more have never worked a day in child protective services.

From my perspective, it is important to recognize that there are several good examples of states who are engaged currently in some innovative, consistent system reform work outside the confines of a consent decree. This is evidence to me that it can be done. So, if you find yourself facing a lawsuit or in a discussion with your executive about settling one of these lawsuits, I would urge you to first assess why your agency is in this position and what it would truly take to improve practice. Negotiate that with the governor, mayor, legislature, or others before you agree to settle, because once you enter one of these consent decrees, it is nearly impossible to exit.

Lastly, if you do settle, make sure you are present and participating in the development of the agreement. Make sure the state is not only represented by competent counsel but that you also have a data expert on your team to help determine the performance measures to which you are agreeing. You do not want to make the mistake of committing to meeting a benchmark that your system can never achieve. Additionally, the agreement should be flexible enough to allow for modifications as indicated. There should be agreement to revisit measures and expectations as the reform takes hold and all parties develop an understanding of what is working or not, and why. It is advisable that you establish a mechanism during the negotiation phase that allows for changes to the agreement based on what you are learning and accomplishing.

As I come to end of my essay, I want to make this point clear: Don’t get discouraged. True system change takes a long time and is reliant on

many complex variables. Be realistic about your goals and the time-frames you establish to achieve them. Do not be overly ambitious. Be flexible and open to compromise and change. Things happen every day in these systems that we could never anticipate or plan for. If you want to be successful, you must be willing to change course when indicated. Be humble. You will need help in this job. Don't hesitate to ask for it. Create opportunities for staff, colleagues, and friends to provide feedback. Be honest. If you don't know the answer to a question, just admit that—then do your research and get back to that person. Follow through on that assurance. Enjoy yourself. This is the best job you will ever have. Never again will you have an opportunity to impact the lives of so many.

# **The Philadelphia Story:**

## **Demanding and Creating the Political Will and Executive Support Necessary to Transform a Failing Child Welfare System**

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*Anne Marie Ambrose*

*Commissioner, Philadelphia Department of Human Services, 2008–2014*  
*Managing Director, Casey Family Programs, 2014–present*

In June 2008, the Philadelphia Department of Human Services (DHS) was a national disgrace. The Child Protection Agency was reeling from the horrific death of Danieal Kelly in August 2006. Staff were scared and demoralized, DHS leaders didn't want to lead, the agency had no credibility, and the Commonwealth of Pennsylvania put the agency on a provisional license. The *Philadelphia Inquirer* was doing a series of articles on child fatalities. In the midst of this chaos, the previous administration under Mayor John Street had created a Child Welfare Review Panel (CWRP), which had identified a staggering 37 recommendations necessary to get the agency back on track. And a Community Oversight Board had been appointed to oversee the implementation of those recommendations.

The newly elected mayor, Michael Nutter, had decided that transforming the struggling child welfare was one of his greatest priorities, but was having a difficult time finding a commissioner to oversee the system. The Commissioner for Behavioral Health had been filling in as the “acting child welfare commissioner” for 19 months. At this time, I was working at the Department of Public Welfare (DPW) as the bureau director responsible for Child Welfare and Juvenile Justice. In this role, I oversaw the state agency responsible for supervision of the county agencies in the Commonwealth. To be completely honest, I had no interest in the city's chief child welfare job but I felt compelled to at least consider the position.

I wasn't convinced that this was the right job for me until I spoke to the mayor during the interview process. Despite the fact that there were at least seven people in the room interviewing me, it really became just a conversation between me and the mayor. I did not know him before the interview. I did, however, know of his reputation as a strong and smart city councilman, and I was impressed with his focus on good government and integrity. I was clear that I didn't really need or want the job, but would only take it if I had his unconditional support. It was clear to me during the interview that he was committed to doing whatever was necessary to do the right thing for the children and families served by DHS. I was convinced that this was the right job for me when he handed me his card and I found the Athenian oath on the back:

*"We will never bring disgrace on this, our city, by any act of dishonesty or cowardice. We will fight for the ideals and sacred things of the city, both alone and with many. We will revere and obey the city's laws, and we will do our best to incite a like reverence and respect in those about us who are prone to annul them or set them at naught. We will strive unceasingly to quicken the public's sense of civic duty. Thus, in all these ways we will transmit this city greater, better, and more beautiful than it was transmitted to us."*

This statement was reflective of the three things that made our partnership so powerful and impactful. It reflected our shared values regarding public service. It also created a shared vision for a better life for the children and families who needed help from DHS. Over time, I came to understand that it also represented his understanding of the relentless urgency and support that would be required to get us to a different place.

During my time at Casey Family Programs, I have had the privilege of working with current child welfare leaders and have developed a leadership academy to help onboard newly appointed leaders. I have come to realize how rare and special the relationship I had with Mayor Nutter was. The sad reality is that most child welfare leaders do not have the

kind of unconditional support that I was fortunate to have working for Mayor Nutter. The lessons I learned could, I hope, be beneficial to other child welfare leaders.

The mayor's dedication—and full political and financial support—was evident soon after I started in my new role in Philadelphia. It was 2008, and the country was roiling from one of the greatest financial crises in modern history. To cope, many leaders in Mayor Nutter's position did what child welfare agencies can least afford: they cut an already strained budget and eliminated programs like prevention. Mayor Nutter did not do that. It was easy for me to make the case that public investments in schools, libraries, and recreation centers kept children safe and supported the well-being of families within their own communities.

Mayor Nutter not only protected our investments in the community, but also invested in the agency itself, creating additional exempt positions for DHS so that I could recruit the right leadership team. In addition, he increased salaries; if I was unable to convince someone to come work in an agency that was in crisis, he used his considerable charm and influence to bring them in. We began to refer to Mayor Nutter as “the Closer” because people wanted to be part of his vision for the city he loved so much. Mayor Nutter also insisted on interviewing each of my deputies himself. He wanted to be sure that they knew what his expectations were. I viewed this as a great endorsement of our work at DHS.

The CWRP identified the fact that DHS had lost its way on prioritizing safety for children who were the most vulnerable. We created a model child fatality and near-fatality review process. Despite these many improvements, we still had children die under our watch. The mayor and I both were committed to a DHS that was accountable and transparent, yet we were prohibited by state law from enforcing both of those efforts. Casey Family Programs helped us identify legislation in other jurisdictions that would allow us to talk about these cases in a way that held us accountable but protected the families involved. We found a legislative sponsor and were successful in changing the confidentiality laws governing what we could say in the event of a child death.



In many systems the circumstances surrounding child deaths would have led to the firing of the child welfare leader. That did not happen under Mayor Nutter. Instead, he would be standing by my side as we detailed the efforts we would take to prevent these tragedies from happening again to another child. Mayor Nutter was very involved in the aftermath of child fatalities that occurred. State law required him to sign off on all of our reports to the DPW, and he would frequently call me to ask about specific facts or recommendations contained in the reports. I presented our new process at his leadership meeting, and he directed all agency leaders to comply with any recommendations related to their work. Several times, he called to see how I was after particularly upsetting child deaths. He also called workers at my request when he knew they were particularly hard hit by a loss.

During my tenure at DHS, we were able to safely reduce the number of children in foster care by about 37%. We also set out to significantly reduce the number of children in congregate care. These changes require the political will to stand up to community partners who rightfully feel threatened by a different business model. We also needed to change the structure of our system to ensure clarity in roles and responsibilities between the public and private agencies. This would require major negotiations with the city unions. Mayor Nutter did not know much about child welfare. He was however, a very intelligent, eager and quick learner. I was able to show him the research we had done over the years to create a new vision for children and families that we called Improving Outcomes for Children. It would allow DHS to partner in a different way with community-based organizations at the neighborhood level to make services more easily accessible to families. We received his unwavering and unconditional support for this vision despite the potential political fallout. The Mayor asked his usual questions and we were given the opportunity to move forward because he believed it was the right thing for children, families, and communities.

In the same way I set out to make DHS a model child welfare system, Mayor Nutter was committed to making Philadelphia the greatest city in

the world. He had a curiosity about who was doing it best and how Philadelphia could learn from other cities. It was this desire that allowed me to move forward on two very important projects that previous administrations had been unable to achieve for over 20 years: We were able to build a new, state-of-the-art juvenile justice services center and a child safety collaborative that co-located police, prosecutors, medical services, and psychiatric services, as well as DHS to conduct forensic interviews of children who had been sexually abused. Both projects had been delayed for far too long, throughout multiple administrations, by political horse trading and misplaced priorities. When I kept getting caught between public property and the budget office, I went to see the mayor. While I was in the room, he called both leaders on the phone, told them I was there, and directed them to get the projects done. He then assigned his chief of staff to oversee the processes until the ribbon-cutting ceremony.

All of these things have led me to be extremely grateful to have had the opportunity to work for such a decent and extraordinary leader. I did not appreciate him as much as I should have during the over six years I was part of his administration. I only know now, after working with countless child welfare leaders in my current position, that Mayor Michael Nutter is a rare yet necessary role model for other executives.

Although the support of your executive is crucial to a child welfare leader's success, the partnership is a two-way street. The mayor had an entire city to run. I only called him when I truly needed his help or support. I was very judicious in my outreach to him. He always made himself accessible, but over time I was able to show that I only came to him about important issues that required his attention. This became a great foundation upon which our relationship was built.

I would encourage all child welfare leaders to understand the importance of the relationship they have with their executive. They should "negotiate up" for access and support. Communication will be key to a successful partnership. Shared values around what they want for children, leading to a vision for the agency, will be critical in getting the political will to execute priorities. Child welfare leaders often

take positions that are identified as the most difficult and thankless government jobs. They need to continue to advocate for the support necessary to carry out their work and protect the citizens who are the most vulnerable.

# **Fixing Child Welfare**

## **Means not Letting Tragedies Become Catastrophes**

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*Joette Katz*

*Former Commissioner, Connecticut Department of Children and Families  
January 2011–2019*

Each year in America, approximately 1,500 children die from abuse or neglect in a family touched by a child welfare agency. No jurisdictions avoid these tragedies. They are disturbing and stubborn facts of American life. When they occur, bad press, political reactions, and fired commissioners are the predictable response. Elected officials promise to “fix the system” by selecting new child welfare leaders, but the approximately 1,500 child deaths still occur annually, and they still occur everywhere—including in the places that brought in new leaders to “fix the system.” It is a painful cycle that repeats, despite all the efforts, the agony, and the press and political reactions.

So child welfare commissioners do not survive very long; estimates are that the average commissioner’s tenure is less than two years. The reactive cycle does not allow for a longer stay, and therefore child welfare agencies are unable to accomplish reforms and improve outcomes. Seemingly daily headlines across the country describe child welfare agencies as “failed,” “beleaguered,” “embattled,” or some other term denoting disaster. That is the sadly predictable result of child deaths, leadership changes, staff instability, and a general perception of crisis, chaos, and overwhelming responsibilities.

The scope of responsibility is immense. On any day, Connecticut’s Department of Children and Families serves approximately 36,000 children and 15,000 families. Social workers are conducting 2,550 investigations and 1,850 family assessments. In 2017, the 24-hour Careline

received 108,679 calls, of which 54,165 were reports of suspected child abuse or neglect.

In Connecticut, I was asked by Governor Dannel P. Malloy to serve as the Commissioner of the Department starting in January 2011. I stepped down from a long-held seat on the Connecticut Supreme Court, knowing of the many challenges, and was determined not to allow the Department to be driven by the crisis-and-response cycle that causes so much damage nationwide.

I started talking to experts, stakeholders, advocates, and families to hear what they said needed to be done. The national experts, such as the Annie E. Casey Foundation and affiliated Casey Family Programs, were very clear. Child welfare in America, including Connecticut:

- was too big and had too many children in care;
- had too many children in institutional settings because not enough relative and kinship homes were being utilized; and
- did a poor job building upon and tapping into the strengths of their families and other natural supports—the best resources children have.

Stakeholders, including private service providers, educational, medical, and legal professionals, as well as families, advocates, and policy-makers, all agreed. Connecticut's child welfare system—which extends beyond the Department to include schools, hospitals, clinical settings, law enforcement and the courts—needed to be smaller, more supportive of families, less institutional, and less adversarial.

## **Changing the Organizational Culture**

I soon learned that although many staff shared these goals, they did not feel they could pursue them and remain safe in their jobs. They had seen repeated examples of commissioners being vilified and staff being blamed for tragedies. When in doubt—and there always is doubt when

predicting human behavior—and when feeling vulnerable, staff felt it was safer to remove children. That had to be addressed. We needed more courage and less fear. With the right tools, staff needed to feel empowered to make decisions that, although often risky, were founded upon sound social work practice.

I traveled the state introducing myself and my vision to staff. I drew upon my years on the Supreme Court explaining what approach I took when looking at a trial judge's rulings and whether the judge had abused his/her discretion. I explained how if the judge took evidence, found facts, reviewed all pertinent law, and ruled on an issue differently than I would have, I would not conclude that the judge had abused his/her discretion. Rather, that, judge had acted properly. That would be the lens through which I would evaluate their work. Words are, however, merely precatory; concrete steps were in order. We did not have the luxury of making this a science experiment; it would be more like simultaneously building an aircraft and learning to fly it.

We looked to our mission—not merely our statutory mandate—but what we saw as our goals. We developed cross-cutting themes representing a new organizational culture:

1. implementing strength-based family policy, practice, and programs;
2. applying the neuroscience of early childhood and adolescent development;
3. expanding trauma-informed practice and culture;
4. addressing racial inequities in all areas of practice;
5. building new community and agency partnerships;
6. improving leadership, management, supervision and accountability; and
7. becoming a learning organization.

From these principles, we built wide-ranging reforms. We stressed that removing children is traumatic and damaging and that staff should only remove when failing to do so exposes children to serious harm. We built an infrastructure that would allow staff to more fully and effectively work with families to craft and implement their own solutions to keep children safe and still connected firmly to family. Following are the infrastructure we established, the challenges, and the positive results.

## **Changing our Relationship with Families**

Upon my arrival, we launched a “Strengthening Families Practice Model,” instituting a fundamental shift in how we perceived and treated families. Instead of seeing the families as the problem, the new practice model views families as strengths to be developed into solutions. By listening and treating them with respect, the Department can help families build on those strengths and connect them to community partners for needed help. The core elements of the practice model were all designed to strengthen families and engage them in finding solutions.

A coordinated web of important components was established to build a less institutional, more family-focused, and more strength-based system. These reforms were aimed at improving how we related to and interacted with families. To be successful in enlisting families in actualizing solutions for children, we needed to ensure that the families felt respected, valued, supported, and heard.

## **Announced Visits**

First, we ended the established practice of responding to a maltreatment report by showing up at a family home “unannounced.” Unless the report indicated a child’s safety would be at risk as a result, our staff began to make phone calls to make an appointment for the initial visit. This showed respect and more closely resembled how other professionals behave when they go to a family’s home to provide assistance.

## **Diverting Families who are Lower-Risk to a Non-adversarial Assessment Response Track**

We also implemented a Differential Response System (DRS), enabling us to adjust our response to families based on risk. Ten years before, the Department let lapse this initiative when the agency's leadership feared being blamed for a tragedy. Upon learning of the abandoned effort, I told staff we would fully implement DRS and assured them they would not be "thrown under the bus" if an unforeseeable tragedy occurred. We launched DRS statewide about a year into my tenure.

DRS provides an option that avoids the traditional, adversarial child protection investigation—with its "allegations" and "substantiations for abuse"—and instead works more collaboratively with families who do not present safety factors. Soon, about 40% of reports were diverted to the assessment track. Since 2013, 7,000 to 8,000 families a year have engaged with us to identify strengths that will keep their children safe and to identify needs to be addressed by community service providers. Importantly, 90% of families getting the family assessment response have not received substantiated reports within two years. More than 2,000 families have actively engaged in services from community providers with no additional Department involvement.

## **Kinship Care**

Taking a child from their home is a traumatic and terrifying experience. If the child can instead live with someone familiar, that trauma is reduced substantially. I directed the Department, therefore, to establish a preference for kinship care. There was, however, an obstacle in many instances because licensing required that the prospective caretaker have a "clean" criminal and child protection record. Unfortunately, some relatives do have a record—some because persons of color are disproportionately and unfairly involved in child protection and the criminal justice systems, and others because of behavior in their younger years that they outgrew or challenges they overcame. Accordingly, we established a waiver process to grant exceptions. I reviewed the requests personally, and, when the family



was safe and appropriate, the record did not pose a current concern, and the staff established that this was a good placement, I granted the waivers. Since September 2016, there have been more than 600 waiver requests; nearly all were approved. This approval shows that thoughtful, comprehensive assessments are occurring and that the placements are appropriate. The new priority led to doubling the use of kinship homes: more than two in five children in care now live in the home of a relative or kin.

## **Reducing Group Settings and Supporting Families**

After tragedies in the 1990s led to a large influx of children into care, Connecticut developed a sprawling system of institutional settings to have enough “placements.” That had to change, and so we worked to move the agency culture from one that emphasized “beds” and “placements” to one that sought the right treatment in the family, kinship, or foster home. In January 2011, almost 30% of Connecticut children in care lived in an institution, compared to 12% nationally. In Connecticut, there were 1,426 total children in congregate care, including 200 children age 12 and under and 38 under age 6.

We began a process to drastically reduce the use of group settings for children 12 and under. “Team meetings” were held to move these younger children into family homes. These meetings facilitated cooperation and coordination among family members, natural supports, service providers, and staff. In 18 months, we trimmed the number of children under six living in an institution from 38 to four. Gradually, we widened the team meetings to all age children. The result is a two-thirds reduction in the use of congregate settings. Currently, less than 8% of children in care live in an institution.

## **Moving Resources from Institutions to Homes and Families**

This shift away from institutions meant that resources for services had to follow the child. We reduced group care spending by \$90 million

annually, however we knew re-investing to support families was crucial. It was not easy as Connecticut was facing serious fiscal challenges, but Governor Malloy supported diverting about 80 cents of every dollar saved into community-based and in-home services. Each dollar was precious, so we became more rigid about what we funded.

Supporting “evidence-based” services was imperative for confidence—internally and externally—in our new direction. We expanded services for families struggling with substance use; the opioid epidemic that is gripping the country has similarly impacted Connecticut. Substance use afflicts up to 70% of families involved with child welfare agencies nationwide. We have responded and have seen success in supporting recovery from substance use and keeping families together. We partnered with Yale University to expand treatment called “Family Based Recovery” to 500 additional families whose children are at risk for entering care. Evaluations show reductions in parental stress and depression while improving the parent-child relationship. We worked with the Harvard Kennedy School to find creative ways to fund these services through private investment “social impact bonds.” Similar expansions of substance use treatments were funded by federal grants and other sources.

A bevy of other in-home and community-based mental health, substance use, domestic violence, and housing services were established or expanded. Many of the services deploy clinical staff to the family home to deliver mental health, substance use, and domestic violence treatment and arrange for non-clinical recreational and therapeutic activities that address family needs.

## **Considered Removal Child and Family Team Meetings**

As we became comfortable using the “team meeting” process, we expanded its use. Initially applied to finding family homes for children in institutional settings, we expanded the tool to *prevent* removals or to find a relative or kin. Beginning in February 2013, “considered removal child and family team meetings” were implemented to engage families in

finding safe alternatives to removals. To prevent the trauma of removal, we endeavored to hold the team meetings *before* removal unless the child's safety required immediate removal. The team meeting gathered the family and all its supports to determine how the child can be maintained safely at home, and, if not, then to determine if a relative or kin would be appropriate. This engagement process works. About 80% of meetings take place *prior* to removal; of those, more than 50% result in no removal, and, of those, 50% go with family or kin.

## Fatherhood Engagement

Fathers and paternal relatives are half of a child's family, but in society and in child welfare, fathers and paternal relatives often are overlooked. Ignoring half a child's family is a failure to take advantage of all available resources. We are combating this by raising awareness internally and externally. Every local office is involved. A "fatherhood firewall" was implemented to help ensure that fathers and paternal relatives are engaged early. We no longer close or transfer cases **without documentation of efforts to identify and engage fathers**, and case plans without documentation of father engagement will not be approved.

We are partnering with other executive state agencies as well as the courts and service providers to improve fatherhood work. The Department is expanding fatherhood services through a program to develop skills and supports fathers need to be more fully involved in their children's lives. The Department is awarding grants to six community providers statewide, and an additional provider will focus solely on the father population that is DCF-involved and incarcerated.

## Racial Justice

Nationally, persons of color are disproportionately involved in child protection systems. In Connecticut, children of color constitute 40% of the child population, yet they constitute nearly two-thirds of maltreatment reports, substantiations, children in care, and children in institutional care. This dramatic overrepresentation reflects structural and systemic

racial injustice, and its insidious and harmful presence demands comprehensive solutions.

Accordingly, the Department is on a journey to become a racial justice organization designed to oppose and eliminate racism. We committed ourselves to measuring disparities in reports, investigations, entries into care, entries into institutional settings, and in achieving permanency. We established statewide workgroups to measure unfair treatment and to monitor reforms to address those disparities. As a result, we are increasing African American kinship homes. We are focusing attention on specific decision points that potentially impact children of color at the time of removal and placement.

Because the Department is only one agency of a complex child welfare system, we are meeting with private service providers, government officials, lawyers, judges, mandated reporters, and others to identify other decision points contributing to the problem. Data is shared and implicit bias explored. The learning is applied to our daily work. Efforts to recruit new foster and adoptive parents from communities of color are underway. We also have engaged youth in discussions on racial injustice and their experiences to learn from and gather their ideas for making our communities a fairer place for persons of color.

## **Conclusion: Building New Relationships with Families and Communities**

Reforming child welfare requires action, but it also requires changing underlying thinking. Child welfare agencies are given responsibilities and resources. Child safety and well-being, however, depend on much more than the child welfare agency; they depend on families, schools, medical, legal, educational and other professionals, and the whole informal network of coaches, clergy, neighbors, friends and others. The child welfare agency has a role, and we need to stop thinking that it is uniquely capable of implementing solutions independent of the far larger system.

We have sought to actualize this concept through a public health approach, working with many partners—other state agencies, hospitals, schools, universities, the courts, and law enforcement—to conduct public awareness campaigns to better equip families to care for children. Campaigns to address unsafe sleep infant deaths, shaken baby incidents, infant abandonment, and other significant risks have taken place with many partners.

These public health activities—like our other reforms—coalesce around the principle that we accomplish the greatest good by strengthening families in their unique role with their children. No effective alternative exists, and we need to be candid that this is the reason why child welfare across the nation is caught in an endless cycle of crisis and response. Reacting to tragic events by forcing more children into care is a proven disaster. There is no good argument for continuing the crisis-response cycle as child welfare agencies are all characterized as failures.

Reforming child welfare takes courage, patience, focus, and determination. It's not for the faint of heart, but the rewards are enormous.

# **Support, Humility and Innovation:**

## **What it Takes to Lead a Child Welfare Agency**

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***David A. Hansell***

*Commissioner, New York City Administration for Children's Services*

*March 2017-Present*

**W**e've all gone down different paths that ultimately led us to child welfare work. Before I reflect on my current position, I'd like to share with you how I arrived here.

In December 2016, the head of the New York City Administration for Children's Services, Gladys Carrión, stepped down from her role. Ms. Carrión, a good friend, has been a visionary leader in the world of juvenile justice nationally and in New York, and provided strong leadership at ACS for the first three years of Mayor Bill de Blasio's administration. But New York City experienced two tragic, high-profile child fatalities in late 2016, and in the too often cyclical pattern of child welfare, that can distort and obliterate other accomplishments.

At the time, I was working as a consultant to government agencies across the country in KPMG's Health & Human Services practice. Prior to that, I had served as Acting Assistant Secretary with the U.S. Department of Health and Human Services' Administration for Children and Families, as well as commissioner of the New York State Office of Temporary and Disability Assistance. Though I've had vast experience working in management, I had never run a child welfare organization before and, given the public outcry surrounding ACS after the 2016 fatalities, I knew it would be extremely challenging.

My prior leadership positions taught me due diligence was critical to good decision-making. So, when offered the position, I did a lot of work to make sure it was a challenge I was ready to take on and felt I could handle.

## What Made Me Say Yes

Long before accepting the position, even before Mayor de Blasio offered it to me, I had numerous and lengthy discussions with the Mayor and his senior team that revolved around the need for support. It's no secret that child welfare work is very challenging, and I've always been a firm believer in the need for a strong support system in any major role. But in child welfare, where tragedies (even when rare) are subject to public scrutiny unlike in almost any other sector, support from political leadership isn't just desirable—it's essential.

I knew that if I was going to take on this role, I had to have unwavering support from the chief executive of the city. Second, I had to be certain that the mayor was prepared to devote the resources needed to do child welfare work and do it right. Third, I needed to know that he understood the stresses involved in this work and to feel in my gut that he was ready to stand behind the agency, its frontline staff, and its commissioner—even in the face of public criticism. These factors were critical in order for me to be a successful commissioner.

After getting those reassurances from the mayor, in addition to doing my own soul searching, I felt that becoming commissioner of ACS—and having the opportunity to make a difference and change the lives of children and families—was too important an opportunity to pass up. I have always been a strong believer in public service, and in responding to opportunities and challenges to serve when they are offered. I also thought that in many ways, I had the right set of skills and experiences coming into it; I'd managed large public and non-profit organizations, I knew the New York City provider and political landscape well, and I had worked closely enough with the child welfare system to have a good sense of what was required to meet its mission.

## Taking on Challenges

Before rolling up my sleeves, I made direct contact with anyone and everyone who could offer me perspectives on ACS and the work the agency does; this also allowed me to build a support system for myself

in this new role. I spoke with former commissioners, leaders in the child welfare world, former colleagues in government nationally, and a number of other people in organizations that work in child welfare. I wanted as many perspectives as I could get about the agency, and advice on what people thought would be required of the next commissioner. I took all of that information and tried to factor it through the prism of my own thinking, to put together an approach and a strategic plan for assuming the position.

After this due diligence process, I determined that my initial challenges in the role of commissioner were really threefold.

First of all, I was coming into an agency that was perceived as failing in many ways. I found that this perception was largely unfair—but perception can too easily become reality. The first thing I felt I had to do was to assess for myself the strengths and the weaknesses of the agency. That is why I implemented a three-month, top-to-bottom review to quickly get an assessment of where the agency was strong, where it was weak, where it had challenges, and where I needed to devote resources to make sure that I could represent to the public that ACS was performing its functions well. Fortunately, I was able to enlist some outside assistance in doing that; the nationally recognized child welfare organization Casey Family Programs was very helpful in that regard, and we worked with them on the analysis to make sure that I would get the information I needed. I also brought in a senior consultant, Philip Browning, who recently had retired as the child welfare director in Los Angeles County, the only municipality in the United States that has a child welfare system on the scale of New York City's. He worked with us for my initial months as commissioner, and helped with an assessment of the agency.

I also worked hard to develop positive relationships with the many oversight entities that interact with ACS: the City Council, the City's Department of Investigation, the City Comptroller, the City's Public Advocate, and the State of New York. Before I assumed the role of commissioner, in response to the 2016 fatalities, New York State had directed ACS to work with an independent monitor, Kroll Associates—a recognized expert in organizational risk management—to assess its child



protective and preventive work. In approaching all of those relationships, I felt it was important not to be defensive or antagonistic, but to be transparent in sharing information about ACS's work, and to receive and evaluate input on how it could be improve—all while maintaining final responsibility for the utilization of that input.

The initial evaluation process led to many immediate, aggressive changes. For example, I concluded that the agency had long underinvested in infrastructure like technology and transportation, critical to the delivery of services. Too often, frontline staff lacked the tools to do the work as well as we were demanding. We very quickly established and made clear to senior leadership at ACS that it was *everyone's* job to make sure that child protective workers in the field had the support to be the "first responders" for child safety that we expected them to be.

The second thing that I felt I needed to do, given the battering the agency had taken after several high-profile incidents, was to restore public confidence and the sense that we were performing our critical mission as well as we needed to. That meant that I had to be very visible. I knew I needed to be out talking to the public, talking to the media, talking to elected officials, and talking to oversight agencies, always being transparent and candid about my assessment of strengths and weaknesses and the actions I was taking to enhance ACS's work.

The third priority was to restore morale within the agency. I very quickly realized coming into the position that morale had been pretty badly battered across ACS. Staff felt they'd been under constant criticism by the press—much of it unfair and with almost no balance in discussing the good things the agency was doing or the positive impacts that it was having on the vast majority of families and children we encounter. I felt an urgency about restoring *esprit de corps* and professionalism in the agency, which staff would feel and the public would see. To accomplish this, I spent an enormous amount of time in the field, visiting thousands of frontline staff at our dozens of sites throughout the five boroughs of New York City, to hear their frustrations and discuss what they needed to do their jobs well. I also believed that staff needed to see leadership that was prepared to "walk the walk,"

so I shadowed child protective workers in the field on multiple occasions. I brought back scores of ideas, then used them to generate broad-based reform plans with the core focus to make sure frontline staff have the tools, training, and technology they need to do their incredibly difficult jobs. To be an effective leader, we need to remain accessible, visible, and responsive.

## Advice for You

I have three words of advice for my successor and anyone thinking of becoming the commissioner of a child welfare agency: support, humility and innovation.

**Support.** No one can do a job like this alone. You need a tremendous array of supports, both within and outside your organization, to do the job well, and building those supports requires tremendous communication and openness. You have to be a people person; you have to really enjoy working with and maintaining relationships with a wide cross-section of stakeholders. For instance, our agency is critically dependent on providers and nonprofit providers to do our work; all of our foster care, preventive services, and early care work is done by nonprofit providers under ACS supervision. The relationships we have with these providers are essential, and understanding the needs and challenges of running nonprofit organizations is extremely helpful. I think it's also important to seek out mentors who are willing to help you out, to give advice, and to support you.

**Humility.** Effective managers must have a certain amount of humility about what they think needs to happen next, or what they think is the right direction or approach to management. No one should take a role in a field as complex as child welfare leadership without a vision and core values about how to proceed. Specific action plans should be viewed as hypotheses to be tested rather than steps to be taken blindly. I would also strongly advise anyone in this role to listen to staff at all levels, and to listen to stakeholders on the outside: providers, parents,

young people. I think it's important to have the ability to test your views and challenge your perceptions by listening carefully; not just listening to the loudest voices, but to the voices of the people who are really doing the work on the ground and those who are directly affected by it.

Ultimately, the tenure of a commissioner stands or falls based upon the work that's being done by the frontline staff in an organization. I think it's especially true in a child welfare organization. Making sure that you're listening to them and responding to them, addressing their needs and supporting them is really critical. It's also of course important in any job like this to make sure you understand the political environment in which you're working and to understand the expectations of your leadership.

***Innovation.*** Moving an agency forward requires innovation. Even after completing my initial top-to-bottom review, we've continued to challenge ourselves to think about how we can do a better job of serving children, families, and communities. We're focusing our innovation on five key areas:

- Identifying, scaling, and replicating what works, which means using evidence to guide our programs and policies.
- Moving as far upstream as possible, which requires that we think about the potential to intervene positively in the lives of children and families before they become involved in the child welfare (and juvenile justice) systems.
- Building a child safety ecosystem, which involves leveraging partnerships with other public and private partners to create a broad set of collaborations framed around a public health model of child safety.
- Using data to inform our work by analyzing the richness of information we have to design and test program innovations and achieve better outcomes for children and families.
- Creating an equity-informed culture, in which we are deliberate and intentional about being an organization that sees it

as integral to our mission to address social inequities—among them race, class, gender, and sexual orientation or gender identity.

Among our efforts to achieve these goals at ACS, we have focused more on primary preventive work, thinking about how we can better support not just children and families directly, but also communities, by providing a strong environment for kids to grow up in. With that in mind, we created a new division devoted to primary prevention, our Division of Child and Family Well-Being, the first of its kind in the country. We are also focused on building a safety science culture, an environment in which staff within the agency feel sufficiently safe and supported to have honest conversations about what we need to change in our systems to minimize the possibility of adverse outcomes for children in the future.

Above all else, you cannot do this work unless you fully and strongly believe in it. You must have the passion, dedication and drive to take on the challenge of protecting some of our most vulnerable youth. For me, working as commissioner of a child welfare agency has been an enormously gratifying opportunity to effect change on a very important scale, while giving back to the city I love at the same time.

# Leading Under a Cloud

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***Brenda Donald***

*Director, District of Columbia Child and Family Services Agency*

I don't get it. By most national standards, the District of Columbia Child and Family Services Agency (CFSA) is a high-performing child welfare agency. Over the years, we have reduced the number of children in foster care by 75%, shifting intentionally from an agency focused on *bringing kids into care* to one that helps families *safely care for their own children*. We have been early adapters of research-based innovative practices; we relentlessly manage with data, identifying trends and solving problems proactively; we have professional master's-level social workers with enviably low caseloads; and the list goes on. We often host child welfare colleagues from across the country and even from other parts of the world, and we are proud to showcase our innovative practices and really cool building that houses our own health clinic, among other things. Yet we continue to live under the cloud of a 30-year class action lawsuit. I think I'm feeling the same cognitive dissonance that many of our families feel when they have done everything we asked them to do, and yet we still won't give their kids back.

My cloud's name is LaShawn, and I've never met her. She was four years old in 1989, when the lawsuit was first filed, and the District's child welfare system, which was then buried inside of an umbrella human services agency, was failing on many levels. Caseloads were so high that even the best-intentioned workers were always in crisis mode, training was sorely lacking, and if there were policies and casework standards, they were kept well under wraps. The state of the District's child welfare system was so bad that social workers were among the leading witnesses in the lawsuit. At first, the agency was placed under receivership by the Federal court, detaching it from sister social services agencies, making

the point that social isolation isn't conducive to meaningful change. Little tangible progress was made during the receivership years.

In 2001, the mayor negotiated an exit plan to create a separate Cabinet agency with a host of commitments designed to achieve the 88 required performance measures. Of course, these things take time, and over the years, the District has achieved 71 of the 88 measures, most of which have been sustained for many years. As we get closer to the end, it seems as though we will never reach the goal post, or for football fans, as if we just can't get out of the red zone.

Dozens of child welfare jurisdictions have been faced with class action lawsuits, with only a handful ever exiting successfully. No child welfare agency is perfect, and some are really struggling, but it is debatable whether or not a lawsuit is the best use of resources to change failing systems. That's not the point of this article, however. I am sharing CFSA's story to help other child welfare directors avoid the trap of being lawsuit managers, instead of visionary leaders driving to create world class child welfare agencies. That's what I set out to do when I came back to the DC Child and Family Services Agency in 2012.

At that time, CFSA was under another kind of cloud, the kind that often brings child welfare agencies to their knees: a horrible, high-profile tragedy. While this incident had occurred *five years prior*, it was still the tag line associated with CFSA. The aftermath was sadly predictable, with hotline calls skyrocketing, social workers fleeing the agency, and political and media oversight so stifling that the agency couldn't regain its footing. Two mayors and two directors later, I was asked to come back to lead the agency. (I had previously served as Chief of Staff and then Director from 2001–2005 and then Cabinet Secretary for the Maryland Department of Human Resources, followed by a brief stint as a vice president at the Annie E. Casey Foundation.)

In addition to the inevitable low morale, the agency also suffered from a lack of respect and, more importantly, a lack of an articulated vision. As often happens when a beleaguered agency is under the spotlight, it gets hit with a barrage of advice and guidance about what needs to happen to turn it around. Here again, it reminds me of what we sometimes do to

families: give them an overwhelming list of requirements that may or may not address the original reason they came to our attention, then fail them for not complying.

The perception about CFSA, both internally and externally, was that “it was all over the place.” That left a lot of room for second-guessing and priority setting from external stakeholders, and by default, LaShawn became the guiding force. In my opinion, that’s the tail wagging the dog. Let me be clear: I am keenly aware of my responsibilities as the child welfare director to comply with the lawsuit. The vast majority of the requirements are good practice and entirely appropriate and necessary, including caseload standards, health care requirements, placement and mental health services, and many of the visitation measures. The lawsuit also requires a commitment from the mayor to ensure adequate funding and cross-systems collaboration. Over the years, especially in the early years, the lawsuit was critical to leveraging adequate resources and, yes, to ensure accountability.

But a lawsuit ordered nearly 30 years ago, (even one refined in 2010 as ours was) cannot possibly include the critical elements of a 21st-century, high-performing child welfare agency. We are in a different environment now. Thankfully, the field has changed, and we have evolved from the days when the only way to keep children safe was to remove them from their families and keep them in long-term foster care. We have learned from science about brain development and the impact of trauma. We know that most child maltreatment is due to neglect correlated with poverty, and we understand how much more effective it is to provide upstream prevention services that stabilize families. We know that children do best in family settings and that relatives can and should be supported to care for their kin whenever possible. We no longer keep foster parents and birth parents at arm’s length; instead we facilitate shared parenting because that’s in the best interest of the children. These are the core values underlying good practice, when child welfare leaders lead with value-based agendas, we will eventually satisfy even the most demanding lawsuits.

These lawsuits can weigh heavily on an agency’s psyche. They say to the world that the agency cannot be trusted to manage and monitor

itself without court oversight. Never mind that all child welfare agencies have multiple “overseers,” starting with the Federal government, along with layers of state and local elected and appointed leaders. There are also advocates and other watchdog organizations, the media, and local courts and lawyers. The added layer of a lawsuit under Federal court jurisdiction usually comes with an appointed court monitor and of course, more lawyers.

Managing a lawsuit requires an inordinate amount of time, money and the ability to keep the agency motivated and focused on the bigger picture. It’s also a defensive posture, which is typically not a winning strategy for driving positive, lasting change. It’s also not very inspiring. To break through the clouds, I knew it was important to articulate a bold, big picture vision that everyone could understand and embrace. We call our big picture, values-based framework the Four Pillars, and it provides the guideposts for all of our work:

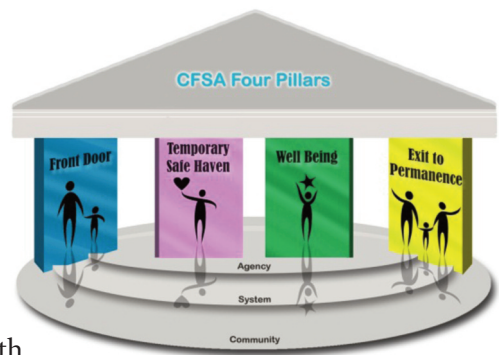
1. Narrowing the Front Door
2. Temporary Safe Haven
3. Well Being
4. Exit to Permanence

The value behind **Narrowing the Front Door** safely is that we

want more children to grow up with their families, so we remove children only

when necessary to keep them safe. To accomplish this, we have invested in a comprehensive community-based prevention system in partnership with community collaboratives based in the neighborhoods where most of our families live. This long-standing partnership was boosted by CFSA’s IV-E waiver program launched in 2013 and will serve as the foundation for our Family First plan.

To ensure that we are making good decisions about whether or not to remove a child, we have implemented a strong decision-making process. We use Structured Decision-Making at our hotline and a RED (Review, Evaluate, Direct) team decision-making process to vet all screen

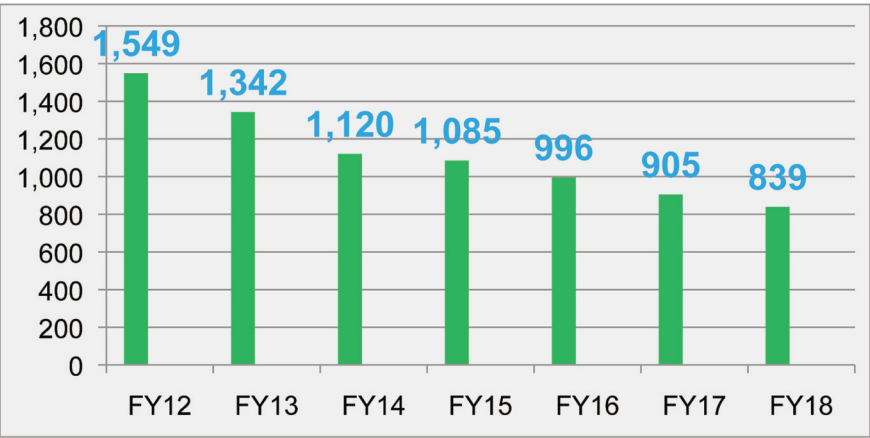




outs and to determine the best pathway for an investigation. These RED teams include a hot line worker, social worker, supervisor, nurse, and attorney in a facilitated process that draws on the family’s history and risk factors.

Our results have been impressive and consistent. Fewer kids are entering foster care, and we are serving more families in-home:

### DC Children in Foster Care



### In-Home Cases



The pillar of **Temporary Safe Haven** is the very definition of foster care, which should not be a life sentence for kids, but a temporary place to keep them safe. Our expectation is that permanency planning begins the day a child enters care. We begin with facilitated Family Team Meetings designed to engage parents and identify relatives and other supports to help them successfully navigate the system. In the last few years, we have introduced shared parenting to form bonds between the birth parents and the foster parents focused on reunification. We are especially proud

of our PEERs (Parent Engagement and Education Resources), whose history of having their children removed and successfully reunified opens the door to meaningful engagement with birth parents.

The **Well Being** pillar stands for every child's right to a nurturing environment that supports healthy growth and development, good physical and mental health, and academic achievement. In 2012, we created a new Well Being Administration to take the lead in coordinating good-care programs, and in 2013 we received a five-year federal grant to build our trauma-informed system.

All children who enter foster care first go to our child-friendly onsite clinic, where they receive a physical exam and trauma and mental health screenings. For many years, we partnered with our mental health agency and its core service providers for our children's mental health needs, but we discovered that the wait for services was weeks or even months, with low quality services and high staff turnover rates. In 2018, we decided to build our own mental health capacity with a small team of mental health therapists providing therapy onsite. This, we believe, will be a game changer, with our kids getting immediate mental health services to reduce trauma and help them on the path toward healing.

Supporting academic achievement is also high on our agenda, and we partnered with the ABA Center on Children and the Law to establish an Education Blueprint covering policy, practice, and academic enrichment. This work is supported by a team of educational specialists who work with our social workers on services and strategies to enhance educational outcomes.

Finally, the **Exit to Permanence** pillar is about ensuring that every child and youth leaves foster care as quickly as possible for a safe, permanent home or life-long connection and that older youth in care master the skills to succeed as adults.

CFSA has always extended foster care to youth up to 21 years old, well before Fostering Connections, and we have invested in a host of services and supports for our older youth, including college and vocational tuition and supports, driver's education, matched savings, home visiting and parenting services for teen parents. Years ago, our older youth

represented the largest cohort of our foster care population, and at our high (or low) point, as many as 300 youth aged out of foster care. Today, as a result of our narrowed front door and improved permanency outcomes, we have 50-60 youth who age out each year. Of course, that's still too many, but we have put significant after care services in place to support these young adults. We fund several specialized housing programs for our young parents and youth with mental health needs, and we also established our own housing subsidies to support working youth or those in college so that no youth who ages out becomes homeless. Recently, we were selected as one of four child welfare agencies in the country to implement the highly regarded YVLifeSet program developed by Youth Villages to ensure even better outcomes for our older youth.

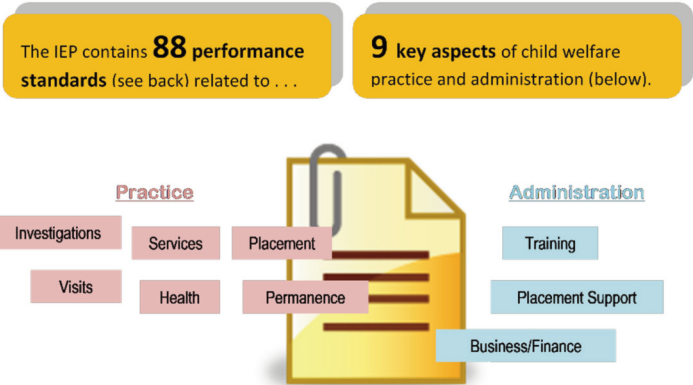
Our Four Pillars framework, which everyone in our agency and all of our stakeholders can describe, provides the over-arching agenda for our work. It is the lens through which we vet priorities, problems and opportunities. The examples above are merely highlights of the strategies and investments we have made to make the DC Child and Family Services Agency a high performing, world class child welfare system.

These strategies were not dictated, or even considered, by the LaShawn lawsuit, most of which is a checklist of accountability measures. The way I look at it, if we had met every LaShawn measure, we would be an *okay but not great* child welfare agency. We're well within striking distance, and the last few stubborn measures are taking longer than anticipated. Perhaps if I had focused narrowly on only ending the lawsuit, we might have hit every mark by now. But I chose to focus on a bigger vision—to get out from under the cloud—and I would make that choice every time.

# LaShawn: The Final Chapter

In 1989, the American Civil Liberties Union (later Children’s Rights, Inc.) filed the *LaShawn A. v. Barry* lawsuit over the quality of services the District of Columbia was providing to abused and neglected children in its care. Today, the District is working to meet all requirements of an Implementation and Exit Plan (IEP) negotiated in December 2010, so that Federal Court will return full control of local child welfare to the city.

## What’s required?



## Why does it matter?

Investigations		<i>Speedy first response protects children from abuse/neglect and prompt services help troubled families. Families stay together whenever possible.</i>
Services		<i>Sufficient array of effective resources helps children and families overcome crises, change circumstances that place children at risk, and heal.</i>
Placement		<i>Less trauma of removal for children placed in safe, stable, quality settings for the shortest possible time.</i>
Visits		<i>Monitor safety, support child and family progress in healing, maintain family connections, and support foster parents</i>
Health		<i>Promote children’s overall healthy growth and development while identifying and taking care of any special needs</i>
Permanence		<i>Expedite adoption for children who can’t return to their birth families</i>
Training		<i>Social workers, supervisors, managers, and foster parents build and maintain the skills and knowledge for optimum performance</i>
Placement Support		<i>License, manage, and maintain an array of placement options that meets the needs of children and youth who can’t be safe at home</i>
Business/Finance		<i>Operate strong quality assurance, information technology, and other administrative functions and maintain adequate staff and funding to meet demand for services and to continue reforms</i>

## Contact Information

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The authors and editors welcome your feedback, suggestions, and ideas for future additions to this essay collection.

**Anne Marie Ambrose**

AAmbrose@casey.org

**Allison Blake**

ablake62@gmail.com

**Brenda Donald**

brenda.donald@dc.gov

**David Hansell**

David.Hansell@acs.nyc.gov

**Christine James-Brown**

cjamesbrown@cwla.org

**Joette Katz**

joettekatz@yahoo.com

**Vicky Kelly**

vkelly528@aol.com

**Jerry Milner**

jerry.milner@acf.hhs.gov

**David Sanders**

sanders@casey.org

**Julie Springwater**

jspringwater@jbcc.harvard.edu