The Journey to Outcomes: CAPP ACTIVITIES AND ACCOMPLISHMENTS

Six years ago, the California Department of Social Services, the counties of Fresno, Santa Clara, Los Angeles, and Humboldt, and countless community and Tribal partners came together as California Partners for Permanency (CAPP) and embarked on a journey over uncharted territory to address institutional bias in child welfare. With funding and technical assistance support through the federal Permanency Innovations Initiative (PII), they focused their joint efforts on developing and implementing a Child and Family Practice Model that would improve permanency outcomes for all children with a focus on African American and American Indian children who were in care the longest and experienced the worst outcomes.

While the CAPP work has been challenging and complex, the early results from the Formative Evaluation conducted by the PII Evaluation Team indicate that CAPP partners are accomplishing their goals. The promising findings point to a statistical relationship between implementation of the Practice Model and improved permanency outcomes for children and families in two CAPP sites.

The road to improving outcomes has been unpaved and at times uneven. However, it is being traveled by brave leaders, dedicated counties, and generous and courageous community and Tribal partners who have provided wisdom and guidance - and a lot of hard work – along the way. Together they:

- Engaged in a comprehensive process of identifying the problem and the target population.
- Developed meaningful community and Tribal partnerships.
- · Co-created the Child and Family Practice Model.
- Developed system supports including teaming structures and local training and coaching approaches.
- · Conducted fidelity assessments.
- Assisted the PII Evaluation Team in many phases of the evaluation.

Partnership is not an event that occurs at one point in Practice Model development or implementation processes.

It is woven throughout the entire fabric of the agency's implementation, capacity-building, evaluation, and system change.

IDENTIFYING THE PROBLEM AND THE TARGET POPULATION

CAPP began with data mining and analysis to identify the children in foster care at greatest risk for disproportionate representation and disparate permanency outcomes. African American and American Indian ethnic groups consistently emerged as the most robust predictor of poor permanency outcomes across the four CAPP jurisdictions.

Engagement by each CAPP site of local community and Tribal partners whose children were at increased risk of disparate outcomes was critical. Together agency and community partners conducted local child welfare system reviews and engaged in meaningful discussions to uncover barriers to improved outcomes for the children and families being served.

CAPP partners came to consensus on the need for the active involvement of community partners to assist the child welfare agency in creating and implementing coordinated practices and aligned policies that:

- Understand, engage, and value the strengths and resources of families and their supportive communities and Tribes.
- Make available and support the use of culturally based and trauma-informed support services to address the specific needs of children and their families.

COMMUNITY AND TRIBAL PARTNERSHIPS

The perspective of local community and Tribal partners were essential in creating a practice model that could address the changes needed at both practice and system-levels to keep children safe and meet the needs of the children and families being served. This required a humble approach by the child welfare agency and its leaders that acknowledged the history of trauma caused by the system and worked to address the resulting individual and collective distrust of the system and its representatives.

The unique contributions of communities and Tribes resulted in cocreated solutions and ensured advocacy for comprehensive and culturally responsive practice, supports, and services. CAPP leaders who have championed and protected the voice of community partners in local CAPP work have discovered an untapped wellspring of wisdom, knowledge, and healing.

As a result, they have:

- Established stronger partnerships and robust local participation.
- · Increased system transparency and accountability.
- Provided community partners with a much clearer and more realistic picture of the child welfare system in action.

The transformative nature of these community partnerships has had a profound impact on both child welfare practice and systems, for the better of all involved.

Culture is dynamic and deeply rooted in the experiences of each family, community, and Tribe over time and across generations.

It is a source of spiritual strength and resiliency - and is rich in supports that help create balance and wellness for the children and families served.

THE CHILD AND FAMILY PRACTICE MODEL

The Practice Model that was inspired and co-created by four California counties and their agency, community, and Tribal partners has formed new pathways for partnering with community to lift up and address institutional racism and trauma in public child welfare.

The Practice Model is a comprehensive and culturally responsive approach to both *practice* and *system* level change. It is designed to improve safety, permanency, and well-being outcomes for *all* children and reduce disparities in outcomes for communities and Tribes whose children are disproportionately represented in the child welfare system.

The model includes:

- A theoretical framework Partnership, Culture, and Humility that provides the foundation for the model.
- · A set of guiding values and principles for all actions.
- A front-line practice approach including core elements and practice behaviors that inform and guide all interactions with children, families, communities, and Tribes.
- A set of leadership behaviors and organization and system capacity standards that ensure the model is demonstrated and supported at all levels of the organization and system.

IMPLEMENTATION SUPPORT AND SUSTAINABILITY

TEAMING STRUCTURE – The implementation-focused teamwork of local executive leadership, implementation teams, and community and Tribal partners has provided the "engine" to drive practice model and system change forward locally.

Successful support for local Practice Model implementation and system change involved a:

- · Designated practice model leadership team.
- · Defined and well-resourced implementation team.

Sites either leveraged an existing team or reorganized staff resources to form a local implementation team with sufficient time dedicated for their implementation team work.

While each site locally created implementation teaming structures, strengthened community partnerships, promoted buy-in for the intervention, and planned for implementation, CAPP coordinated a cross-site teaming structure to support project management and implementation across sites.

TRAINING - Each site developed training tailored to its needs, leveraged existing county training and coaching capacities, and engaged local and regional training partners and community and Tribal partners to assist in developing or delivering training.

COACHING - CAPP developed a cross-site coaching framework to support, practice, and guide the counties in building their coaching plans. Counties often focused local coaching resources on building the capacity of supervisors and managers to coach their own staff. Community partners have also been an important coaching resource, teaming as cultural coaches to support system leaders and practitioners in culturally responsive use of the practice model.

FIDELITY ASSESSMENT

CAPP sites and partners jointly developed a fidelity assessment process to assure the Practice Model was being used as intended in agency interactions with children and families. To assess fidelity, one case was selected for each CAPP-trained, practicing social worker. Fidelity assessors observed and provided independent ratings of the interactions occurring during a team meeting with the family/child and their support network.

EVALUATIONS

The first formative evaluation used data from a single CAPPimplementing county, Fresno, to examine associations between implementation of the Practice Model and expected outputs and proximal outcomes.

In the second formative evaluation, data from all CAPP sites were used to examine permanency outcomes among CAPP-served children. The findings indicate that the Child and Family Practice Model is associated with positive impacts in two counties.



- CAPP-served children in one site exited to permanency within 12 months at a 3 percent higher rate and were placed with a permanent family within 12 months at a 9 percent higher rate than matched children.
- CAPP-served children in another site were placed with a
 permanent family within 12 months at a 3 percent higher
 rate and Hispanic children were placed with a permanent
 family at a 5 percent higher rate than matched children.

These results provide promising early indications that children in foster care who are served by workers trained in the Practice Model will spend fewer months in foster care, compared to those not served by CAPP-trained workers.

While the evaluation provides evidence of CAPP accomplishments in the area of permanency outcomes, there are many benefits that cannot be captured by data. These uncountable accomplishments have brought significant learning and promise to CAPP jurisdictions and their system improvement work. It is:

- The new awareness of how important "leaning in" and listening can be.
- The understanding of how lifting up and encouraging advocacy can change lives and systems.
- The realization that connecting each other to people and networks can make all the difference.
- The recognition that culture can play the most critical role in healing trauma.

But most importantly the road ahead will be traveled with a deep understanding that a humble heart is the first step to genuine engagement with children, families, communities and Tribes.

Success is a journey, not a destination. The doing is often more important than the outcome. - Arthur Ashe



