

DIFFERENTIAL RESPONSE IN SACRAMENTO: AN ASSESSMENT OF THE PILOT  
PROGRAM THROUGH THE EYES OF THE SUPPORT SERVICE PROVIDERS

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Abstract

of

DIFFERENTIAL RESPONSE IN SACRAMENTO: AN ASSESSMENT OF THE PILOT  
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This study looks at the current state of the Differential Response program in Sacramento, a recent reform effort which utilizes the services of local community-based non-profit agencies to provide support to families that have been referred to Child Protective Services due to suspected child abuse or neglect. Through a series of interviews with administrators and direct service providers within these agencies, data was collected that provides insight into the strengths of the program, as well as some of the concerns that are present. These interviews have led to questions regarding the *efficiency*, *equity*, and *effectiveness* of the Differential Response program. Several themes arose from these questions, including concerns regarding the speed of service delivery to families, the appropriateness of the families that are referred to these agencies, and the flow of information between the community partner agencies and Child Protective Services. This study is presented as a mid-course assessment to address the need for corrections to program policies and processes. Recommendations include: promoting communication between community partner agencies and CPS by addressing specific needs through

committees that involve members of all involved organizations, the creation of improved guidelines regarding the flow of information, a streamlining of the assessment process to ensure families are engaged in services as soon as possible, and additional analysis be conducted to determine the criteria used to assess appropriateness of families for the Differential Response Program.

\_\_\_\_\_, Committee Chair  
Cristy Jensen, D.P.A.

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## Chapter 1

### Introduction

Child abuse intervention is a topic of constant debate. Although it is commonly believed that it is society's duty to protect children, there are many conflicting theories regarding what the appropriate methods of intervention are. In order to present the best outcomes for children and families, it is necessary to first understand what services are most appropriate. Unfortunately there is no consensus on the best service options.

The child welfare system in California is burdened by high caseloads for social workers at Child Protective Services (CPS) and a lack of choices regarding the type of support they can provide to families. This can lead to serious repercussions if the families are not provided what they need to reduce their risk of abuse. In 1996 and 1997, two high-profile child deaths in Sacramento, California highlighted the need for more inclusive services to families. Both children's families had been involved with CPS, but had not received the support needed to keep the children out of harm's way.

Since the incidents in the late 1990s, Sacramento CPS has been making strong attempts to improve the services they provide. With the *California Welfare Services Redesign* as a catalyst, the Sacramento Department of Health and Human Services chose to implement a pilot program, known as Differential Response, in two areas of the county to address these issues.

The Differential Response model utilizes the services of local community-based non-profit agencies to provide support to families that have been referred to Child

Protective Services due to suspected child abuse or neglect. These agencies, referred to as community partners, are providing services to families that would traditionally have either become involved in the county child welfare system, which is seen as more of a policing and investigative body than a support system, or received no services at all, perhaps leading to more serious issues later on.

This study looks at the current state of the Differential Response program in Sacramento through the eyes of the community partners that are providing these services. As those who are greatly affected by these changes in policy, these service providers have an insight on the process that is extremely valuable. Through a series of interviews with administrators and direct service providers within these agencies, data was collected that provides insight on the strengths of the program, as well as some of the concerns that are present. Although not a complete assessment of the Differential Response program, this study provides a detailed assessment by the community partner agencies of the current environment in which they are operating. This chapter provides an introduction to Differential Response in Sacramento. It begins with a brief history of events leading to the implementation of the Differential Response program. This is followed by a detailed explanation of the Differential Response model and how it compares to the traditional Child Protective Services model. The chapter concludes with an overview of the private non-profit agencies that have become the community partners in the Differential Response program.

## **History of Differential Response in Sacramento**

In 2000, three years after the second high-profile child death in Sacramento, with a growing feeling across the California that the state was not providing the needed services to protect the welfare of its children, the California State Legislature passed Assembly Bill 1740, which created the Child Welfare Services Stakeholder Group. This group was given the task of researching the current state of Child Welfare in California and make recommendations for improvement of the system by 2003. The stakeholder group consisted of 60 representatives from public and private child welfare organizations. The outcome of this effort was the 2003 report, *CWS Redesign: The Future of California's Child Welfare Services* (Child Welfare Services Stakeholders Group, 2003), which outlined the objectives and expected results from Child Welfare Services. The CWS Redesign report established nine objectives in its restructuring of the child welfare system in California (p.33):

1. partner to prevent child abuse and neglect;
2. act early to preserve and strengthen families;
3. broaden efforts to restore family capacity;
4. strengthen alternatives to rebuild permanent families for children;
5. systematically prepare youth for success in adulthood;
6. affect change through workforce excellence;
7. strengthen inter-agency partnerships at the state and local levels;
8. expand and restructure child welfare financing; and.
9. achieve better outcomes through accountability.

A collaborative was created to put together a program based on the objectives outlined in the Redesign. This collaborative was comprised of members of the Foundation Consortium for California's Children & Youth, The Casey Foundation, and the California Department of Social Services. That group developed the model that is

now known as Differential Response. The California Department of Social Services (CDSS) released its Request for Application to all counties, suggesting that willing counties create pilot programs in their communities and accept available funds for technical assistance. Differential Response was adopted and implemented as a pilot project in 11 California counties, including Sacramento. Over the previous year, Sacramento had been looking at implementing changes to the child welfare program and was therefore an appropriate choice for the state to supply funding to continue these efforts.

Sacramento County Department of Health and Human Services chose to implement Differential Response in targeted areas in the community. The first area served in 2005 was Del Paso Heights. The department decided that there was increased need for supportive services in this area, thus it would be an appropriate location for the pilot project. The county partnered with Mutual Assistance Network of Del Paso Heights to provide the necessary supportive services to families. In 2006, the department implemented a second program in South Sacramento. For this location, the county partnered with La Familia Counseling Center, Inc. for supportive services. Through the use of the services provided by these private, non-profit agencies, Sacramento County Department of Health & Human Services, and specifically Child Protective Services, adhere to the structure of the Differential Response model.

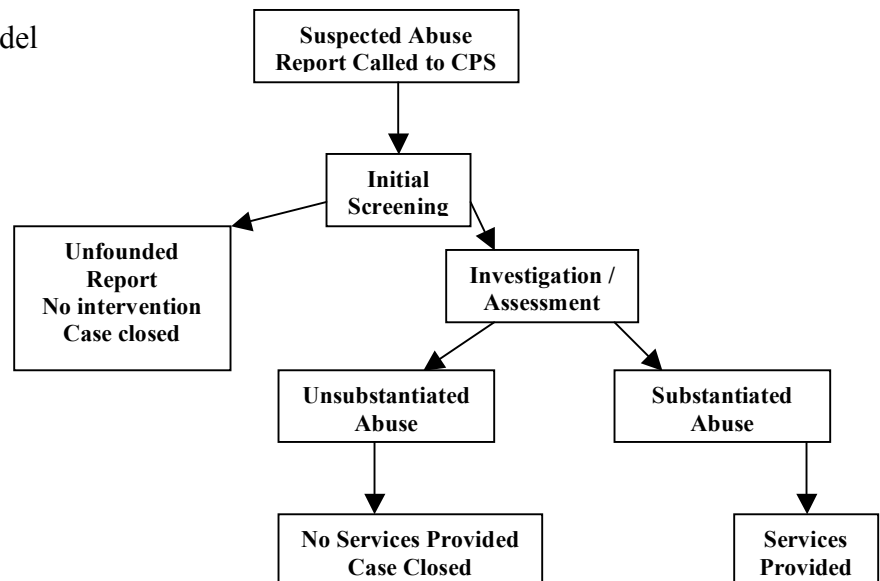
## The Differential Response Model

The Differential Response model is based in a collaborative approach to providing child welfare services to families. Central to this model is the assertion that not every case brought to CPS requires a full investigation, and different situations require different levels of intervention. Therefore, rather than focusing on a full investigation for all families reported to CPS, Differential Response looks at ways to involve and support the family so that children can remain safe within their family structure.

Under the traditional method, Child Protective Services would receive calls from mandated reporters and other community members. The initial calls would be assessed and if warranted, an investigation would occur. The investigation would lead to a decision regarding needed service or safety planning (Figure 1).

**Figure 1**

Traditional CPS Model



Under the traditional method, the social workers assigned to a case are placed primarily in the role of investigator. After the investigation stage, only clear substantiated abuse cases receive services. Those services may be as severe as removing the children from the home, but are only provided to the most serious cases. Therefore many families that are in need of lesser services receive no services at all.

Differential Response is three-way collaborative between local child welfare agencies, community social service providers, and the family. By partnering with local non-profit social service providers, the county agencies can provide support to many families without the involvement of the juvenile justice system. Local agencies provide a variety of supportive services to these families, including mental health, substance abuse evaluation and treatment, domestic violence programs, housing assistance, childcare assistance, and healthcare and employment assistance. These services provide the necessary support to the families outside of the standard assistance provided by CPS.

The Differential Response model provides three paths that can be taken to ensure the appropriate support is given to families (Schene & Oppenheim, 2005). Families are assigned a path based on the risk of harm to the children. These three paths are identified with the following characteristics as presented in Table 1 below. In addition, Figure 2 shows the flow of the process in which the families are assessed and services are provided through the Differential Response model.



**Table 1**

## Three Paths of the Differential Response Model

## Path 1 – Community Response

- Child at low risk of harm
- Family could still benefit from community services
- CPS refers family to community organizations specific to their issues for support

## Path 2 – Child Welfare Services and Partners' Response

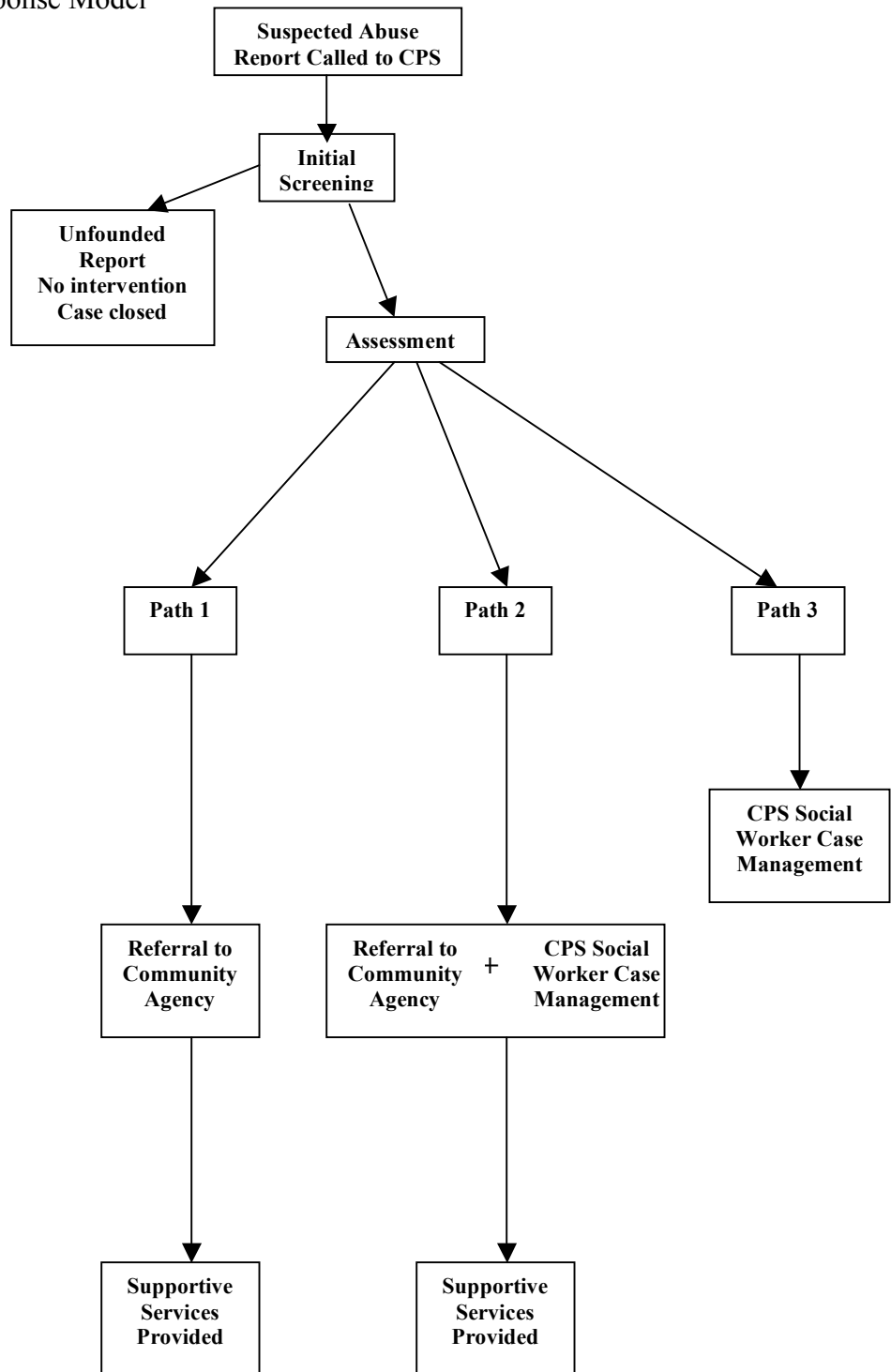
- Child at some risk of harm
- Family willing to work toward addressing issue
- Attempt to remain out of juvenile justice system if possible
- Family works with CPS, other county agencies, community organizations to address issues

## Path 3 – Child Welfare Services High-Priority Response

- Moderate to high risk of continued abuse / neglect
- Intervention must be taken with or without family's approval
- Effort made to engage non-offending parents or protective adults to preserve connection between child and family
- Comprehensive assessments, in-depth case plans and focused services and support leading to genuine family engagement

**Figure 2**

Differential Response Model



## **Sacramento Community Agencies Participating in Differential Response**

### Children's Receiving Home of Sacramento

The Children's Receiving Home of Sacramento (CRH) is the non-profit agency charged with sheltering abused and neglected children in the county. When Child Protective Services assesses that a child's safety is at risk and needs to be removed from the home, CRH provides immediate services to the child. The agency views itself as the "front door of the Child Protective System (Children's Receiving Home, 2006)."

Over 2,000 children per year are served by CRH, which has a maximum occupancy of 98 and is operating at close to capacity at all times. As children enter the program they are given shelter, food, and clothing. During their stay, the children receive counseling and case management, psychological assessments and diagnoses, and attend an on-site school.

The average length of stay for children at CRH is 25 days, but many stay as little as a few hours or as much as several months depending on the individual situation. Some children return to the home from which they were removed, others to family members' homes, or into the foster care system.

As the agency that provides services to children upon removal from the home, CRH is greatly affected by changes to the Child Welfare System. Policy changes at the county and state level can affect the utilization of services for targeted families. Thus, the Children's Receiving Home may feel the changes as it affects the number of and demographics of the children that enter their programs. The leadership and staff of the

CRH are also in a unique position to observe the implementation of Differential Response and the relationships between CPS and the community partner agencies.

#### Mutual Assistance Network of Del Paso Heights

The Mutual Assistance Network of Del Paso Heights (MAN) is a non-profit community based agency. Its purpose is to address issues that affect the lives of the residents of the Del Paso Heights area of Sacramento. The goals of the agency include expanding commercial, financial, and employment opportunities, as well as improving the overall condition of the neighborhood. They are concerned with the physical condition as well as safety and social aspects of the area. Mutual Assistance Network works toward these goals through programs that foster self-help as well as collaborative efforts (Mutual Assistance Network, 2006).

Mutual Assistance Network provides services in the categories of economic development, youth services, and family services. Within the Family Resource Center at the Firehouse Community Center in Del Paso Heights, MAN provides parenting education and support, along with other family oriented services.

The agency is also part of the Family Support Collaborative, providing supportive family services through the Birth and Beyond program, which provides home visitation and support services to families with children up to 6 years of age. Many of the families referred to the Birth and Beyond program come from Child Protective Services. Families that are at-risk for abuse and neglect may be referred to this program for supportive services. The Mutual Assistance Network has been contracted as the service provider for the CPS Differential Response program in Del Paso Heights.

La Familia Counseling Center, Inc./River Oak Center for Children Collaborative

In the south Sacramento area, Differential Response is operated by a collaborative between La Familia Counseling Center, Inc. and River Oak Center for Children. This collaborative was created specifically for the Differential Response program.

La Familia Counseling Center, Inc. is a social service organization providing services to youth and families. The Family Resource Center provides the physical location for much of the services of the agency. Services include mental health, parent support, education and employment counseling, and after-school childcare (La Familia Counseling Center, Inc., 2006).

Mental health services for both children and families are available through La Familia. There is a psychiatrist on site that provides Early Prevention, Screening, Diagnosis and Treatment (EPSDT) services, as well as case managers and therapists to serve families. In addition, the OASIS program (Obtaining and Sustaining Independent Success) provides support services to youth age 14-21. La Familia operates a Birth and Beyond program for South Sacramento, as does the Mutual Assistance Network in the north area. In addition, the agency provides after-school childcare and tutoring for elementary school age children.

River Oak Center for Children, the other member of this collaborative, is a private, non-profit agency that serves families throughout Sacramento County. River Oak operates a Birth & Beyond program for young children and their families as does MAN and La Familia. In addition, River Oak provides residential and outpatient mental health services to youth. The agency also provides childcare and family support services

for their clients. The focus of the agency is to provide comprehensive services for children with emotional and behavioral issues. River Oak Center provides much of the structure for the Differential Response program in South Sacramento (River Oak Center for Children, 2006).

Due to the relatively recent implementation of the Differential Response program in Sacramento, there has been little assessment of its progress. Therefore, the following chapter looks at previous literature in the field of child welfare, and assessments of similar models in other locations. The literature review is followed by an overview of the process taken to complete this research project. The methodology section includes the interview information as well as an explanation of who the participants were. The results of the interviews described in the methodology chapter are provided in chapter 4. This is immediately followed by the final chapter, which explains what the data tells us about the current status of the Differential Response program in Sacramento. In addition, chapter 5 provides some recommendations to address some of the concerns brought forth through the interview process.

## Chapter 2

### Literature Review

There is no shortage of literature addressing how policies affect child abuse intervention. There is, however, a lack of consensus regarding what the issues are, and how they should be addressed. Arguments range from the concept that our society greatly underestimates the scope of the problem (Melton, 2004), to the idea that increased reports of child abuse are not representative of actual increased rates of abuse, but only of increased interest in the subject (Gil, 1971). Without a clear understanding of the issues to be addressed, it is difficult to know what changes in the institutions are needed to heighten success in identifying families in need and the most effective interventions for improvement.

This review of previous literature is presented in two sections. The first addresses issues within the traditional child welfare system including the need for a universal understanding of what constitutes abuse, as well as changes to the system that have been proposed over the last 30 years. Although some questions and concerns were raised nearly three decades ago, many of the issues are still prevalent in today's child welfare system. The second section looks at the implementation of Differential Response and other similar models throughout the country, with specific focus on programs in Minnesota and Missouri. These programs, which have had longer existence, suggest areas of possible successes and failures in the Sacramento program which may help focus some of the research effort.

## **The Traditional Child Welfare System**

There has been extensive literature pointing to the need for changes in the child welfare system. There has not, however, been complete consensus on the problems with the traditional system. It has been suggested that the basis for controversy in the field of child welfare is the struggle between the need to protect children and the inherent rights of parents (Schene, 1998). However, in order to provide appropriate services there needs to be an accepted understanding of what constitutes abuse, and a shared understanding of the complex factors influencing the need for intervention.

Research has indicated that there is very little consensus over a definition of child abuse (Gelles, 1976). California penal code includes the Child Abuse and Neglect Reporting Act (Lockyer, 2005), which defines abuse as, “the willful harming or injuring of a child or the endangering of the person or health of a child.” This definition allows for a variety of interpretations, ranging from verbal aggression to spanking to severe physical violent behavior.

### Definition of Abuse

The understanding of a need for a clear definition of abuse has led to some research regarding the effect of an unclear definition. Gelles (1976) noted that

the outcome of such varied or imprecise definitions is that; 1) incidence rates of abuse and neglect depend on the definition employed; 2) data on incidence and causes of abuse cannot be compared because the compilers of the data do not employ similar definitions of the phenomenon; and 3) interchange between professionals concerned with the problem of child abuse is difficult because professions and professionals so not always agree on what is or is not child abuse (Gelles, 1976).



It is also easy to fall into a trap of lumping different types and levels of abuse into one overreaching category (Gelles, 1976). With many different causes and treatments for different types of abusive situations, too broad a definition can also be a detriment to the children. As time progresses and new strategies to help abused and neglected children are discovered, the lack of this definition becomes increasingly problematic. Knowing what strategy is appropriate for what situation can only occur once the level of behavior is assessed. This is where the clear definition is necessary once again.

Some issue classification has been established and a simplified analysis of the problems regarding possible inappropriate utilization of the child welfare system has been created (Waldfogel, 1998). Waldfogel's framework is broken down into five concerns as illustrated in Table 2 below:

**Table 2**

Concerns Regarding the Current Child Protective System

1. *Overinclusion*: Some families are referred to CPS who should not be.
2. *Capacity*: The number of families referred to the system exceeds the system's ability to respond effectively.
3. *Underinclusion*: Some families who should be referred to CPS are not.
4. *Service Orientation*: The authoritative approach of CPS is not appropriate for many of the families referred to it.
5. *Service Delivery*: Many families do not receive the services they need.

Within this analysis it is stated that families who are inappropriately reported to CPS are exposed to coercive and intrusive investigations. Furthermore, it has been suggested that CPS agencies often emphasize either child rescue by promptly removing children from the home, or family preservation by keeping the child in the home, when

neither is ever appropriate for all families. This analysis suggests that, apart from the definitional issue, there are practices, that when applied universally, do not serve society's or children's best interests.

As suggested under *Service Delivery*, often services are not evenly available across communities, with specific shortages in services to non-English speaking populations. Also, many families have multiple issues to be addressed; yet services are often fragmented and delivered by multiple agencies.

#### Time Frame Restrictions

The availability of services is also hindered by the restrictions put on the time frame for assessment and service delivery. The Adoption and Safe Families Act of 1997 reduced the time the child welfare agency has to quantify improvements to a given family (Dawson & Berry, 2002). This reduction from 18 to 12 months puts unrealistic expectations on the agency to fix the problem in a short time frame. Although it is necessary for prompt action in order to keep children safe and engage the families, there is also a need to allow enough time for the services to be effective. Within this timeline, there are few opportunities to provide additional support services such as psychological counseling. Without the time needed to address all the issues, the child protection agencies must move toward a single model of treatment for all families. Unfortunately, few families can thrive in identical environments. Therefore the system leads to a continued cycle of intervention, possibly leading to removal from the home without necessary supportive services.

### Single Focus on CPS

These concerns can be seen as the result of a system that is entirely focused on one agency alone, Child Protective Services (Schene, 1998). It is unrealistic for one agency, under such tight restrictions, to provide all the necessary services needed to ensure the safety and wellbeing of all children. The multitude of needs for a family often must be addressed by multiple organizations in order for efficient service delivery.

Under the traditional system of child welfare, the social worker's principal obligation is to investigate the case and determine if abuse occurred. Therefore, the general public view child protection as synonymous with reporting and investigation (Melton, 2004). Due to its need to immediately address the families' issues, Child Protective Services is often viewed as adversarial toward its clients, acting as a criminal investigator rather than a support mechanism. This adversarial relationship can lead to a perceived power differential between parents and the child welfare system. Qualitative studies have shown parents believing the child protective agency has more power than the parents, and that it can be used in a way that can be coercive or penalizing (Dumbrill, 2006). In Dumbrill's study, parents described the power of the agency as "absolute," "tyrannical," and "frightening." It was believed by many parents in this study that the child protection agency began services with a preconceived agenda, thus the parents had no control over the outcome. For some parents, it was possible to challenge the method in court, but for many this was not a financial option. Thus parents often felt the need to go along with the process, although they believed it was detrimental to their child's

wellbeing. It was also a common belief that parents rarely were able to win a court case against the agency.

### **Alternatives to the Traditional Child Welfare Model**

Within the current body of literature, there are many suggested ways to improve this traditional system. One ongoing suggestion has been the need to decrease the caseloads for social workers. There is a need for case closures to be equal to the creation of new cases for the caseloads to remain at a steady size (Dawson & Berry, 2002). Unfortunately, once in the child welfare system, most families are not released until the child's 18<sup>th</sup> birthday. Therefore the caseloads continue to grow, usually without an increase of the number of social workers involved. For this reason, there is a need for other organizations to assist in the service delivery to these families. In addition, much of the human and fiscal resources are not spent on prevention, but rather on investigations that can lead to severe disruptions to the family (Melton, 2004).

There is an alternative to the traditional system of child welfare. A growing movement has surfaced suggesting that the most realistic change to improve the system is the increase of support services (Schene, 1998). The need to provide children and families with a multiple services may permit the child to stay with his/her family and still be in a safe environment. Additionally, it has been argued that a community partnership, such as the Differential Response model, where parents, neighbors, and community agencies join with CPS to provide services, may lead to more positive outcomes.

There is an abundance of literature addressing the problems within the child welfare system. There is a need for a clearer definition of abuse. Additionally, there is a

need for further discussion of the alternatives to the traditional child welfare services. There is no consensus of what appropriate changes should be. There are, however, many advocates of the Differential Response and other similar child welfare models.

### Previous Implementation of Differential Response-Type Models

Differential Response and other similar models utilize the resources of community-based non-profit organizations in the area to provide support services to families. California is not alone in its attempt to implement the Differential Response model. Similar programs have been introduced in Minnesota and Missouri under such names as Alternative Response and Family Assessment and Response Demonstration. Assessments of these programs have shown many of the results expected in California. Missouri. The format of the program in Missouri is similar to that of the pilot project in Sacramento. Within the Missouri program, abuse assessments of the families were seen as neither substantiated nor unsubstantiated. Families fit into one of two categories: services needed or services not needed (Loman & Siegel, 2004). Stronger ties to community organizations led to community support of these families, thus removing much of the adversarial relationship between the families and Child Protective Services. Minnesota. Similarly, in Minnesota the Alternative Response program has shown a “non-adversarial, family friendly, and voluntary” atmosphere (Loman & Siegel, 2005). This leads to a higher level of engagement on the part of the families, who had a more positive relationship with the workers. Among the data in this study, it was stated that 68% of families involved in Alternative Response said they were “involved a great deal in the decision that were made about their families and children,” while only 45% of

those in the traditional method felt this way. The study suggested that the engagement of families led to an increase in safety for the children in Alternative Response.

Safety concerns have been one of the arguments for keeping the traditional method of intervention. It has been suggested that “adversarial investigations are necessary to ensure children are protected; that is, that child safety threats are removed or controlled (Loman & Siegel, 2005).” Within the context of the Minnesota study, there was no evidence of decreased safety for those children in the Alternative Response program. It was shown that the same percentage of families showed increased safety in Alternative Response programs and the traditional programs. The difference, however, was that those families in the Alternative Response programs showed a higher degree of safety improvements.

In addition to increased safety, families in the Alternative Response programs stated that they received services more often than those in the traditional programs. These services included food, clothing, furniture, home repairs, counseling, employment services, etc. Therefore, these families were not only given supportive services regarding child abuse issues, but complete family support throughout this process. Workers in the Alternative Response programs stated that they were able to focus on the family as a whole to provide more support and advocacy, including referrals to community partners (Loman & Siegel, 2005).

The study of the Minnesota program suggested that the system has moved toward prevention. This has occurred through the increase of services to families, closer attention to lower-risk families, and an increase in financial services. Furthermore, it was

found that these increases have occurred without an increased financial cost to the system. Therefore, the program appears to be successful for many families within the system (Loman & Siegel, 2005). However, for some families, this new system may still not be sufficient. Some families involve extreme criminal abuse; therefore require immediate intervention well beyond the scope of the Alternative Response or Differential Response programs.

Further analysis of the Minnesota programs showed that the use of the Alternative Response programs allowed for more involved traditional investigations to take place for families of high risk (Loman, 2005). Because of the new screening process through Alternative Response, fewer families were referred for traditional investigation. Therefore, only those in immediate high risk were investigated, thus allowing for more involved, time consuming investigations to take place. This increase in efficiency led to a higher conviction of criminal offenses of child abuse. Staff members who were involved in the investigations reported having a more cooperative relationship with law enforcement, and also felt an effect on their process from the Alternative Response program, as they were more informed about psychological dynamics in their home visits, including increased sensitivity to the families' feelings.

The study of the Minnesota report showed a positive change for children and families in both the Alternative Response programs as well as the traditional method. These findings are similar to those in Missouri, where families were given increased supportive services and were moved away from the typical adversarial relationship between families and Child Protective Services.

## **Literature Review Summary**

The literature reviewed in this chapter suggests many concerns over methods of child protection services. Regarding child welfare overall, there is concern that the lack of a universal definition of abuse makes it difficult to know when a family is appropriate for support services, and what those services should be. In addition, issues were raised regarding the speed of service delivery, with promptness being imperative to family engagement, and longevity of services necessary to be effective.

The traditional child welfare methods are often perceived by families as adversarial toward them, and thus new models have been implemented in some locations. The models used in parts of Missouri and Minnesota, which are similar to Sacramento's Differential Response, have been implemented and data has been collected on their effectiveness. The non-adversarial approach has been seen as a positive change in those areas, with support services more available to families. The literature includes analysis of the issues and the effects on families, but does not provide discussion on organizational issues such as communication between or among agencies. The need for such information is partially satisfied through the research provided in this study.

The literature provided in this chapter has suggested that Sacramento is not alone in their quest to improve the child welfare system. It also suggests that the services needed for these families require the collaboration of both Child Protective Services and local community agencies that can address the specific needs of their communities. Through this collaboration, it appears that families can be provided the support they need.



This study looks at the private community agencies that provide support services to families through the Differential Response program in Sacramento, and their perceptions of the program's process and implementation. The data collected offers a view of how well the program is working for these community agencies at this time, as well as some of the challenges facing the continued implementation and success of these programs.

## Chapter 3

### Methodology

The Differential Response program is in the beginning stages in Sacramento, having begun its initial implementation in late 2005. Therefore it would be difficult to draw conclusions about the program's impact on the community. Due to this fact, it is more important to look at how the program is going thus far. Those who are most knowledgeable are the agencies that are directly involved. Therefore it was appropriate to look at this program through the eyes of the private non-profit community agencies that are providing direct services to the families involved.

This thesis is based in the Action Research method, where the participants of the study are those who are most likely affected by its outcome (Gardner, 1974). This methodology allows for the organization to be assessed from within, rather than as an outside observer. The purpose of such research is to analyze and address issues within the organization, and thus become a catalyst for change.

The research was conducted in the winter and spring of 2007. The researcher and author of this thesis, a graduate student of Public Policy and Administration at California State University, Sacramento, has 16 years of experience and education in child development and social services. Research regarding the Differential Response Model was a likely focus due to its combination of child development and public policy factors.

The overall approach of this project was designed to begin with the selection of organizations that would participate. This was based on knowledge of which private, non-profit agencies provide Differential Response services and/or are affected by its

results. Once those organizations were selected, specific representatives of each were selected. This was a combination of direct service providers and administrative program supervisors.

Five participants were sent questions regarding the current status of the Differential Response program. Responses to these three questions were to be emailed back to the researcher. Once collected, the responses were compiled. Any duplicate responses were removed to create a list of unique statements, each with attached Likert scales to represent the participants' level of agreement and sense of importance for the particular issue.

An in-person interview was to follow with each of the respondents, as well as additional participants that represent these organizations. The interviews would consist of the researcher reading each statement, then asking the respondent to rate their level of agreement to the statement, and the importance of the issue stated. In addition, each would be asked for any additional comments they wished to provide. After the interviews concluded, the data collected would be compiled and analyzed.

### **The Research Process**

Three organizations were selected because of their involvement in the program in Sacramento. The first agency was Children's Receiving Home of Sacramento. They are responsible for immediate foster care services to children upon initial removal from the home. Theoretically this agency would be greatly affected by the changes in outcomes after the move to the Differential Response model. The second organization is the Mutual Assistance network of Del Paso Heights. This community organization is

responsible for supplying the direct services to families that are involved in the Differential Response program in the Del Paso Heights area. The third organization is a collaborative between La Familia Counseling Center Inc. and River Oak Center for Children. This collaborative is responsible for providing the direct services to involved families in the South Sacramento area. Administrators from the organizations were selected from each agency that could provide the most information regarding the Differential Response program. Initially, the participants were pre-selected, but later two of the agencies chose specific administrators based on their professional knowledge of the current status of the program.

After initial contact with the organizations was made, and the specific individuals were chosen, a brief set of questions and a consent form was emailed to the individuals. In the email, participants were asked to respond to the questions in Table 3.

### **Table 3**

#### Initial Questions to Participants

Question 1: Regarding the current state of the Differential Response program in Sacramento County, what aspects are going well?

Question 2: Regarding the current state of the Differential Response program in Sacramento County, what are the areas of concern?

Question 3: What changes are needed to improve the Differential Response program in Sacramento County?

Three participants responded to the initial email questions. The respondents were the Chief Executive Officer of the Children's Receiving Home of Sacramento (CRH), the Clinician/Group Facilitator who is part of a collaborative effort between CRH and Mutual

Assistance Network of Del Paso Heights (MAN), and the Team Leader at MAN. Once received, the responses were compiled into one list of statements. Any duplicate ideas were removed, thus leaving a list of unique statements. Some of the statements were paraphrased for clarity, while others remained as direct quotations from the respondents.

The list of statements used for these interviews is provided in Table 4.

#### **Table 4**

##### Interview Statements

1. Families are more willing to participate in services through Differential Response because they are voluntary.
2. Regarding the time between the initial referral to CPS and the delivery of services:
  - “The process is slowed down by CPS processing time with referrals and the amount of work required from the social workers before they are able to close the case and send the family to community services.”
3. Some families referred for Differential Response may not be appropriate for these services.
  - “Is prevention being achieved, or are services just being provided to clients who would not have abused anyway?”
  - “Sometimes the cases are at the point (where) there is a need for more CPS involvement and follow up...” (Home Visitor program not a substitute for Family Maintenance)
4. Lack of communication between CPS and the community agencies has been an issue.
  - “Appropriate information is not given (to Community Service providers) to adequately address the needs of the family and to ensure home visitor safety while in the home.”
5. There is a need for better communication among service providers to ensure consistency and quality of services.
6. Maintaining the confidentiality of each family’s case creates issues between CPS and the community organizations regarding transfer of information.

7. The team approach (Collaborative meetings with support service providers, Home Visitors and CPS Workers doing home visits together) has led to the providing of more effective services.
8. There is a need for a standardized training curriculum for all home visitors.
9. There is a need for an independent review of the program.

For each of the questions, participants are asked to score on a Likert scale of 1-7 how much they agree with each statement (1=Disagree, 7=Agree). This is followed by a second Likert scale, which asks how important the participant views the issue that is suggested by the statement (1=Not Important, 7=Very Important). This is followed by any comments the participant has regarding each statement.

The following step was to acquire responses to these statements from the initial participants and other individuals involved in the programs. In-person interviews were conducted with the agency representatives described below in Table 5.

In the interview, the participants were asked orally to use the Likert scale for each of the statements. The participants were then asked for any reactions or comments regarding each statement. All this information was recorded by writing down the answers to each of the questions at the time of the interview.

After all the interviews had occurred, the participant responses were analyzed. In addition to the respondents' answers, it data was collected regarding the location where the respondent worked (North or South area) and the position the respondent held in their organization (Administrative or Direct Service). Similarities and differences between

agencies were addressed, as well as themes that appeared. This analysis included addressing the questions within the criteria of *efficiency*, *equity*, and *effectiveness*.

**Table 5**

Interview Participants

Children's Receiving Home of Sacramento

- Chief Executive Officer, who is a licensed clinical social worker, as well as a member of the Child Welfare Services Redesign Steering Committee for Sacramento County.
- Clinician/Group Facilitator, who possesses a Master's Degree in Social Work.

Mutual Assistance Network of Del Paso Heights

- Team Leader, who possesses a Master's Degree in Social Work
- Family Engagement Specialist
- Home Visitor

River Oak Center for Children

- Differential Response Program Manager, who possesses a Master's Degree in Social Work
- Home Visitor

La Familia Counseling Center

- Deputy Director/Program Manager

Differential Response Contracted Specialist:

- Alcohol and Other Drugs Recovery Specialist, who is a Certified Alcohol and Drug Abuse Counselor.

## **The Analytical Framework**

The goal of this thesis is to provide an analysis of the current state of the Differential Response program in Sacramento. For this spotlight assessment to be accomplished, there needs to be some criteria for which to use. This project assesses the program on the basis of *efficiency*, *equity*, and *effectiveness*

### Efficiency

The question of efficiency is based in the assumption that society wants the most “bang for their buck.” If there are multiple ways of performing an identical service, the least costly is always preferable. In the real world, slight changes of inputs could produce very different outputs. Similarly, slight variations in outputs could change the level of efficiency. Efficiency can be addressed by looking at the productivity of the program. It would be seen as more efficient if they are able to produce more outputs with a given amount of inputs. In the case of Differential Response, this could be the number of families served or the number of total services provided to each. The flow of information through the process of a program can also address the question of how efficient it is. Impediments to the information flow can result in a decrease in needed outputs. In addition, the work done by the agency needs to be provided by the appropriate person in the appropriate position. If these do not match, the outputs will be affected.

Policies that focus on efficiency are the result of the struggle between the market system and experts in the field (Munger, 2000). Specifically, experts may believe a certain policy is optimum to address an issue, but it may not be the most efficient choice. The market system suggests choices that are less expensive to society. That struggle



produces policies that are the most efficient. Given this theory, there are specific questions to ask regarding the Differential Response model's implementation.

- Are the services provided within the appropriate amount of time for the families?
- Is the flow of information appropriate to provide the necessary services?
- Are the personnel within the agency in the appropriate positions?

### Equity

Policies may be implemented to move closer to an equitable environment.

Because not all people have the same resources, it is often useful for policies to correct for some inequities. In addition, implemented policies need to be analyzed to ensure that everyone is assisted using the same criteria. The idea behind equity is not to treat everyone the same, but to provide appropriate treatment or services for all.

At first glance, the nature of a pilot program such as Differential Response appears inherently inequitable because it only exists in targeted location for testing purposes. In reality, these areas were chosen by Sacramento County Department of Health and Human Services because of a perceived higher need. This works to the idea that equity can be obtained by providing appropriate services, rather than the same services, to all. Within the areas of the program, however, some questions may be addressed to assess if the program itself fosters equity.

- Does the unequal supply of services to families lead to an issue of equity between families?
- Should all families involved in CPS receive Differential Response services?
- Are the appropriate families chosen for the Differential Response program?

## Effectiveness

The primary question regarding a policy is “Is it effective?” This is not a question that can be answered immediately. Once the policies are enacted, it must be given time to operate before its effectiveness can be evaluated. Eventually, if outcomes change in the way they were intended, the policy may be seen as effective.

A change in the outcome may occur even if preferences stay the same. If the institution itself is altered, the resulting outcome may be different (Munger, 2000). In the Differential Response model, the preference of keeping children safe and providing supportive services has not changed. Instead, the institution itself, the child welfare system, implemented the changes. Looking at the policy decision-making and the outcomes would provide a source of data to determine the program’s effectiveness.

To analyze the effectiveness of this institutional change, some questions should be addressed.

- How and when will we know if it works?

The above questions create the criteria for which to assess the Differential Response program. These questions regarding *efficiency*, *equity*, and *effectiveness* will be used to organize much of the data into the three themes. Many of the comments from the participants can be used to answer these questions.

## Chapter 4

### Results

The data acquired for this study was collected through a series of interviews with staff members of the private non-profit agencies participating in the Differential Response program. The Children's Receiving Home and the Mutual Assistance Network of Del Paso Heights provided the participants for the north area, and River Oaks Center for Children and La Familia Counseling Center, Inc. provided the participants for the south area. In addition, one contracted specialist that serves both areas was interviewed.

In this section, the data is presented for each question. Each respondent's answers are provided, along with the area served (North, South) and their position within the agency (Direct Service, Administration). The chart includes their scoring on the Likert Scale, with the "Agreement Scale" in column "a" and the "Importance Scale" in column "b." After giving their scores on the scale, each participant was asked if they had any additional comments. The participants had no knowledge of the other respondents' comments. The following columns present the comments made by multiple respondents. For each comment, an X is placed next to the respondents who made the comment. The comment is paraphrased for clarity and consistency and listed below the chart. Any other comments made regarding the statement are discussed in the text following each chart.

### Differential Response Interview

1. Families are more willing to participate in services through Differential Response because they are voluntary.

Location	Position	1a	1b	Comment A	Comment B
North	Direct Service	6	7	X	
North	Direct Service	5	7	X	
North	Direct Service	5	6		X
North	Administration	3	4		X
North	Administration	5	6	X	
South	Direct Service	6	7	X	X
South	Administration	6	7	X	
South	Administration	6	6		
North/South	Direct Service	6	7	X	
Average		5.3	6.3		

Comment A: When families have a choice, they are in control of their situation, which increases their engagement.

Comment B: Services are not truly voluntary because the families know that CPS will keep their case open if they do not participate.

For this statement, the responses for both the Agreement Scale and the Importance Scale varied with no correlation between the responses and the location or between the responses and the position. The average score on the Agreement Scale was 5.3, and the average score on the Importance Scale was 6.3. A majority of respondents stated Comment A, showing a high amount of agreement that families are more engaged if they are able to choose the services. Three respondents that varied among the locations and positions made comment B. This comment showed some concern over the reality of the services being truly voluntary. It was suggested that although the families are given a choice to participate or not, the other option for most would be an ongoing CPS case.

Many families “choose” to participate in Differential Response services as a means of avoiding more intense intervention from CPS.

There were several additional comments that were stated by one respondent each, which included the idea that families are more motivated at the beginning of the process because CPS social workers are pushing them to receive services, that the Family Engagement Specialist is helpful to the process of getting families involved, and that prior to the Differential Response program, families received services because they were forced to, and would regress to their old behaviors after the services ended.

2. Regarding the time between the initial referral to CPS and the delivery of services:

“The process is slowed down by CPS processing time with referrals and the amount of work required from the social workers before they are able to close the case and send the family to community services.”

<b>Location</b>	<b>Position</b>	<b>2a</b>	<b>2b</b>	<b>Comment A</b>	<b>Comment B</b>	<b>Comment C</b>
North	Direct Service	4	6	X		
North	Direct Service	6.5	7	X		X
North	Direct Service	6	5		X	
North	Administration	6	7			X
North	Administration	4	6	X		
South	Direct Service	2	4			
South	Administration	5	6	X	X	
South	Administration	6	7	X		
North/ South	Direct Service	n/a	n/a			
Average		4.9	6			

Comment A: The time it takes to begin services affects the amount the family is engaged.

Comment B: More severe cases are referred sooner than minor cases.

Comment C: There is a slow process time between the initial call to CPS and the case getting to the CPS Social Worker, thus lengthening the time the family is ultimately referred to the community partner.

For this statement, the responses for both the Agreement Scale and the Importance Scale varied with no evident relation between the responses and the location or between the responses and the position. The average score for the Agreement Scale was 4.9, and on the Importance Scale was 6. Respondents who stated Comments A and B were varied among location and position as well. A majority of the respondents stated Comment A, suggesting that the amount a family is engaged can be affected by the time it takes to begin services. Two participants in the north area stated Comment C, which was not stated by any participants in the south area. This suggests that the concern about the time between the initial call to CPS and the case getting to the social worker is less prevalent in the south area

Additional comments made regarding this topic included the concern for liability on the part of CPS if families are referred to community partners before they are ready for services. It was also stated that the risk level of the family affected the timeline, such that families that were seen as lower risk were referred sooner, while higher risk families worked with CPS prior to the referral to the community service agency. Some clearer protocols may be needed to ensure that all families are referred support services as soon as possible. It was stated that there had been a large amount of staff turnover in the Differential Response Unit of CPS in the north area and that the new Social Workers are still learning the process. It was also stated that in the south area, CPS social workers in

various departments are involved in the program and have a better understanding of Differential Response. This suggests the importance of consistent staff training to ensure that all service providers are equipped with the same tools.

3. Some families referred for Differential Response may not be appropriate for these services.

- “Is *prevention* being achieved, or are services just being provided to clients who would not have abused anyway?”
- “Sometimes the cases are at the point (where) there is a need for more CPS involvement and follow up...” (Home Visitor program not a substitute for Family Maintenance)

Location	Position	3a	3b	Comment A	Comment B
North	Direct Service	4.0	7.0	X	
North	Direct Service	6.0	7.0		
North	Direct Service	7.0	7.0	X	
North	Administration	7.0	7.0	X	
North	Administration	5.0	5.0		
South	Direct Service	2.0	7.0		X
South	Administration	5.0			
South	Administration	7.0	7.0		
North/South	Direct Service	5.0	7.0		X
Average		5.3	6.8		

Comment A: Home Visitors are BA level and below and cannot be expected to assess the severity of the situation.

Comment B: If a report was made, the family is likely to be in need of services. At least they are receiving some services.

Once again, the responses for both the Agreement Scale and the Importance Scale varied with no correlation between the responses and the location or between the responses and the position. The average score on the Agreement Scale was 5.3, and on

the Importance Scale was 6.8. Of the comments stated by multiple respondents, comment A was stated three times, but only by participants in the north area, suggesting that there is concern regarding the expectations of the Home Visitor staff in that area. Only direct service staff that had experience in the south area stated Comment B, which was an optimistic view that the services could be useful to all families.

Many other comments were made regarding this statement, each stated by one respondent. It was stated that the criteria used to assess families level of risk and needs is important to understand because CPS is hoping to continue to funnel services to community agencies. For one respondent it was believed that because the program is new, both the community partners and CPS are still figuring out how to differentiate situations that are appropriate for Differential Response. It was also stated that as the Home Visitors work with the families, they often learn more about them, thus revealing more serious situations than were originally thought, but that the fact that the families are willing to engage in services is positive.



4. Lack of communication between CPS and the community agencies has been an issue.

- “Appropriate information is not given (to Community Service providers) to adequately address the needs of the family and to ensure home visitor safety while in the home.”

Location	Position	4a	4b	Com. A	Com. B	Com. C	Com. D
North	Direct Service	4	7	X	X	X	
North	Direct Service	4	6				X
North	Direct Service	7	7	X		X	
North	Administration	6	7	X		X	X
North	Administration	5	6	X			
South	Direct Service	1	7		X		
South	Administration	3	6	X			
South	Administration	5	7	X	X		
North/ South	Direct Service	5	5				
Average		4.4	6.4				

Comment A: The entire history is needed before the home visit so the visitor knows what they are coming into and can engage the family.

Comment B: Some CPS Social Workers give all the necessary information and have good communication with the service providers.

Comment C: One family scheduled for a home visit had a member with a Federal weapons charge that the community agency was unaware of. This could have been a safety issue has the Home Visitor been in the home during the raid by Federal agents the morning of the scheduled home visit.

Comment D: There is a definite concern for the safety of the Home Visitors.

For this statement, the responses for both the Agreement Scale and the Importance Scale varied with no correlation between the responses and the location or

between the responses and the position. Those responses, however, presented the widest gap between the agreement scale and the importance scale of any of the questions. The average score on the agreement scale was 4.4, while the average on the importance scale was 6.4. This gap of 2 points on the 0-7 scale suggests that respondents found this issue to be important; regardless of whether or not they believed this was a current issue for their program.

For comments A and B, there was no correlation with the position or the location of the respondent. Comment A was stated by a majority of the respondents, suggesting that there is some agreement of the importance of having the entire family history prior to beginning services. Only those in the north area stated comments C and D. Comment C referred to a specific event, and comment D may have been a reaction to that event, thus explaining why this only arose in the north area.

In addition to the above, there were comments stated by only one respondent each. This included themes such as the concern that too much information may lead to preconceived ideas, and that CPS wants to provide minimal information to avoid influencing the service providers. It was stated that this can be an issue if the information is old or unsubstantiated, because families may be treated differently because of this information. If the information refers to a situation that is no longer occurring, or was untrue, the service providers would subject the family to unnecessary treatment. It was stated that the only way for the community partners to get all the information is to be at the initial joint visit, when CPS interviews the family. On this visit, the Home Visitor or the Family Engagement Specialist accompanies the CPS social worker to the initial visit.

While CPS is interviewing the family, the community partner staff person is privileged to the information that arises. It was also stated that CPS is willing to share their information, but it often is not in written form, and they often are unsure exactly how much information is appropriate to share. It was stated during a later question, however, that the program is currently revising their referral forms to include additional family history information.

If a Home Visitor feels a visit is unsafe, one respondent stated, s/he is able to discuss his/her concerns during the Resource Specialist Team meetings. One respondent stated that there could be issues if the organizational cultures (CPS and community partners) do not merge well, because they may have different attitudes toward sharing information.

5. There is a need for better communication among service providers to ensure consistency and quality of services.

<b>Location</b>	<b>Position</b>	<b>5a</b>	<b>5b</b>	<b>Comment A</b>	<b>Comment B</b>
North	Direct Service	3	7	X	
North	Direct Service	7	7		
North	Direct Service	7	7	X	
North	Administration	5	5	X	X
North	Administration	6	6		
South	Direct Service	1	7		
South	Administration	6.5	7		X
South	Administration	7	7		
North/South	Direct Service	6	7	X	
Average		5.4	6.7		

Comment A: There is good communication with the RST (Resource Specialist Team) specialists.

Comment B: The RST specialists are not always available due to scheduling conflicts with the county.

For this statement, once again there was no relation between the Agreement and Importance scales and the location and position of the respondents. The average score on the Agreement Scale was 5.4, and on the Importance scale the average was 6.7. Only respondents who had experience in the north area stated Comment A, suggesting that the RST specialists are in good communication with other staff. Similarly, Comment B was stated only by administrators, suggesting that the direct service staff may not be involved in such processes as scheduling meetings with specialists.

Other comments made by single participants included a difficulty in getting other service providers involved in the process. It was stated that one roadblock is the necessity of MediCal eligibility to receive some services, and that there is an issue for other agencies to provide services if there is no “billable service” that they can be reimbursed for. Another concern was the need to educate other community service organizations about the Differential Response program because many are unaware of what it truly is. It was also stated that the difficulty working through the bureaucracy leads to disengagement of many families, thus it is important for the agencies to communicate with each other. One comment suggested that agencies with specific focus often find difficulty in looking at the big picture, beyond their own specialty.

Statements 4 and 5 both addressed the issue of communication between involved parties. CPS and the community partners have operated in different environments, and

thus have two different organizational cultures. The responses to these statements suggest that a new culture is developing.

6. Maintaining the confidentiality of each family's case creates issues between CPS and the community organizations regarding transfer of information.

<b>Location</b>	<b>Position</b>	<b>6a</b>	<b>6b</b>	<b>Comment A</b>
North	Direct Service	7	7	
North	Direct Service	6	4	
North	Direct Service	5	4	X
North	Administration	5	6	
North	Administration	5	5	
South	Direct Service	1	7	
South	Administration	1	n/a	X
South	Administration	6	7	
North/South	Direct Service	4	7	
Average		4.4	5.9	

Comment A: In order to share information, a consent form must be signed, usually during the joint visit.

Again, no correlation between the scale answers and the position or location was apparent, nor was there for the one comment made by two of the respondents. There were several other comments regarding the issue of confidentiality. Once again the concern regarding safety arose, as well as the need for the entire history of the family. It was stated that even unsubstantiated allegations should be shared with the community partners, since often the allegations are true even if unproven. Another respondent felt the opposite, stating once again that too much information can lead to preconceived ideas about the family. It was stated that the balance between confidentiality and the need for information was difficult, and that often CPS does not voluntarily give extraneous

information unless specifically asked for it. To alleviate some of these issues, one respondent commented that the organizations have reworked their referral form, allowing space for more detailed information from the CPS worker. In the north area it was stated that the original CPS social workers were more apt to provide information, but since the turnover of staff at CPS, they are less likely to give information. It was stated that for some social workers, confidentiality is the main concern, and for others it is not a concern at all.

7. The team approach (Collaborative meetings with support service providers, Home Visitors and CPS Workers doing home visits together) has led to the providing of more effective services.

<b>Location</b>	<b>Position</b>	<b>7a</b>	<b>7b</b>
North	Direct Service	7	7
North	Direct Service	7	7
North	Direct Service	6	7
North	Administration	7	7
North	Administration	4	6
South	Direct Service	7	7
South	Administration	7	7
South	Administration	7	7
North/South	Direct Service	7	7
Average		6.6	6.9

This statement elicited the highest average scores on both scales, with a 6.6 on agreement and 6.9 on importance. This suggests that all involved parties found the collaborative nature of the program to be beneficial, and all except one agreed strongly with the statement. Responses from this statement provide the greatest consensus of the statements. The comments made regarding this statement included the idea that the multitude of perspectives at the RST meetings is helpful. It was stated, however, that

there has yet to be any clear data that suggests that this process has led to more effective services.

8. There is a need for a standardized training curriculum for all home visitors.

<b>Location</b>	<b>Position</b>	<b>8a</b>	<b>8b</b>
North	Direct Service	7	7
North	Direct Service	7	7
North	Direct Service	7	7
North	Administration	6	7
North	Administration	6	6
South	Direct Service	5	6
South	Administration	7	7
South	Administration	6	6
North/South	Direct Service	7	7
Average		6.4	6.7

All respondents gave high scores for both scales for this statement. The average score for the Agreement Scale was 6.4 and for the Importance Scale was 6.7. Comments to this statement included the need for all Home Visitors to be using the same process. It was stated that currently CPS is moving toward more “Structured Decision Making,” where it would not matter which CPS social worker received a case because the services would always be uniform. There was a statement that there is an attempt to make services more uniform between the north and south areas. In addition, it was stated that all involved parties should have similar training, including social workers and specialists. It was suggested that there is a need for all to understand the philosophy behind Differential Response. Much of the current education, it was stated, has come out of the RST meetings, where different parties can inform each other. This provides some of the knowledge needed regarding the different services.

9. There is a need for an independent review of the program.

<b>Location</b>	<b>Position</b>	<b>9a</b>	<b>9b</b>
North	Direct Service	5	5
North	Direct Service	5	6
North	Direct Service	6	7
North	Administration	7	7
North	Administration	7	7
South	Direct Service	1	1
South	Administration	3	n/a
South	Administration	5	5
North/South	Direct Service	7	7
Average		5.6	5.6

There were mixed responses to this statement, with some agreeing strongly and giving it high importance, and others seeing it as unimportant and unneeded. The average scores of the scales were 5.1 and 5.6, but this rating is difficult to draw conclusions from because they range from 1 to 7 on both.

There were comments regarding the need for the reviewer to be impartial, but would also need to truly understand the direction of Differential Response. It was stated that there is currently a Differential Response Operations Committee, which provides continual oversight and internal review of the program. In addition, there is an attempt to create a closing report for each case to assess how effective the program was for each individual family. It was also stated that one reason for the review is to create usable data to ensure future funding. Since the south area program is new, it was stated that a review would be more appropriate at year two, once the program has had the opportunity to settle in.



## Using the Analytic Framework

It is necessary to address the questions asked regarding *efficiency*, *equity*, and *effectiveness* with regard to the collected data. The respondents provided ample information to speak to the questions raised in Chapter 3.

### Efficiency

- Are the services provided within the appropriate amount of time for the families?

The concern over the speed of service delivery arose throughout the interviews. The majority of participants believed that the case processing time at CPS is too long. Some statements suggested that there is too much time between the initial suspected abuse call to CPS and the time that the case is received by the CPS social worker. Other statements referenced the time for the CPS social worker to complete their initial assessment and send the case to the community partners as being an issue. No matter the stated cause, there were several statements suggesting that as the process duration lengthens, the engagement level of the family decreases. Thus, many respondents advocated for a faster response time between the initial call to CPS and the onset of services.

- Is the flow of information appropriate to provide the necessary services?

Another significant theme throughout the interviews was the flow of information. Several participants advocated that they are in need of the entire family history before beginning services. Concerns over the safety of the Home Visitors arose, specifically in the north area, where incidents had occurred that identified problems. Others believed

that too much information could lead to preconceived ideas about the families, thus altering the services provided.

Some respondents believed that the flow of information was sometimes slowed by the need for confidentiality. Whether truly necessary or not, some respondents reported that some CPS social workers refrained from providing all information in order to protect the families.

There was a high level of agreement that the Resource Specialist Team meetings provided a catalyst for information passing between service providers. Unfortunately, it was also stated that often specialists, specifically Sacramento County staff, are frequently unable to attend due to scheduling issues. This poses another barrier to the flow of information.

- Are the personnel within the agency in the appropriate positions?

One concern arose regarding the personnel of the agency. Since the Home Visitor staff are all Bachelor's Degree level or below, there is a limit to the depth of family assessment they can provide. It was stated that when families are referred to the community partners, CPS has not always provided the amount of assessment needed to begin appropriate services. Therefore the Home Visitors are often put into the role of assessor, deciding what services are appropriate for the family. It was stated that this expectation is too high for the level of expertise of these staff members, and thus should be addressed by the CPS social workers.

### Equity

- Does the unequal supply of services to families lead to an issue of equity between families?

There was some discussion of the need for a standardized training curriculum for all Home Visitors. It was also suggested that the same curriculum be used to train all service providers in the Differential Response program. It is believed that this would allow for all families to receive the same level of services. Although the basis of Differential Response is that of meeting the specific needs of each family it was suggested that a consistent level of training for all staff would be useful. In addition, it was stated that there is a conscious effort within the program to have consistency between the north and south area programs.

It was stated in one interview that CPS is moving toward “Structured Decision-Making” to assess what services are needed for each family. This also goes against the theory of Differential Response, but would allow for all families to be assessed at the same level.

- Are the appropriate families chosen for the Differential Response program?

The theme of appropriateness was apparent throughout many of the interviews. Many respondents felt that some families that were referred to them were not appropriate for the Differential Response services. It was stated that because the program is relatively new, both CPS and the community partners are still trying to figure out which families would benefit from the services. Some believed that this was not an issue, and

that if families are not a perfect match for Differential Response, they would most likely still be receiving services that could be helpful.

### Effectiveness

- How and when will we know if it works?

It was stated during the interviews that it is too early in the implementation of the program to tell if it is working. Although many respondents talked about providing positive services to their clients, it is still unclear what the ongoing effect will be. Most of the respondents agreed that an independent review of the program would be helpful, but some suggested that it might be more relevant at a later time. The program is currently in its formative stages, especially in the south area, and time may be needed before such a review would be useful. Similarly, the development of a universal curriculum for all Home Visitors was suggested. This leads to the assumption that there is an understanding of the appropriate way to provide in-home services. This would be addressed in a review of the program.

The results of this study provide a wealth of information regarding both the structure and process of the program, as well as the feelings held by the service providers. The scores and comments for each of the statements address the answers to the questions regarding *efficiency*, *equity*, and *effectiveness* through the eyes of the respondents.

## Chapter 5

### Conclusion

The purpose of this study was to examine the current status of the Differential Response program in Sacramento County through the eyes of the private non-profit agencies providing direct service to participating families. Staff members of these agencies were interviewed to gain information regarding their experiences and assessments. The data collected from those interviews was compiled and analyzed. This chapter addresses the analysis of these results, and provides some recommendations for correcting the stated concerns.

This study identified the emerging challenge of a new inter-organizational culture evident in the new organizational interactions between CPS and the non-profit service providers working together in the Differential Response Program. As the Program has given new roles and responsibilities to the non-profits, especially in working with lower risk families, questions have surfaced regarding communication processes, use of information, assessment of family need/risk, among others factors, which affect the *efficiency, equity, and effectiveness* of the program. Many of these questions are left unanswered, with participants suggesting that the relatively recent implementation of the Differential Response model is the reason for the initial, somewhat tentative, developing understanding of the program. This developing understanding, whether regarding confidentiality guidelines or the type of family situations that are appropriate for Differential Response, is apparent at all levels of the organizations. The conflicting ideas

regarding how the program should operate give a clear view of this unfinished status and need for developing consensus among the organizations involved.

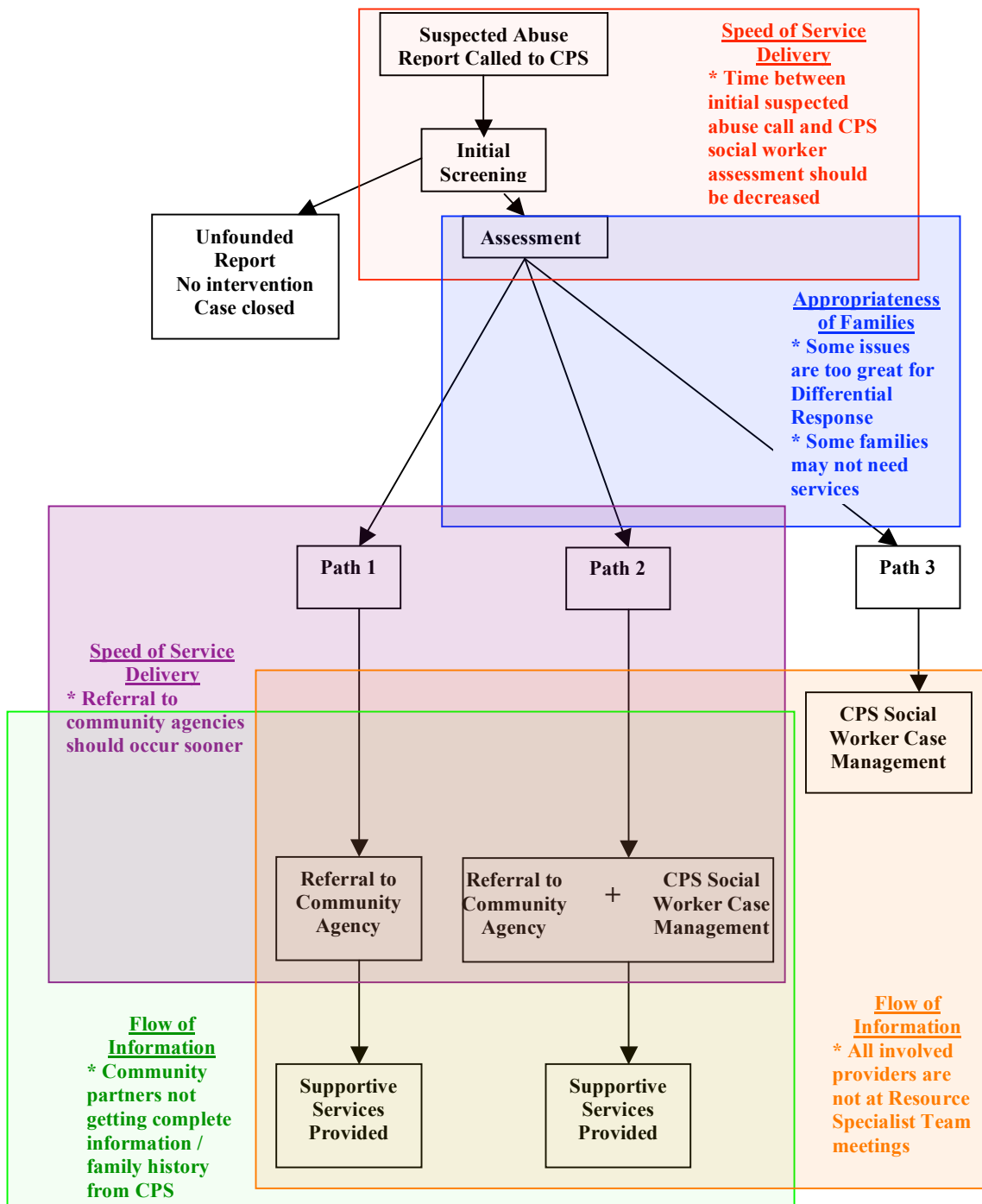
### **Respondents' Concerns Highlight Three Areas of Process**

The issues and needs suggested by the respondents coincided with specific elements of the Differential Response process. Figure 3 on the following page includes the original flow chart of the Differential Response model. The issue themes, *speed of service delivery*, *flow of information*, and *appropriateness of families* are added, showing the time in the process where the respondents stated that these issues have been present.

The following text provides an explanation of the themes of *flow of information*, *speed of service delivery*, and *appropriateness of families*, with specific attention to the issues and needs. Each is followed by recommendations for the organizations to address these needs.

**Figure 3**

Differential Response Model with Respondents' Concerns



### **Issues, Needs and Recommendations**

Overall, there appears to be a need to foster communication between CPS and the community partner agencies. Many of the concerns expressed in the interviews cannot be addressed until there is open communication between all parties. Open communication is particularly critical in clarifying expectations, roles, and norms of the new processes, a critical element of strengthening the emerging inter-organizational culture. Therefore, it is necessary to create new opportunities for members of different participating organizations to come together and discuss relevant issues. In addition, participants must all be seen to have equal standing in the process. Therefore, administrators and Home Visitors would need to be allowed equal input in the decision-making process that comes from these opportunities. This will help to create an environment of open communication with the understanding that each member of the team possesses specific skills that are needed for the entire process to work. In addition, a universal training curriculum for staff, as suggested in the Chapter 4, will ensure that all participants are in possession of the same tools needed to engage in this process. The opportunities to promote open communication can be framed as ad hoc or ongoing committees regarding specific issues that must be discussed. The main purpose of these meetings would be to solve specific problems, but a secondary effect of this process will be the deeper connection between involved parties, thus leading to better communication.

This way of thinking can also be adopted in the service delivery, as CPS social workers and Home Visitors carry out their joint visits to families. Families seeing the partnership between CPS and the community agencies as an equal relationship will be



more likely to engage in the process, given the lack of a hierarchy. This culture of equality will be beneficial for the organizations and the families being served.

### Flow of Information

It was expressed throughout the interviews from multiple participants that there are ongoing issues with the flow of information from Child Protective Services to the community partner organizations. In both the north and south area respondents discussed their need for complete information in order to provide the needed services. In the north area there was additional concern regarding the Home Visitors' safety due to an incident that spotlighted the need. There were opposing viewpoints as well, stating that too much information can alter the objective view of the families by the service providers. There was general agreement that the Resource Specialist Team meetings foster communication between the involved service providers, but often it is difficult to get all parties together due to scheduling issues.

Several needs can be determined from these statements. There is a need for clearer guidelines regarding confidentiality so both CPS and the service providers have the same expectations. It is imperative that safety issues are addressed prior to the initial joint visit in order to protect the Home Visitors. The respondents' statements suggested that the Resource Specialist Team meetings are extremely beneficial to service provision. Therefore it is very important for all involved parties to be present for these meetings.

It is recommended that a committee be developed to address the issues of confidentiality and the appropriate level of information to be shared. This committee should be comprised of administrators and direct service providers from both CPS and

the community partner agencies, and will need to set up clear guidelines for transfer of information from CPS to the service providers. Special consideration should be given to the safety issues of the Home Visitors, along with a discussion regarding what aspects of the Resource Specialist Team meetings have been specifically useful. Having all parties involved in this discussion will increase the understanding of the issues each organization faces. Therefore it is imperative that all members of the committee be present for all discussions.

In addition to the above committee, a higher priority must be put on the Resource Specialist Team meetings for all participants. Although workloads are high and scheduling is difficult for both county and private agency staff, there must be an understanding of the importance of participation in these meetings. Therefore, increased effort must be made to achieve consistent attendance at meetings with all involved parties. The attendance of all parties will assist in the increased flow of information.

#### Speed of Service Delivery

The other major concern, an efficiency issue, was that of the speed of service delivery. Specifically, many respondents stated concerns over the time between the initial suspected abuse call to CPS and the onset of services by the community partners. The most prevalent reason for the concern was not for the immediate safety of the children, since families appropriate for differential response are typically not in need of immediate emergency services. Instead, the concern was with regard to family engagement. Multiple respondents stated that an increased amount of time before services begin often leads to less engagement by the family. Therefore, in order to get

the families to become involved in the services, it is important to provide services as soon as possible.

Based on the responses, there appears to be a need to speed up the process from the initial suspected abuse call to the onset of support services. This includes shortening both the time it takes to get the case to the CPS social worker and the assessment time prior to the referral to community partners.

It is recommended that non-urgent suspected abuse calls to CPS be referred directly to a Differential Response social worker. Rather than the standard assessment after the phone screening, families can be referred to community partner agencies immediately, thus increasing the likelihood of engagement. If, after further assessment, the case is found to be more serious than originally believed, it may be referred for additional CPS services.

It is also recommended that if a longer assessment is needed for a family, that the case be referred to the community services during that process, so support services can begin immediately, rather than waiting for the assessment to be completed. It may also be beneficial to have members of the community partner organizations to participate in the assessment process at CPS. Although there may be some concern over issues of confidentiality, the increased level of communication within the organization may help in alleviating some of those apprehensions.

#### Appropriateness of Families

There were equity concerns among some participants regarding the appropriateness of the families chosen for the Differential Response program.

Specifically in the north area, some respondents referred to incidents in which the needs of the families were too great for that of the program. Similarly, it was suggested that some referred families may not be at risk for abuse or neglect at all, thus are using resources that could be helping others.

Based on these statements there appears to be a need for a more detailed assessment of the families prior to deciding their appropriateness for Differential Response. Due to a high rate of staff turnover at CPS, there is a need for understanding of what makes a family appropriate for these services.

It is recommended that an additional committee be created to address the question of appropriateness of families. An ongoing discussion is needed between all participating agencies and all levels of staff to identify particular family issues that are best addressed through Differential Response and those that may not be appropriate for these services. This standing committee could be charged with the examination of specific cases and determine which aspects of Differential Response were helpful to the families and which were not. The committee can be used to create a dynamic criteria for what families are appropriate for these services, while once again fostering communication between CPS and the community partner organizations.

The utilization of these recommendations will help to create a culture of open communication, while addressing many of the specific needs of the program. The committees may also address specific issues regarding confidentiality, families, etc., but in doing so, may address a much bigger need: fostering communication between all involved parties.

This study has provided some analysis of the current state of this pilot project. A complete assessment of the Differential Response program would need to include data acquired from Child Protective Services, and the overseeing body, the California Department of Health and Human Services. This would provide a more in-depth discussion that would include views from both the private non-profit agencies, and the governmental organizations. This study, however, provides a depth of analysis that goes beyond the operational aspects of the program. It sheds light on the views and feelings specific to the private agencies involved, and their perception of the program. Although the thoughts and comments are not objective, they are important to address. The way in which these personnel perceive the program, specifically regarding the relationship they have with Child Protective Services, can have a profound effect on the services that are being provided to families. Therefore it is necessary for an open dialog to exist to address the concerns in order to continue to improve these services. These two organizational cultures are slowly coming together as they address some of the different opinions of how to operate the program. Child Protective Services, traditionally dealing predominantly with investigations and emergency interventions, and the private agencies, traditionally providing more community and family-based services, must continue to work hard to understand each other and find commonality. Both types of organizations have the same goal, providing services to protect children and families. The struggle continues to develop the best possible way to accomplish this goal and create a new organizational culture that encompasses the values of all involved agencies.

## Appendix A

## Interview Statement Questionnaire

Participant Name \_\_\_\_\_

Title \_\_\_\_\_

Role in Differential Response \_\_\_\_\_

Differential Response Interview

1. Families are more willing to participate in services through Differential Response because they are voluntary.

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

2. Regarding the time between the initial referral to CPS and the delivery of services:

“The process is slowed down by CPS processing time with referrals and the amount of work required from the social workers before they are able to close the case and send the family to community services.”

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

3. Some families referred for Differential Response may not be appropriate for these services.

- “Is *prevention* being achieved, or are services just being provided to clients who would not have abused anyway?”
- “Sometimes the cases are at the point (where) there is a need for more CPS involvement and follow up...” (Home Visitor program not a substitute for Family Maintenance)

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:



4. Lack of communication between CPS and the community agencies has been an issue.

- “Appropriate information is not given (to Community Service providers) to adequately address the needs of the family and to ensure home visitor safety while in the home.”

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

5. There is a need for better communication among service providers to ensure consistency and quality of services.

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

6. Maintaining the confidentiality of each family's case creates issues between CPS and the community organizations regarding transfer of information.

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

7. The team approach (Collaborative meetings with support service providers, Home Visitors and CPS Workers doing home visits together) has led to the providing of more effective services.

Disagree      1      2      3      4      5      6      7      Agree

Not Important   1      2      3      4      5      6      7      Very Important

Comments:

8. There is a need for a standardized training curriculum for all home visitors.

Disagree      1      2      3      4      5      6      7      Agree

Not Important 1      2      3      4      5      6      7      Very Important

Comments:

9. There is a need for an independent review of the program.

Disagree      1      2      3      4      5      6      7      Agree

Not Important 1      2      3      4      5      6      7      Very Important

Comments:

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