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## **Summary of Pomona Family First Project Evaluation**

CalSWEC Board, Research and Development Committee

February 2, 2012

This summary presents the findings from an evaluation of the Los Angeles County Department of Children and Families Services (LA DCFS) Pomona Family First Program (PFFP). CalSWEC funded Ruth Chambers, Ph.D. at CSU – Long Beach to conduct the evaluation as a special project, beginning in 2009. Dr. Chambers conducted the evaluation in a highly collaborative partnership with LA DCFS staff. The California Department of Social Services provided support and partial funding for the study.

### **Methods**

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A mixed-method research design was used with qualitative and quantitative methods. DCFS personnel, community and family members were interviewed about the services. A closed case record review was completed that compared 50 families who received PFFP services (the intervention group) and 50 families who received traditional child welfare services from the same staff prior to the PFFP implementation (the comparison group).

### **Description of Intervention**

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The PFFP model assigned fewer cases per social worker (limited to 15) which meant that families were provided with one consistent caseworker from case opening to case closure. Services provided included but were not limited to: team decision-making meetings; frequent parent-child visitation and caseworker-family meetings; foster parent/birth parent collaboration; and caseworkers partnering with community providers to ensure timely service provision of psychotherapy, drug and alcohol counseling, parenting, and domestic violence when indicated.

### **Qualitative Results: Staff and Parent Interviews**

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The qualitative study examined the experiences of parents, staff and community members who participated in the PFFP services. Thirteen staff members and seventeen parents were interviewed.

#### **Results:**

- Caseworkers expressed satisfaction with having the time to foster and build trusting relationships with family members.
- Families indicated that they were treated with respect; their worker had realistic expectations; and they were asked about the kinds of services that they needed. Additionally, families reported that they felt like they were part of the decision-making process through Team Decision-Making meetings (TDMs) and that they were treated fairly and humanely.
- Parents reported that the caseworkers met their needs with regard to cultural competence; specifically, caseworkers spoke the most appropriate language for their family.

- The level of communication between service providers, family members, community members, and DCFS staff had grown significantly, and all now are considered essential partners in working with DCFS and the families.

## **Quantitative Results: Case Record Review**

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### Match of intervention group and comparison group:

Analyses were conducted to ascertain if there were differences in the characteristics of children and families in the two groups. In general, the groups were comparable. For both groups, the families experienced multiple clinical and economic needs such as lack of health insurance for primary caregiver and children, substance use by the primary caregiver, inadequate income source for the families, limited access to transportation and domestic violence at case opening.

### Match Between Family Needs and Services:

It was hypothesized that participation in the PFFP would improve the match between family needs and services.

#### Significant Results:

- For the intervention group, clinical needs (substance abuse, mental health and domestic violence) were better matched with services for the intervention group than the comparison group.
- Caregivers completed these services on a more frequent basis in the intervention group than the comparison group.
- Economic needs (health insurance, transportation, and child care) were matched with services on a more frequent basis in the intervention group than the comparison group.

### Case outcomes

Case outcomes were compared in terms of length of time a case was open, length of placement and number of placement moves.

#### Results:

- The intervention group had significantly shorter time of involvement with DCFS (Mean of 479 days vs. 960 days for the comparison group).
- Average length of placement was significantly shorter for the intervention group: (Mean of 408 days vs. 792 days for the comparison group).
- Children in the intervention group had significantly fewer placement moves: (Mean of 1.18 placement moves vs. 2.36 for the comparison group).
- There were fewer reports of maltreatment while the case was open in the intervention group than in the comparison group, but this difference was not significant.
- Significantly fewer reports of maltreatment were substantiated within one year of case closure for the intervention group.
- Children in the intervention group were 12 times more likely ( $p < .002$ ) to be returned home at the time of case closure than children in the comparison group, and were 23 times more likely ( $p < .001$ ) to be living at home one year after case closure than children in the comparison group.

### Caseworker Consistency, Caseworker Visits, and Case Outcomes

It was hypothesized that assigning one caseworker to a case and providing more caseworker visits would improve case outcomes.

#### Results were significant:

- For every new caseworker assigned to a case, the case stayed open an additional 115 days.
- For every 2 visits a caseworker provided, the number of days the case was open was reduced by 100 days.
- When a new worker was assigned to a case, the children stayed in placement an additional 121 days.
- For every additional worker assigned to the case, the children can expect one additional placement move.

### Placement Costs

Placement costs were compared to determine whether intervention could reduce some case costs.

*Results:*

- Average total placement costs were significantly less for families in the intervention group than the comparison group. (Mean of \$14,450 vs. \$34,285).
- Overall costs for one child were significantly less for the intervention group than for the comparison group. (Mean of \$8,847 vs. \$22,225.)

### **Implications**

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- Partnerships between university-based researchers and agency-based administrators and practitioners can produce quality, practice-oriented research and evaluation projects.
- The positive findings about reduced number of placement days, costs and fewer moves for children highlight the value of intensive reunification and permanency services.
- The value of this type of a program is further underscored by the findings on length of time to permanency for the intervention group families.
- Although intensive services and lower caseloads demand more resources, they may be more cost effective in the long run if children spend less time in out-of-home care and are less likely to return to care after reunification. More importantly, the social costs of family separation are reduced.
- Further replicative research on caseload size, vertical caseloads, intensive services and their relationship to child and family outcomes and costs are warranted.

### **Limitations**

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- This study was a non-randomized, group comparison, and this limits the generalizability of the findings. Since data was only collected using closed case files and computerized databases, some information about the families' needs or services may have not been included in the available documentation. The measurement of service did not include treatment quality or intensity and family needs were determined by self-reports of the caseworkers and family members.
- Cases were matched at the social worker level to control for factors related to the particular worker (i.e. families in both groups were served by the same set of staff). Staff was not randomly selected, however, and the staff that was selected may have particular qualities that improve outcomes with lower caseloads.
- The sample size for the treatment and comparison groups were small which limits ability of the study to represent actual differences between groups.
- Families in both groups represented those experiencing a first time removal of their children, and these families may be different from the general population of families in the child welfare system. This limits generalizability of the study.

- The qualitative interviews were conducted with families in the PFFP group only. This limits the interpretation and conclusions drawn. The study would be stronger with qualitative information from the comparison group.