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# RESEARCH REPORT

## ChildWIN: Child Welfare Workforce Innovation

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### Abstract

The Children's Home Society of Florida (CHS) embarked on an effort to improve child outcomes and workforce outcomes through an initiative called ChildWIN. Consisting of three components (career ladder, reduced caseloads, and Solution-Based Casework training), this initiative was fully implemented in Seminole County, partially implemented in Orange County, and not implemented in the Treasure Coast.

To evaluate this initiative, the School of Social Work at the University of Central Florida conducted an analysis of child outcomes across all three geographical regions, an analysis of caseworker turnover and caseworker job satisfaction across all three geographical regions, and an analysis of focus group discussions among caseworkers in Seminole County.

This report contains the results of all segments of the evaluation. Results are provided in four forms: a comparison of each region's performance to the CHS standards, a comparison across regions to identify the effects of ChildWIN, a summary of caseworker perceptions on the effects of ChildWIN, and a consideration of additional variables found to correlate with the outcomes.

## Executive Summary of Findings

This executive summary provides a brief overview of the results, which are explained in more detail in the body of the report. Results are available for each of the major categories of outcomes (safety, permanency, and workforce stability). Readers can find all statistical analyses and qualitative data in this report.

### Safety

Safety was one of the three key domains of outcomes included in this study. Results were mixed with the qualitative data reflecting a positive impact and the quantitative data providing no support for an effect. In focus group discussions, caseworkers reported that reduced caseloads in particular were successful in increasing safety by providing them with extra time to investigate their suspicions of abuse and neglect. Note that this effect may result in improved identification of maltreatment, which may in turn increase the reabuse rate. This issue may explain why the quantitative data found no effect. Statistics regarding reabuse may be an indicator of the quality of investigation and identification rather than an indicator of safety; therefore, higher reabuse rates may not necessarily represent higher rates of maltreatment. The quantitative results focused on two dimensions of safety (reabuse during in-home supervision and reabuse during out-of-home care).

#### Safety During In-Home Supervision

- While Seminole County and the Treasure Coast met the CHS standard for safety during in-home supervision, Orange County did not meet this standard.
- The quantitative data provide little evidence of ChildWIN's effect on safety during in-home supervision, since the control group (Treasure Coast) performed at the same level as the county implementing the full ChildWIN model (Seminole County) and outperformed the county implementing the Solution-Based Casework training (Orange County).
- Two variables were found to be significantly associated with safety during in-home supervision. *White children and children served by caseworkers with high caseloads were more likely to be reabused during in-home supervision.*

#### Safety During Out-of-Home Care

- All three geographical regions met the CHS standard for safety during out-of-home care.
- The quantitative data provide little evidence of ChildWIN's effect on safety during out-of-home care, since the control group (Treasure Coast) outperformed the other two regions.
- Four variables were found to be significantly associated with safety during out-of-home care. *Black children and older children were more likely to be reabused during out-of-home care. The caseload level and caseworker turnover were also associated with this outcome, with higher caseload levels and turnover being found alongside higher reabuse rates.*

### Permanency

Permanency was the second key outcome included in the study. Results in this domain were also mixed with the qualitative data reflecting a positive impact and the quantitative data providing only partial evidence of a positive impact. Caseworkers reported that the reduced caseload allowed them to invest more time in building rapport with families and completing tasks that advanced the cases forward. They believed that this would improve permanency. Caseworkers also believed that the Solution-Based Casework training had the potential to improve permanency, though they mentioned a number of barriers that inhibited the full implementation of the model. The quantitative data provided little evidence of an effect in the areas of permanency following out-of-home care and placement stability during out-of-home care. On the other hand, partial support for a positive effect on permanency following in-home supervision was demonstrated through the relative success seen in Orange County, which received the Solution-Based Casework training.

#### Permanency Following In-Home Supervision

- None of the geographical regions met the CHS standard for permanency of children receiving in-home supervision. Note that this result may be due to the short duration of the study (seven months).
- The quantitative data provide some evidence of Solution-Based Casework's positive effect on Orange County's ability to achieve permanency for children receiving in-home supervision. On the other hand, Seminole County, which also received Solution-Based Casework training, had the lowest percentage of children achieving permanency.
- No variables were found to be significantly associated with permanency following in-home supervision.

#### Permanency Following Out-of-Home Care

- None of the geographical regions met the CHS standard for permanency of children in out-of-home care. Note that this result may be due to the short duration of the study (seven months).
- The quantitative data provide little evidence of ChildWIN's effect on permanency for children in out-of-home care, since the control group (Treasure Coast) outperformed the other two regions.
- Two variables were significantly associated with successful transition to permanency following out-of-home care. *Black children and older children were less likely to transition to permanency.*

#### Placement Stability During Out-of-Home Care

- All of the geographical regions met the CHS standard for stability during out-of-home placement.
- The quantitative data provide little evidence of ChildWIN's effect on out-of-home placement stability, since the control group (Treasure Coast) outperformed the other two regions.
- Two variables were found to significantly correlate with placement stability. *Black children and older children were significantly less likely to experience placement stability.*

## Workforce Stability

Workforce stability was the third key outcome included in the study. The majority of the evidence, both quantitative and qualitative, provide support for a positive impact on workforce stability. In focus group discussions, caseworkers described multiple positive impacts. They said that the Solution-Based Casework training reignited the aspirations they had when they initially took the job, the career ladder provided them with an incentive to remain in the position, and the reduced caseloads allowed them to have more success with their clients and invest in their own home life. These impacts are supported by the job satisfaction scores of Seminole County's caseworkers. The turnover rates also provide some support for a positive impact, with Seminole and Orange Counties outperforming the control group.

### Caseworker Turnover

- All of the geographical regions met the CHS standard for caseworker turnover.
- The quantitative data provide some evidence of ChildWIN's effect on turnover, since the county implementing the reduced caseload and career ladder (Seminole) outperformed the control group (Treasure Coast). However, Orange County, which did not implement the reduced caseload or the career ladder, had the lowest turnover rate.
- No significant relationship was found between turnover and caseload level.

### Caseworker Job Satisfaction

- All of the geographical regions met the CHS standard for caseworkers' satisfaction with their work and their co-workers at both Time 1 and Time 2. None of the regions met the standard for caseworkers' satisfaction with their pay or promotion opportunities at Time 1 or Time 2. Orange and Seminole Counties met the standard for satisfaction with supervision at Time 1, while all three regions met this standard at Time 2. A similar pattern is seen for the Job In General satisfaction score with only Orange and Seminole Counties meeting the standard at Time 1 and all regions meeting the standard at Time 2.
- The quantitative data indicate that ChildWIN had a positive impact on the job satisfaction scores of Seminole County caseworkers, though most of this positive impact was short-term in nature.
- In a few circumstances, caseload levels were found to correlate with job satisfaction scale scores. Higher caseload levels were found alongside lower satisfaction with pay, promotion opportunities, and the job in general.

## ChildWIN Evaluation

### Mission, Goals, and Objectives

The Children's Home Society of Florida (CHS) is directed towards the mission of "building bridges to success for children." In the child welfare context, this mission is accomplished through the promotion of child safety and child permanency. Further, the mission is supported through the promotion of child welfare workforce stability.

In line with this mission, the Children's Home Society of Florida selected six objectives to guide their efforts in 2016. The first two objectives focus on child safety and read as follows:

1. 95 percent of the children receiving in-home services at the time of pretest will not be abused or neglected by the time of posttest.
2. 95 percent of the children in out-of-home care at the time of pretest will not be abused or neglected by the time of posttest.

Child permanency is another important goal that is represented by two of the six objectives.

1. 50 percent of the children receiving in-home services or out-of-home care at the time of pretest will have a permanent placement by the time of posttest.
2. 50 percent of the children in out-of-home care at the time of posttest will have fewer than three placements by the time of posttest.

The third goal focuses on child welfare workforce stability. The remaining two objectives align with this goal:

1. 70 percent of the caseworkers employed at the time of pretest will remain in their positions by the time of posttest.
2. 70 percent of the caseworkers employed at the time of posttest will express high levels of job satisfaction as indicated by subscale scores in the high end of the range of possible scores.

These six objectives served as a guidepost for the ChildWIN initiative and the ChildWIN evaluation.

## ChildWIN Initiative

The ChildWIN Initiative included the following three components:

1. **Solution-Based Casework Training** – this training provided caseworkers with a model for building collaborative relationships with parents and moving towards the goals of child safety and permanency.
2. **Reduced Caseloads** – additional caseworkers were hired in order to reduce the caseload levels of those employees who coordinated in-home supervision and out-of-home care.
3. **Career Ladder** – employees had access to a career ladder that included salary increases.

The evaluation of the ChildWIN Initiative focused on three geographical regions that implemented various components of ChildWIN. The following regions were included in the study:

**Seminole County** – implemented all three components of the initiative. This region employed 34 caseworkers who served 87 children through in-home supervision and 434 children through out-of-home care. The in-home supervision sample was largely White (69%) and male (53%) with an average age of 7. Approximately one quarter were Latino. The out-of-home sample was largely White (59%) and evenly split in gender (51% male) with an average age of 7. 15 percent were Latino.

**Orange County** – implemented only the Solution-Based Casework training. This region employed 28 caseworkers who served 70 children through in-home supervision and 281 children through out-of-home care. The in-home supervision sample was almost evenly split for gender (51% male) and race (50% White) with an average age of 6. Approximately one fifth were Latino. The out-of-home sample was largely White (58%) and male (52%) with an average age of 6. Twenty percent were Latino.

**Treasure Coast** – implemented none of the ChildWIN components. This region employed 24 caseworkers who served 42 children through in-home supervision and 305 children through out-of-home care. The in-home supervision sample was largely White (76%) and female (57%) with an average age of 5. Approximately one quarter were Latino. The out-of-home sample was largely White (72%) and evenly split in gender (52% male) with an average age of 7. Seventeen percent were Latino.

## Methodology

The evaluation of the ChildWIN initiative consisted of four components. The first component sought to address the initiative's effects on child outcomes, including child safety and child permanency. The second and third components focused on the effect of the initiative on child welfare workforce stability. The fourth component included an attention to all three goals (child safety, child permanency, and child welfare workforce stability).

The evaluation of the initiative's effect on child outcomes took the form of a three-group posttest design. The three groups included Seminole County, where the full initiative was implemented, Orange County, where only the training was implemented, and the Treasure Coast, where none of the initiative was implemented. The population of children with open cases involving in-home supervision ( $n = 199$ ) or out-of-home care ( $n = 1,020$ ) was extracted from the agency database at the end of February 2016. Case outcomes in the domains of safety and permanency were measured for this population in September 2016.

The initiative's effect on caseworker turnover was assessed using the three-group posttest design. The three groups included Seminole County, Orange County, and the Treasure Coast. A population of 86 caseworkers handling in-home supervision and out-of-home care cases was extracted from the agency's human resources database at the end of February 2016. The employment status of these caseworkers was identified through the human resources database in September 2016.

The initiative's effect on the job satisfaction of caseworkers was assessed through online surveys administered in April 2016 and October 2016. The surveys were sent to 111 caseworkers in Seminole County, Orange County, and Treasure Coast. The response rate was 26.1 percent for the April survey and 22.5 percent for the October survey.

A qualitative component was employed to identify caseworkers' perceptions of the initiative's effect on all goals. These perceptions were collected during three focus groups held in July 2016. Seminole County caseworkers were invited to these focus groups, since they were in the best position to assess the effects of the initiative and the mechanisms by which the initiative influences child safety, child permanency, and child welfare workforce stability.

In addition to the above components of the evaluation, supplemental analysis was conducted to identify relationships between the variables contained in the study.

## Results

The results are presented within three categories: 1) child safety; 2) child permanency; and 3) workforce stability.

### 1: Child Safety

The first category includes all analyses regarding safety. The results are presented in the following three sections:

1. Quantitative analysis of safety during in-home supervision
2. Quantitative analysis of safety during out-of-home care
3. Qualitative analysis of caseworker perceptions of safety

#### 1) Safety during In-Home Supervision

This section reports on results from 199 children who received in-home supervision. This sample represents the population of children receiving in-home supervision at the end of February 2016. The outcomes for these children were measured at the end of September 2016.

Note that the number of these children experiencing reabuse was very small. When the sample per county is small and a particular outcome is recorded in only a few cases, statistical analysis can be distorted and the results can be deceptive. For example, differences in percentages across counties may appear large, though these percentages represent a small number of children.

#### Comparison to Standard

Children's Home Society set a standard of 95 percent for the safety rate during in-home supervision. Seminole County and Treasure Coast both met this standard. Approximately 98 percent of children served in these two regions were not abused or neglected while receiving in-home supervision. Orange County failed to meet this standard. 93% of children receiving in-home supervision in Orange County were not abused or neglected. Note, however, that the number of children abused or neglected between Time 1 and Time 2 was very low (5 in Orange County, 2 in Seminole County, and 1 in the Treasure Coast).

#### Comparison across Regions

A comparison of reabuse rates across regions can be found in Table 1. Though Orange County had a higher reabuse rate than Seminole County and Treasure Coast, there was no significant relationship between geographical region and the reabuse rate.

**Table 1: Percentage of Children Reabused between Time 1 and Time 2**

	Orange	Seminole	Treasure Coast
Children Receiving In-Home Supervision at Time 1 (n = 199) <sup>ns</sup>	7%	1%	2%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

#### Identification of Correlates

In order to identify characteristics that may relate to the likelihood of reabuse during in-home supervision, a logistic regression model was constructed and analyzed. The child's age, ethnicity, and gender did not significantly relate to the likelihood of reabuse. On the other hand, the child's race was a significant variable.

*White children were nearly ten times more likely to be reabused than Black children.* A minimally significant difference was found in the Orange/Seminole comparison. Children served in Orange County were over five times more likely to be reabused than children served in Seminole County. See Table 2 for the results of this logistic regression model.

Note that this model is predicting an outcome that is rare (less than 5% of cases). Therefore, the effects of the characteristics within these cases experiencing reabuse may be exaggerated in this analysis.

**Table 2: Logistic Regression Results Predicting Reabuse**

	B	Odds Ratio
Age <sup>ns</sup>	.075	1.078
Ethnicity (Latino) <sup>ns</sup>	-1.609	.200
Gender <sup>ns</sup>	-.937	.392
Race (White)*	2.302	9.993
Orange/Seminole*	1.708	5.519
Treasure Coast/Seminole <sup>ns</sup>	-.012	.988

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

In order to identify caseworker characteristics that may relate to the likelihood of reabuse during in-home supervision, a hierarchical non-linear model was constructed and analyzed. The variance component for the intercept was not significant, meaning that the likelihood of reabuse did not significantly vary across caseworkers. However, an analysis to test the effects of caseworker characteristics was conducted. The results indicate that safety may be affected by the number of in-home and out-of-home cases on the employee's caseload. This relationship approached significance at a lower standard ( $p < .10$ ) than traditionally used. The relationship was positive, meaning that higher caseloads were found alongside higher odds of reabuse.

When child-level variables were added to the model, neither caseload nor turnover was significantly related to the likelihood of reabuse. See Table 3 for these results.

**Table 3: Hierarchical Non-linear Model Results Predicting Reabuse**

	Coefficient	p-value
Intercept	-2.980	0.000
Caseload*	0.048	0.067
Turnover <sup>ns</sup>	0.198	0.782

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

## 2) Safety during Out-of-Home Care

This section reports on results from 1,020 children who were in out-of-home care. This sample represents the population of children in out-of-home care at the end of February 2016. The outcomes for these children were measured at the end of September 2016.

### Comparison to Standard

Children's Home Society set a standard of 95 percent for the safety rate during out-of-home care. All three geographical regions met this standard. Ninety-seven percent of foster children in Seminole County, 98 percent of foster children in Orange County, and 99 percent of foster children in the Treasure Coast were not abused or neglected between Time 1 and Time 2.

### Comparison across Regions

A comparison of reabuse rates across regions can be found in Table 4. Seminole County had the highest reabuse rate in foster care followed by Orange County and the Treasure Coast. A chi-square test of the relationship between geographical region and reabuse was significant.

**Table 4:** Percentage of Children Reabused between Time 1 and Time 2

	Orange	Seminole	Treasure Coast
Children in Out-of-home Care at Time 1 (n = 1,020)*	2%	3%	1%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

### Identification of Correlates

In order to identify characteristics that may relate to the likelihood of reabuse during out-of-home care, a logistic regression model was constructed and analyzed. *Similar to the model predicting reabuse during in-home supervision, the foster child's ethnicity and gender were not found to be significantly related to likelihood of reabuse.* The child's race was a significant variable. The effect was in the opposite direction of that found in the in-home supervision model. *Black children were three times more likely to be reabused during out-of-home care than White children. The child's age was minimally significant, with older children being more likely to be reabused than younger children.* The Orange/Seminole comparison was not significant, but the Seminole/Treasure Coast comparison was significant. *Children served in Seminole County were nearly five times more likely to be reabused during foster care than foster children served in the Treasure Coast.* See Table 5 for these results.

*Caution should be exercised in relying on this analysis, since the outcome studied is rare within the sample. Therefore, the effect of characteristics of cases involving reabuse may be exaggerated in this analysis.*

**Table 5:** Logistic Regression Results Predicting Reabuse

	B	Odds Ratio
Age <sup>ns</sup>	.077	1.081
Ethnicity (Latino) <sup>ns</sup>	.926	2.525
Gender <sup>ns</sup>	-.376	.687
Race (White)*	-1.124	.325
Orange/Seminole*	-.682	.506
Treasure Coast/Seminole <sup>ns</sup>	-1.557	.211

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

In order to identify caseworker characteristics that may relate to the likelihood of reabuse during out-of-home care, a hierarchical non-linear model was constructed and analyzed. The variance component for the intercept was not significant, meaning that the likelihood of reabuse did not significantly vary across caseworkers. However, an analysis to test the effects of caseworker characteristics was conducted. The results indicate that safety is affected by the number of in-home and out-of-home cases on the employee's caseload and may be affected by the caseworker's turnover. The first relationship clearly met the standard of significance, while the second relationship approached significance at a lower standard ( $p < .10$ ) than traditionally used. The relationships were both positive, meaning that turnover and higher caseloads were found alongside higher odds of reabuse. In other words, safety is associated with lower caseloads and consistent caseworkers. See Table 6 for these results.

**Table 6:** Hierarchical Non-linear Model Results Predicting Reabuse

	Coefficient	p-value
Intercept	-3.634	0.000
Caseload**	0.053	0.010
Turnover*	0.592	0.069
Child Age*	0.076	0.016
Latino*	0.878	0.017
White**	-1.237	0.001

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

### 3) Caseworker Perceptions

This section presents the results of three focus groups with caseworkers from Seminole County, which is the location that implemented the full ChildWIN model. The focus groups contained approximately 25 percent of the caseworkers from this region. Caseworkers discussed the effects of reduced caseloads on child safety.

#### Reduced Caseloads

The caseworkers believed that safety was positively impacted by reduced caseloads. Participants reported that the reduced caseload gave them additional time to assess for safety. When case managers had suspicions, they used the additional time in two ways. First, they conducted surprise visits above and beyond the number of visits that were required. Second, they extended the length of the visit to see if there were any indicators to substantiate their suspicions.

Though the case managers had many positive perceptions of the reduced caseload, they mentioned two issues that reduce the magnitude of the positive impact. They found that when the caseload decreased, the agency added other items to their workload that took up some of the time saved by the reduced caseload. They also believed that the intensity of the cases is an important consideration and suggested weighting of high-risk cases in the calculation of one's caseload.

Caseworker comments that demonstrate these conclusions can be found below.

#### Positive Effects

"I think in regards to safety, a lot of times when we do our visits, sometimes we get this feeling that maybe something wasn't right. But when the caseload are high,...you have 39 more visits to do. But with lower caseloads, you're allowed, you have that opportunity to pop up in a few days unannounced and really see if this was something I need to be concerned about...It gives you that opportunity, it gives you that flexibility, because you're not worried about seeing 39/40 kids. You have 20 kids and that's more manageable."

"And I feel like with the lower caseloads,...you have a better chance to assess safety. Although we know what we're looking for, you actually have that time to go and say—well, maybe you're giving me a show right now for this quick home visit. So, I going to hang out for a little bit more and see if this charade just ends and we actually get to see what really happens with the family... now that I'm staying extra time than I usually would, because I used to have a higher caseload. I feel like you can keep your eyes on the case more. You start to notice more things."

#### Issues with Implementation

"When the caseloads are low, they expect more from you. So, it's not like you're taking a break. You're still working and working. They add more things to you."

"We have lower caseloads, however, they put more tasks on us when we have lower cases or lower amounts of children. So, there's no balance for us. We're always way, way up high as far as tasks and priorities and trying to manage it all. Time management. No matter how great of a time manager you are, you can't factor in for all of the fires that erupt that you have to then stop and put out."

"I feel like it would also be helpful, not just as your caseload as numbers, but look at it as – how many of those cases are gonna be high-risk and how many are going to take a lot more of your time. I could have 20 kids, but everything is going smoothly. Or you could have 25 kids and everything's going crazy...I think the case itself should be looked at not just as a number but what's going on in that case."

"I think as you do a good job,...they trust you with the harder cases...there's only a few people that maybe get those cases. So, you get a few of them, especially with maybe teenagers that are high risk, you spend a lot of time just on one or two cases."

## 2: Child Permanency

The second category includes all analyses regarding permanency. The results are presented in the following four sections:

1. Quantitative analysis of the achievement of permanent placement following in-home supervision
2. Quantitative analysis of the achievement of permanent placement following out-of-home care
3. Quantitative analysis of placement stability while in out-of-home care
4. Qualitative analysis of caseworker perceptions of permanency

### 1) Permanent Placement Following In-Home Supervision

This section reports on results from 199 children who received in-home supervision. This sample represents the population of children receiving in-home supervision at the end of February 2016. The outcomes for these children were measured at the end of September 2016.

Note that the number of these children achieving permanent placement was very small. When the sample per county is small and a particular outcome is recorded in only a few cases, statistical analysis can be distorted and the results can be deceptive. For example, differences in percentages across counties may appear large, though these percentages represent a small number of children.

#### Comparison to Standard

Children's Home Society set a standard of 50 percent for the permanency rate of children receiving in-home supervision at Time 1. Children who are reunified with their parents or living under a guardianship at Time 2 would be considered as having a permanent placement. None of the geographical regions in this study met this standard.

## Comparison across Regions

A comparison of permanency rates across regions can be found in Table 7. Orange County had the highest permanency rate. The Treasure Coast and Seminole County lagged far behind Orange County with permanency rates of 2 percent and 0 percent, respectively. The chi-square statistic was significant, indicating a relationship between the county of residence and the permanency rate for children receiving in-home supervision.

**Table 7: Percentage of Children having a Permanent Placement at Time 2**

	Orange	Seminole	Treasure Coast
Children receiving In-Home Supervision at Time 1 (n = 199)*	10%	0%	2%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

## Identification of Correlates

In order to identify characteristics that may relate to the likelihood of permanent placement following in-home supervision, a logistic regression model was constructed and analyzed. Because the numbers of children achieving permanency in Seminole County and Treasure Coast were so small (0 and 1, respectively), the geographical regions could not be added to the model. None of the child-level characteristics were significantly related to likelihood of permanent placement. Further, some distortions in results were noted. These distortions are likely due to the very small number of children achieving permanency. See Table 8 for details regarding this model.

**Table 8: Logistic Regression Results Predicting Permanent Placement**

	B	Odds Ratio
Age <sup>ns</sup>	.010	1.010
Ethnicity (Latino) <sup>ns</sup>	-18.026	.000
Gender <sup>ns</sup>	.178	1.195
Race (White) <sup>ns</sup>	18.854	154313024.0

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

Attempts were made to create hierarchical non-linear models and test the relationship between caseworker characteristics and permanent placement of children who received in-home supervision. Due to the small number of children entering a permanent placement, the models could not be analyzed as the software would not run with these low numbers.

## 2) Permanent Placement Following Out-of-Home Care

This section reports on results from 1,020 children who were in out-of-home care at the end of February 2016. The outcomes for these children were measured at the end of September 2016.

## Comparison to Standard

Children's Home Society set a standard of 50 percent for the permanency rate of children in out-of-home care at Time 1. Children who are reunified with their parents, living under guardianship, or living with an adoptive family at Time 2 would be considered as having a permanent placement. None of the geographical regions in this study met this standard.

## Comparison across Regions

A comparison of permanency rates across regions can be found in Table 9. Treasure Coast had the highest permanency rate for foster children (31%). Seminole County had the lowest permanency rate (17%). Orange County fell into the middle of the range (25%). The chi-square statistic was significant, indicating a significant relationship between geographical region and the permanency rate for foster children.

**Table 9: Percentage of Children having a Permanent Placement at Time 2**

	Orange	Seminole	Treasure Coast
Children in Out-of-Home Care at Time 1 (n = 1,020)***	25%	17%	31%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

## Identification of Correlates

In order to identify characteristics that may relate to the likelihood of permanent placement following out-of-home care, a logistic regression model was constructed and analyzed. *The child's ethnicity and gender were not related to the likelihood of permanent placement. Age was significantly related to permanency, with younger children being more likely to enter a permanent placement. Race was also significantly related to permanency. White children were nearly two times more likely to enter permanent placement than Black children.* Both geographical comparisons were statistically significant. Children served in Orange County were one and a half times more likely to achieve permanency than children served in Seminole County. Children served in the Treasure Coast were two times more likely to achieve permanency than children served in Seminole County. See Table 10 for details regarding this model.

**Table 10: Logistic Regression Results Predicting Permanent Placement**

	B	Odds Ratio
Age*	-.034	.966
Ethnicity (Latino) <sup>ns</sup>	-.158	.854
Gender <sup>ns</sup>	.020	1.020
Race (White)**	.592	1.807
Orange/Seminole*	.461	1.586
Treasure Coast/Seminole***	.707	2.027

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

In order to identify caseworker characteristics that may relate to the likelihood of permanent placement following out-of-home care, a hierarchical non-linear model was constructed and analyzed. The intercept of the model significantly varied across the caseworkers, meaning that some caseworkers were more successful than others in moving the child to permanency. However, the results did not indicate a significant relationship between the odds of permanent placement and the caseworker characteristics of caseload or turnover. See Table 11 for details regarding this model.

**Table 11: Hierarchical Non-linear Model Results Predicting Permanent Placement**

	Coefficient	p-value
Intercept	-1.700	0.000
Caseload <sup>ns</sup>	-0.002	0.942
Turnover <sup>ns</sup>	0.528	0.132
Child Age*	-0.041	0.017
Race (White)*	0.596	0.011

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

The possibility remains that some caseworkers are given more difficult cases as a result of their expertise. This could result in substantial differences in success across caseworkers, with those caseworkers who are the best having the worst outcomes. Further research would be needed to test this possibility.

### 3) Placement Stability During Out-of-Home Care

This section reports on results from a sample of 1,020 children who were in out-of-home care at the end of February 2016. The outcomes for these children were measured at the end of September 2016.

#### Comparison to Standard

Children’s Home Society set a standard of 50 percent for the percentage of children in out-of-home care who experience fewer than three placements between Time 1 and Time 2. All geographical regions in this study met this standard. 92 percent of the Treasure Coast’s foster children, 91 percent of Orange County’s foster children, and 90 percent of Seminole County’s foster children experienced stability (fewer than 2 placement moves) between Time 1 and Time 2.

#### Comparison across Regions

A comparison of placement stability across geographical regions can be found in Table 12. Slight differences were identified across the regions with the Treasure Coast having the highest percentage and Seminole County having the lowest percentage. Since these differences were very small, a chi-square test found no significant relationship between geographical region and the percentage of children experiencing placement stability.

**Table 12: Percentage of Children Experiencing Fewer than Three Placements between Time 1 and Time 2**

	Orange	Seminole	Treasure Coast
Children in Out-of-Home Care at Time 1 (n = 1,018)***	91%	90%	92%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

#### Identification of Correlates

In order to identify characteristics that may relate to the likelihood of placement instability during out-of-home care, a logistic regression model was constructed and analyzed. *The child’s ethnicity and gender were not significantly related to the likelihood of placement instability. Age was significantly related to instability, with older children being more likely to experience more than two placements between Time 1 and Time 2. The effect of race was marginally significant. Black children were 1.5 times more likely to experience instability than White children. The comparisons across geographical region were not significant.* See Table 13 for details regarding this model.

**Table 13: Logistic Regression Results Predicting Placement Instability (>2 Placements)**

	B	Odds Ratio
Age***	.167	1.182
Ethnicity (Latino) <sup>ns</sup>	-.287	.750
Gender <sup>ns</sup>	-.094	.911
Race (White)*	-.402	.669
Orange/Seminole <sup>ns</sup>	.030	1.031
Treasure Coast/Seminole <sup>ns</sup>	-.143	.867

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

In order to identify caseworker characteristics that may relate to the likelihood of placement instability during out-of-home care, a hierarchical non-linear model was constructed and analyzed. The intercept of the model significantly varied across the caseworkers, meaning that some caseworkers were more successful than others in maintaining placement stability. *No significant relationships were identified between the odds of placement instability and the caseworker characteristics of caseload or turnover.* See Table 14 for details regarding this model.

**Table 14:** Hierarchical Non-linear Model Results Predicting Placement Instability

	Coefficient	p-value
Intercept	-2.207	0.000
Caseload <sup>ns</sup>	-0.021	0.355
Turnover <sup>ns</sup>	0.070	0.831
Child Age <sup>***</sup>	0.162	0.000
Race (White) <sup>**</sup>	-0.573	0.008

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

#### 4) Caseworker Perceptions of Permanency

This section presents the results of three focus groups with caseworkers from Seminole County, which is the location that implemented the full ChildWIN model. The focus groups contained approximately 25 percent of the caseworkers from this region. Caseworkers discussed the effects of the reduced caseloads and Solution-Based Casework training on child permanency.

##### Reduced Caseloads

Caseworkers reported that reduced caseloads had positive impacts for child permanency. The reduction in caseload allowed them to spend more time with the families, which strengthened the relationship between the caseworker and the family. They believed that this stronger relationship could contribute to improved permanency outcomes. As the caseworker invested in the family, the parents were more motivated to change. The caseworkers also had more time to identify resources and connect the families to these resources, which further supports permanency goals.

Though the caseworkers had many positive perceptions of the reduced caseload, they mentioned two issues that reduce the magnitude of the positive impact. They found that when the caseload decreased, the agency added other items to their workload that took up some of the time saved by the reduced caseload. They also believed that the intensity of the cases is an important consideration and suggested weighting of high-risk cases in the calculation of one’s caseload.

Caseworker comments that demonstrate these conclusions can be found on the following pages.

##### Positive Effects

“When you have a high caseload, you can’t focus on the tiny aspects of the case. Stuff that maybe seems small, but makes a difference in some of the families’ lives. Because I’ve had a high caseload and I’ve had a small caseload. So, I can speak from both perspectives and know that when I had a high caseload, it was just me ensuring that the children were safe and trying to move the case forward as fast as possible. But there are other things like community resources that some of our families need. Or transport. Stuff that are small, but they can help the case move along. And they help your relationship with the families as well. When you don’t have time, when you’re being pulled in different directions from having so many cases, you don’t have time to give the families the focus that they need. Oftentimes they become upset, because they don’t feel like they are getting adequate attention. They don’t feel like their case is being...they just feel like another number, another statistic.”

“In regards to permanency, if you show a parent that you are invested in them, then I believe that they are more receptive to want to make a change. If they’re just on a checklist to be seen every month or seen at court for a report, they’re just going to feel like a number, another number like I said before. So, I think it does affect permanency. Because if you have more time to encourage your parents and invest in even the children, because some of the children can affect permanency as well. If you have that time to invest in them, then, I mean it motivates them to move forward.”

“I do think that I’m, as my caseload is going down, and I’ve seen other people’s caseloads going down,...I do feel like we’re more effective with our families. I do feel like I’m spending more time with my families. I’m able to turn in things timely instead of late because I’m running around. So, I do think that it is more effective. And I do see, at least in my unit, we are closing cases weekly, which is great.”

“I’ve had [over 40] kids at one time, which was terrible. All I was doing was running around saying hello and putting out fires. No social work involved. And then I’ve had [under 25]. And there’s a big difference.”

##### Issues with Implementation

The issues with implementation are the same as those found in the Child Safety section.

##### Solution-Based Casework Training

Caseworkers believed that the Solution-Based Casework (SBC) training could have positive impacts on clients. Some found that the skills would allow them to engage with the families and collaboratively create case plans with the families. They believed that this process strengthened the families’ commitment to the case plans and encouraged their sense of self-worth. However, they also believed that these impacts would only be seen if caseloads remained low and case managers had the time to implement solution-based casework.

Caseworkers reported several problems related to the Solution-Based Casework training that could be addressed to maximize

the positive impact. One problem is that the parent company will occasionally deny payment for a service that aligns with the solution-based casework methodology, but that the courts have not mandated. The courts appear to be a major barrier in the implementation of the methodology, since the court personnel are operating from a different perspective. However, one case manager believed that the program director was making progress in convincing the court personnel to shift their philosophy. Caseworkers also had suggestions for improving the training through the use of case examples. Further, they believed that the training's positive impacts would be maximized if the agency would explain to case managers the reasons why the training is important as opposed to mandating the training without explanation.

Caseworker comments that demonstrate these conclusions can be found on the following pages.

### **Positive Effects**

"I think when you're engaging the families and using this training to help them understand – 'Okay, what happened this day, this was abnormal, what do you think needs to happen?' – You're getting them to buy into whatever plan, whatever plan you come up with, and they see this is actually helping them. Whereas, before, if you're just telling them, I want you to do parenting, I want you to do a substance abuse evaluation, I want you to have batterer's intervention – like just list services at them – they kind of like, why do I need this? I don't get it. Why? Whereas, when you're engaging them, I say – 'Tell me about what happened. What do you think needs to change? What do you think would be helpful or beneficial to you?' – They're seeing where these services are gonna help them...and they're more willing to buy into the services."

"Because the parents are buying into the service, they see where it's beneficial, and they're actually learning. And there are parents who are using the skills that they've learned from those services and applying them. And you can see it. You can observe it. You might be supervising a visit. And you see that maybe before the parent would have started panicking when the child starting crying. Like they've been calm and they're handling it better now. Or if the child is acting out, they know how to address it properly whereas just lashing out or exploding. So, you can see it. They're buying into it. They're buying into the services. And know they're actually learning what the services are meant to be teaching them."

"And, also, they know that we're not being punitive. They know that we're actually working with them, whereas some of them are very hesitant to even engage with you, because they're like 'I'm in trouble, I'm just a terrible parent, I can't do anything right.' You're coming at them – you're saying, 'you're not a terrible parent, but a situation did occur and we just want to know why that situation occurred and how to help so that situation doesn't occur again.' So, it's like they're realizing, 'okay, I messed up and it's not the end of the world and things can be put in place to help me so this doesn't happen over and over again.' So, it's like with this, you're allowing them to see – 'hey, this is where the mess up is, this is why we got involved' - but we're not saying - 'we're going to have to stay with you, because you can't do anything right.'"

"If we're able to keep the caseloads down and actually engage the families like we should, then yeah, [the training] would definitely have us moving closer and quickly to permanency in a shorter time frame than what we currently are. So, if we're able to truly jump in and engage these families as we should be engaging these families rather than trying to just check off – okay, I did my first visit – okay, let's go to mediation and let's get this case moving – as we typically would do, I do believe that yes, this would definitely help with the case outcomes."

"We're learning how to get kids out of foster care and group homes, which is great with this new SBC with the family trees and the genograms and the investigation part. But we're still at the first stages of this. To us, right now, it seems like a lot more paperwork at the beginning, but I feel, like I have a strong good gut feeling that this is gonna work out. It's just gonna take some getting used to and getting the kinks taken away."

"In the long run, will it assist with getting kids out of foster care placement? Um, I would say yes, but then again, I was loosely taught something like family trees and to sit there and look at all possible avenues from our previous director. But not everybody got that. So, now, the new people are coming in and they're changing things."

"I just felt it was things you should be doing in your day-to-day... I was kind of looking at it and thinking – do people really not do this, because this is good old-fashioned casework....So to me, it just felt like common sense, that it was a good training, very interesting, very engaging, but I thought it was very common sense."

### **Issues with Implementation**

"Our parent company, maybe we see a problem with a family that we're trying to remediate. You know, so that we can build this family back up. But then, we're having our parent company saying well, we're not going to fund that. We're not going to fund that because it wasn't in the case plan or the judge didn't order that. So, that's not helping us with social work and case management also, and the SBC that we're being taught."

"SBC methodology is saying do we see a behavioral change, but in court they're not caring about behavioral changes. They're looking at the black and white – was it completed? Is it done? Okay, it's done. They're not looking at yes, they walked the walk just to walk it. They're not understanding why they're on that walk though. So, we're saying no, but they're saying no but they walked it."

"Solution-based care and methodology are supposed to be family-centered. The case plans are supposed to be built around the families, however, what we're seeing in court, what we're seeing at staffings, when we're getting the new cases, they want that black and white generic, so we're not able to do that family-based case plan."

"I do notice that our new program director is trying to work with the courts and our Children Legal Services team to get them on the same page as us, so we're not just doing the black and white. You know, it's a process. No one likes change. So, it's taking a long time for anyone to understand where we're coming from."

“We were always taught that...as far as case plans for parents, it’s completion, completion, successful completion. That’s all we care about. Now we’re saying no, now we care about a change. We care about that they’ve changed their behavior and it’s very hard to measure that unless you’re living with a family.”

“A lot of times we’re getting cases and immediately we’re told that we’re going to mediation. So, we don’t have the opportunity to sit down and go through that family functioning assessment/ongoing assessment. We can’t do that. We’re just rushing. And we have to do this generic case plan, so that doesn’t help.”

“From what I’ve been learning, from my training with my supervisor, I think it needs to be more working together and using examples on our cases now to see how it plays out. And all of us should have a sample case that we should be doing that with instead of just listening to someone explain it. Because I think that would help everyone understand it, how to move forward.”

“The way that it’s presented to us sometimes is not the best way...I feel like this would be beneficial for us, and I think it’s a good avenue to go, but I feel like the way they presented this information is very overwhelming and confusing and it doesn’t help when we have a supervisor yelling at us, telling us this is the new way, you have to do this now, instead of actually sitting down and explaining it to us...I’d like to understand why I’m doing it, because then I can do it better.”

### 3: Workforce Stability

The third category includes all analyses regarding workforce stability. The results are presented in the following four sections:

1. Quantitative analysis of turnover
2. Quantitative analysis of intent to leave the position
3. Quantitative analysis of job satisfaction
4. Qualitative analysis of caseworker perceptions of workforce stability

#### 1) Turnover

This section reports on results from 97 employees, 86 of which managed cases involving in-home supervision or out-of-home care. This sample represents the population of employees who worked for CHS at the end of February 2016. Turnover for this population was measured at the end of September 2016.

#### Comparison to Standard

Children’s Home Society set a standard of 70 percent for the employee retention rate. A review of Table 15 indicates that this standard was met in all three regions that were included in the study. These rates represent the percentage of people employed in February 2016 (Time 1) who were still employed in September 2016 (Time 2).

### Comparison across Regions

Since Seminole County was the site that implemented the ChildWIN component of reduced caseloads and a career ladder, we would expect that the retention rate would be highest in this region. While Seminole County had a higher retention rate than the Treasure Coast region, their retention rate was lower than Orange County. Overall, the number of employees leaving their positions during this time span (February to September) was very low (2 leaving in Orange County, 6 leaving in Seminole County, and 6 leaving in Treasure Coast). The number of caseworkers leaving their positions was even lower (2 leaving in Orange County, 4 leaving in Seminole County, and 6 leaving in Treasure Coast). Neither of these regional comparisons (for all employees or for caseworkers) were statistically significant.

**Table 15: Employee Retention Rates**

	Orange	Seminole	Treasure Coast
All Employees (n = 97) <sup>ns</sup>	93%	86%	75%
Employees with In-Home Supervision or Out-of-Home Care Cases (n = 86) <sup>ns</sup>	93%	88%	75%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

### Identification of Correlates

In order to identify correlates of turnover, a logistic regression model was created and analyzed. The results, which can be found in Table 16, suggest no relationship between turnover and the employee’s caseload level or the employee’s geographical location.

**Table 16: Logistic Regression Results Predicting Turnover among Caseworkers**

	B	Odds Ratio
Orange/Seminole <sup>ns</sup>	-.488	.614
Treasure Coast/Seminole <sup>ns</sup>	.936	2.551
Caseload Levels <sup>ns</sup>	.021	1.021

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

#### 2) Intent to Leave

Since turnover is an important concern of CHS, the study also focused on caseworkers’ intent to leave the position in the coming year. No specific standard is available for intent to leave, so we were unable to compare the statistics to a standard. However, we were able to conduct comparisons across regions and analyses of correlates.

Data regarding intent to leave were collected through surveys of caseworkers. These surveys were administered at two time points: April 2016 and October 2016. The April administration resulted in 29 completed surveys, while the October administration resulted in 25 completed surveys.

## Comparison across Regions

While we would expect Seminole County to have the lowest percentage of caseworkers intending to leave the position, this county had the highest percentage at both time points (April and October). At the April time point, the differences were substantial, with Seminole leading Orange by 18 percentage points and Treasure Coast by 11 percentage points. These differences were reduced by the second time point, with Seminole leading Orange by 3 percentage points and Treasure Coast by 7 percentage points. However, the regional differences were not statistically significant at either time point. It should be noted that the samples were small and therefore, not necessarily representative of the workforce in these regions. See Table 17 for these details.

**Table 17: Percentage of Caseworker Survey Respondents Intending to Leave in the Next Year**

	Orange	Seminole	Treasure Coast
April Respondents (n = 29) <sup>ns</sup>	36%	54%	43%
October Respondents (n = 24) <sup>ns</sup>	33%	36%	29%

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

## Identification of Correlates

In order to identify correlates of intent to leave, bivariate relationships were assessed using t-tests. An assessment of the relationship between intent to leave and various dimensions of job satisfaction can be found in Tables 18 and 19, with Table 18 focusing on data from Time 1 and Table 19 focusing on data from Time 2. At Time 1, relationships were found between intent to leave and satisfaction with the job in general and satisfaction with supervision. Caseworkers intending to stay had significantly higher satisfaction scores for those two domains (job in general and supervision). No other significant relationships were found at Time 1. Similarly, at Time 2, caseworkers intending to stay had significantly higher satisfaction scores for the domains of job in general and work. For Time 1, the subscale analysis is based on a sample size of 29 case managers, and the Job in General scale analysis is based on a sample size of 28 case managers. For Time 2, the analysis was based on a sample size of 24 for the coworker subscale, 23 for the work, promotion, and supervision subscales, and 22 for the pay subscale and the Job in General Scale.

**Table 18: Relationship between Intent to Leave and Job Satisfaction at Time 1 – Mean (Standard Deviation)**

	Intending to Leave	Intending to Stay
Satisfaction with the Job In General*	11.7 (7.2)	16.4 (7.5)
Satisfaction with Work <sup>ns</sup>	11.7 (5.3)	12.5 (5.2)
Satisfaction with Pay <sup>ns</sup>	5.6 (5.3)	6.7 (6.3)
Satisfaction with Promotion Opportunities <sup>ns</sup>	9.4 (6.3)	8.5 (6.0)
Satisfaction with Supervision*	10.9 (5.8)	14.5 (4.5)
Satisfaction with Coworkers <sup>ns</sup>	15.4 (2.6)	15.2 (3.9)

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

**Table 19: Relationship between Intent to Leave and Job Satisfaction at Time 2 – Mean (Standard Deviation)**

	Intending to Leave	Intending to Stay
Satisfaction with the Job In General***	11.0 (3.7)	18.7 (4.0)
Satisfaction with Work*	11.0 (4.2)	14.9 (2.7)
Satisfaction with Pay <sup>ns</sup>	5.2 (5.1)	5.6 (6.4)
Satisfaction with Promotion Opportunities <sup>ns</sup>	5.6 (5.8)	8.3 (5.8)
Satisfaction with Supervision <sup>ns</sup>	12.6 (6.4)	16.1 (3.9)
Satisfaction with Coworkers <sup>ns</sup>	14.1 (6.0)	15.1 (3.3)

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level. \*\*\* denotes significance at the .001 level.

An assessment of the relationship between intent to leave and caseload levels can be found in Tables 20 and 21. T-tests were used to assess these relationships at both Time 1 and Time 2. No significant relationship was identified between intent to leave and the caseload levels, regardless of the manner in which caseload level was measured. *In other words, the caseload levels of those intending to leave were not significantly higher than the caseload levels of those intending to remain.* These results were found within a sample of 29 case managers at Time 1 and 22 case managers at Time 2.

**Table 20: Relationship between Intent to Leave and Caseload at Time 1 – Mean (Standard Deviation)**

	Intending to Leave	Intending to Stay
Current Caseload Level <sup>ns</sup>	11.4 (6.1)	9.9 (4.3)
In-Home Supervision Caseload <sup>ns</sup>	3.8 (5.1)	3.0 (2.9)
Out-Of-Home Caseload <sup>ns</sup>	7.5 (5.0)	5.8 (4.2)
Number of Children in Caseload <sup>ns</sup>	16.9 (9.8)	18.1 (7.2)
Number of Families in Caseload <sup>ns</sup>	9.6 (6.3)	9.7 (4.4)

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

**Table 21: Relationship Intent to Leave and Caseload at Time 2**

	Intending to Leave	Intending to Stay
Current Caseload Level <sup>ns</sup>	14.0	16.0
In-Home Supervision Caseload <sup>ns</sup>	4.1	2.9
Out-Of-Home Caseload <sup>ns</sup>	10.0	11.6
Number of Children in Caseload <sup>ns</sup>	23.9	24.0
Number of Families in Caseload <sup>ns</sup>	14.7	17.9

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

### 3) Job Satisfaction

Data regarding job satisfaction were collected through surveys of caseworkers. These surveys were administered at two time points: April 2016 and October 2016. The April administration resulted in 29 completed surveys, while the October administration resulted in 25 completed surveys.

#### Comparison to Standard

CHS set a standard of 70 percent for the percentage of caseworkers reporting high levels of job satisfaction, as indicated by job satisfaction scale scores in the upper range. At Time 1, Orange and Seminole counties both met this standard for scores on the Job in General Scale. The Treasure Coast did not meet this standard at Time 1. At Time 2, all three geographical regions met this standard for the Job in General Scale.

This standard for job satisfaction was also assessed through five job satisfaction subscale scores that focused on satisfaction with work, pay, promotion opportunities, supervision, and co-workers. All three geographical regions met the 70 percent standard for the subscales that represented satisfaction with work and co-workers. None of the geographical regions met the 70 percent standard for the subscales representing satisfaction with pay and promotion opportunities. These findings were uniform for both Time 1 and Time 2. The results for the satisfaction with supervision subscale varied across Time 1 and Time 2. At Time 1, only Orange and Seminole Counties met the standard for satisfaction with supervision. At Time 2, all three regions met this standard. See Tables 22 and 23 for further detail.

**Table 22: Percentage of Survey Respondents Scoring in the Upper Range at Time 1**

	Orange	Seminole	Treasure Coast
Job in General Scale	80%	82%	43%
Satisfaction with Work	73%	91%	86%
Satisfaction with Pay	27%	55%	29%
Satisfaction with Promotion Opportunities	55%	64%	29%
Satisfaction with Supervision	91%	91%	57%
Satisfaction with Coworkers	100%	100%	86%

**Table 23: Percentage of Survey Respondents Scoring in the Upper Range at Time 2**

	Orange	Seminole	Treasure Coast
Job in General Scale	83%	90%	86%
Satisfaction with Work	83%	91%	86%
Satisfaction with Pay	17%	27%	33%
Satisfaction with Promotion Opportunities	33%	55%	43%
Satisfaction with Supervision	83%	83%	100%
Satisfaction with Coworkers	100%	92%	100%

#### Comparison across Regions

In order to assess for a relationship between job satisfaction scores and geographical region, ANOVA models were analyzed. The results can be found in Tables 24 and 25, with the first table focusing on Time 1 and the second table focusing on Time 2. Significant relationships were identified at Time 1 between geographical region and job satisfaction scale scores in the following domains: job in general and work. If a lower standard is used for assessing significance, a relationship is also seen between geographical region and satisfaction with supervision. In two of these circumstances (work and supervision), Seminole County had the highest job satisfaction score.

In the other instance (job in general), Orange County had the highest score. At Time 2, no significant relationships were found between geographical region and job satisfaction. For Time 1, the results for the Job in General scale are based on a sample size of 28 case managers, while the results for the subscales are based on a sample size of 29 case managers. For Time 2, the results for the coworker subscale are based on a sample size of 25, the results for the work, promotion and supervision subscales are based on a sample size of 24, and the results for the Job in General scale and the pay subscale are based on a sample size of 23.

**Table 24: Average Job Satisfaction Scores at Time 1 – Mean (Standard Deviation)**

	Orange	Seminole	Treasure Coast
Job in General Scale**	17.4 (5.3)	16.2 (7.0)	7.3 (7.4)
Satisfaction with Work*	11.6 (5.1)	15.0 (4.6)	8.4 (3.9)
Satisfaction with Pay <sup>ns</sup>	4.7 (4.9)	8.9 (6.3)	4.3 (5.4)
Satisfaction with Promotion Opportunities <sup>ns</sup>	9.3 (6.0)	10.8 (5.2)	5.3 (6.6)
Satisfaction with Supervision*	13.6 (4.9)	14.6 (4.3)	9.0 (6.0)
Satisfaction with Coworkers <sup>ns</sup>	16.1 (3.1)	14.8 (3.0)	14.7 (4.3)

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

**Table 25: Average Job Satisfaction Scores at Time 2 – Mean (Standard Deviation)**

	Orange	Seminole	Treasure Coast
Job in General Scale <sup>ns</sup>	17.8 (6.1)	15.5 (5.2)	16.9 (5.2)
Satisfaction with Work <sup>ns</sup>	14.0 (3.9)	14.2 (3.1)	12.6 (4.6)
Satisfaction with Pay <sup>ns</sup>	5.5 (4.0)	5.9 (6.5)	6.2 (7.6)
Satisfaction with Promotion Opportunities <sup>ns</sup>	7.0 (3.0)	9.9 (6.6)	5.3 (6.8)
Satisfaction with Supervision*	16.0 (4.0)	13.3 (6.0)	17.2 (1.3)
Satisfaction with Coworkers <sup>ns</sup>	17.2 (2.0)	14.7 (5.1)	13.0 (3.1)

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

## Identification of Correlates

In some situations, satisfaction scores at Time 1 were significantly related to caseload levels. The number of children on the caseload was negatively related to satisfaction with promotion opportunities ( $p < .05$ ). If a less stringent standard is used for significance ( $p < .10$ ), the total current caseload and the number of families on the caseload can also be considered as significant, negative correlates of satisfaction with promotion opportunities. The number of out-of-home cases on the caseload was significantly and negatively associated with general job satisfaction ( $p < .05$ ). The number of families on the caseload was also negatively associated with general job satisfaction, though the significance level was lower than the traditional standard ( $p < .10$ ). Overall, these statistics indicate that the higher the caseload, the lower the satisfaction of caseworkers. The one exception to this can be found in the satisfaction with pay subscale. *The number of in-home supervision cases on the caseload was significantly and positively related to satisfaction with pay.*

See Table 26 for details regarding these correlations which were calculated using a sample of 28 case managers for the analysis of the Job in General Scale and 29 case managers for the subscale analysis.

Similar correlations were found at Time 2. Satisfaction with promotion opportunities was significantly and negatively related to the total current caseload, the number of out-of-home cases on the caseload, the number of children on the caseload, and the number of families on the caseload ( $p < .05$ ). Satisfaction with pay was significantly and negatively related to the number of children on the caseload ( $p < .05$ ). If using a lower standard for significance, satisfaction with work can be seen as significantly and negatively related to the number of in-home cases on the caseload ( $p < .10$ ), and satisfaction with coworkers can be seen as significantly and negatively related to the total current caseload ( $p < .10$ ). Sample size varied across these calculations, with a sample size of 23 case managers for the coworker subscale, 22 for the work, promotion, and supervision subscales, and 21 for the pay subscale and the Job in General scale. See Table 27 for details regarding these correlations.

**Table 26:** Correlations between Job Satisfaction Scores at Time 1 and Caseload

	Current Caseload	In-Home Caseload	Out-of-Home Caseload	Families on Caseload	Children on Caseload
Job in General Scale	-.306	.009	<b>-.469*</b>	-.189	<b>-.320*</b>
Satisfaction with Work	.077	.153	-.020	-.074	-.094
Satisfaction with Pay	.133	<b>.388*</b>	-.141	-.176	.026
Satisfaction with Promotion Opportunities	<b>-.313*</b>	.025	-.262	<b>-.373*</b>	<b>-.322*</b>
Satisfaction with Supervision	-.159	-.015	-.172	-.118	-.120
Satisfaction with Coworkers	-.047	-.124	.053	.082	.175

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

**Table 27:** Correlations between Job Satisfaction Scores at Time 2 and Caseload

	Current Caseload	In-Home Caseload	Out-of-Home Caseload	Families on Caseload	Children on Caseload
Job in General Scale	.054	-.295	-.037	-.021	-.172
Satisfaction with Work	.090	<b>-.362*</b>	.026	.087	-.075
Satisfaction with Pay	.000	-.172	-.118	-.098	<b>-.494*</b>
Satisfaction with Promotion Opportunities	<b>-.432*</b>	.191	<b>-.538*</b>	<b>-.486*</b>	<b>-.565**</b>
Satisfaction with Supervision	.152	.352	.130	-.048	-.274
Satisfaction with Coworkers	<b>-.384*</b>	.190	-.282	-.298	-.170

Note: <sup>ns</sup> denotes no significant relationship. \* denotes significance at the .10 level. \* denotes significance at the .05 level. \*\* denotes significance at the .01 level.

## 4) Caseworker Perceptions

This section presents the results of three focus groups with caseworkers from Seminole County, which is the location that implemented the full ChildWIN model. The focus groups contained approximately 25 percent of the caseworkers from this region. Caseworkers discussed the effects of the career ladder, reduced caseloads, and Solution-Based Casework training on workforce stability.

### Career Ladder

Caseworkers expressed positive views of the career ladder. Their comments reflected positive impacts both for themselves and their colleagues. One case manager said that the raises within the career ladder “made a big difference in [her] life.” Multiple focus group participants believed that the career ladder had a positive impact on morale and turnover.

Four issues remain that may affect the magnitude of the positive impacts. Some caseworkers expressed a desire to know more about long-term career possibilities within the agency, since they were unsure of the career path beyond case management. Participants also reported that the starting salary of the career ladder is too low. They identified an issue with one of the requirements linked to the career ladder. The standard of a 3.5 score on the employee evaluation is viewed as a nearly impossible one to meet, because of informal policy that limits the number of employees who can receive this high score. Some caseworkers have experienced lengthy delays in obtaining their evaluations, which delays the career ladder progression.

Caseworker comments that demonstrate these conclusions are listed below.

### Positive Effects

“It has really made a big difference in my life. I think it’s great for an incentive. As we all know, social workers are underpaid. So, I think it’s really great that you have an incentive to keep people here. People tend to move on, so they can get increases and

move up. If you love the job like I do and a lot of people here do and you want to stay, there were no incentives to keep you here.”

“Well, I think it has improved the employee morale. Because I’ve been here for [over two] years. So, in the midst of that time frame, you see a lot of turnaround with case managers, but since the career ladder has been implemented, it’s been kind of steady. So, I think it has improved the morale. It gives case managers something to look forward to, a goal to accomplish.”

“Most people...who have considered quitting, have decided, ‘oh, but I’m so close to the next step, like I’ll just stick around.’ So, most people just stick around. ‘I want to make it to this level.’ They know how long it will take to get there.”

“Since the career ladder has been implemented, morale has definitely changed. And you can definitely tell by the Dependency Care Managers on the floor and everything. It’s definitely a different place.”

“From the very beginning, when a trainee is in training, I think that [the ladder] sets up an expectation for them, so that they’re already looking forward to something. They already have a reason to want to stay in addition to the main reason why they even signed up for the job. I think that it definitely improves.”

“I feel like over time, you do want to see a change in income to show the work that you’re putting into it. Some people, they feel like if I don’t make a certain amount of money over time, then they probably won’t end up staying.”

### Issues with Implementation

“They say that you need to get certified because it will open so many doors. I don’t have a clue what door they’re talking about. Where do you go?...I think a lot of people are like ‘Well, I’m going to get my Master’s to go do a different job’ because you don’t know what you can even do in this job.”

“There are some people who say ‘I’d like to be a supervisor’ or something like that. Some people might want to do that, but there might be other options. You see a lot of people in the building who do different things, but how do you get to that? How did they get there?”

“I know a lot of people who I came out of training with still haven’t even gotten [their evaluation].”

“Some people have noticed that there’s a requirement that your evaluation has to be a 3.5, but in the past, our supervisors have told us that they’re told not to give us above a score of 3. So, it’s kind of like how are we supposed to get a 3.5 if we can’t get above a score of 3. So, I think that has disgruntled some people.”

“I think the career ladder is great. The principle itself. But for starting out, for a DCM starting out, I don’t feel that it’s significant enough. The amount. Because we are underpaid. With the various tasks we are given and change daily, it’s hard to keep up with everything. Sometimes, because of the way things are going, we’re working on our own time, so to speak. As far as retention rate, it’s either you love it or you don’t. So, I don’t think the money/the ladder would play a part in that. Because there are those of us that came in on the lower end of that scale and stayed because we love the kids.”

“The starting salary is ridiculous. It really is for this job. It should be a lot more.”

“We have BA’s or BS’s. Or we’re in the middle of Master’s. Or we have our Master’s. So, to start out with what we are. That’s not - it’s not a good starting.”

### Reduced Caseloads

Caseworkers reported that reduced caseloads have had many positive impacts for employees. The reduction in caseloads eased their stress and allowed them to spend more time with their own families. They also found that the reduction made them more effective at work, which in turn strengthened their sense of accomplishment and commitment to the agency. One caseworker stated, “I know that the company is trying to work with us and make sure we have a life. They care about our general well-being.” As a result of these positive impacts, several participants believed that the caseload reduction would improve employee retention. On the other hand, the caseworkers said that there are some employees who will leave regardless of the reduced caseload because the work is not a good fit for the employee.

Though the caseworkers had many positive perceptions of the reduced caseload, they mentioned two issues that reduce the magnitude of the positive impact. They found that when the caseload decreased, the agency added other items to their workload that took up some of the time saved by the reduced caseload. They also believed that the intensity of the cases is an important consideration and suggested weighting of high-risk cases in the calculation of one’s caseload.

Caseworker comments that demonstrate these conclusions are listed below.

### Positive Effects

“If we don’t have the high caseload and we have the opportunity to get to know the families, and to really engage them with services and move the case forward, it makes our lives easier because we’re not stressed – feeling that we’re letting someone down. We feel like we’re accomplishing something. It makes them feel better because they feel like they are moving forward as well. I believe it makes a huge difference.”

“In a small part, reduced caseloads would help because we are overwhelmed. For those who love it and stick with it, it would help us having the reduced caseload because maybe we would be less overwhelmed.”

“I think there’s also the fact that when you have the 40 kids on the caseload, you kind of feel like you’re not helping anyone. You feel – why am I doing this – this is pointless – I’m not really helping anyone - I’m just seeing them and checking them off a list. But with the lower caseload, you get to interact with them more. You get to be like a case manager, a social worker. You’re interacting with them. You’re building relationships. You’re encouraging them. You’re building up their self-esteem. So, definitely the lower caseloads give the employees themselves more of a sense of ‘I’m actually making a difference’. So they are happier in the workplace.”

“Also, I feel, as far as the reduced caseloads, as an employee, you begin to feel as if - I have time to not only invest in these families but my family as well. So, that definitely helps you to say, well, you know what, it’s manageable at work, as well as manageable in my own personal life. So, it doesn’t seem as if you have to give on one end or the other. So, definitely, with the caseloads coming down, you can definitely tell that has helped, I believe, with actually keeping employees as well.”

“People are just more willing to stick around, especially people who have been here a while and they’ve experienced the 40 kid caseloads. They’re more likely to stick around, because they’re like ‘It’s been bad. It’s better now.’ I know that the company is trying to work with us and make sure that we can have a life. They care about our general well-being. It makes people stick around, cause they’re like ‘It’s getting better. It’s not as bad as it used to be. It’s getting better. If I can do it with 40 kids, I can do it with 20 kids.”

“It definitely helps with employee retention. Like I was saying with the whole aspect of the caseloads being lowered, allowing you to have your own personal life. Because I mean that’s a big factor as far as anyone staying in a job is what goes on – do you have time to address what is going on in your own personal life? I feel like with the caseloads coming down and the fact that we’re able to keep employees instead of having that high turnover that was there once we had the 40 kid caseloads. It definitely is helping to actually have employee retention. I can remember and recall, when people were coming out of training and the whole training group would be gone. They wouldn’t stay. It’s definitely turned around.”

#### **No Effect**

“I do not believe that reduced caseloads will help with employee morale. Because I still feel you either love it or you don’t. I feel like, no matter how many cases you have, you’re doing the same thing. Some people can’t handle it and some people can. And then there’s a little part where you do love the job, but you’re just overwhelmed. So, yes, I would love to have a reduced caseload.”

#### **Issues with Implementation**

The issues with implementation are the same as those found in the Child Safety section.

#### **Solution-Based Casework Training**

Focus group participants identified both positive and negative impacts of the training for employees. The negative impacts were primarily related to the stress of changing to a new methodology. The positive impacts were related to an excitement of being able to return to their original goal for the job – to invest in families and improve children’s lives. The training reminded them of this original goal and gave them hope that their work could yield positive results.

Caseworker comments that demonstrate these conclusions are listed below.

#### **Positive Effects**

“My impressions of it was that it was actual social work. That you were doing what I think a lot of people when they come into dependency think they are going to be doing. And you come in here thinking you’re going to be engaging these families, figuring out what’s the issue, what brought them into care, and what we’re going to do to assist them so this situation doesn’t occur again. And I feel that this brought it all back in perspective, put it back in our forefront, especially after coming from all these turnovers and being in crisis mode, it just puts it back in the forefront. So, the training was like, okay, so with everything changing, maybe I can go back to thinking what I originally thought I would be doing when I came into this.”

#### **Negative Effects**

“There’s a lot of things that we have to get used to and if you’re – you know you’re used to doing it one way and now all of a sudden you’re just thrown into it – well, you need to start doing this now. It becomes difficult.”

“Nobody likes change. And that’s the biggest thing. We’ve been doing it like this forever and now we’ve got to change the way we’re thinking.”

#### **Discussion**

*The results regarding ChildWIN’s effects on child safety were mixed.* Quantitatively, there is little evidence that ChildWIN affected child safety. However, the qualitative results point to a possible positive impact. Caseworkers said that the reduced caseload levels allowed them to invest more time in investigating their suspicions regarding child maltreatment. Specifically, they used time savings to make additional surprise visits or to extend the length of their visits in situations where they suspected abuse. It should be noted that while this may improve safety through investigation and intervention, reabuse rates may rise. This line of thought aligns with the out-of-home safety statistics for Seminole County, where the reduced caseloads were implemented. This county had the highest reabuse rate for children in out-of-home care. While this may appear as a lower level of safety, it may instead reflect a greater investment of caseworkers in the identification of and response to maltreatment.

*The results regarding ChildWIN’s effects on child permanency were contradictory.* Seminole County had the lowest permanency rates in the study regardless of the measure used (achievement of permanent placement following in-home supervision, achievement of permanent placement following out-of-home care, and stability while in out-of-home care). On the other hand, Seminole County caseworkers believed that the reduced caseloads and the Solution-Based Casework training would

advance permanency. They found that they were better able to serve families using the time saved from reduced caseloads and the tools from the Solution-Based Casework training. The possibility remains that these innovations will eventually produce positive change at a level substantial enough to move the permanency statistics of Seminole County. The caseworkers provided suggestions for maximizing the success of reduced caseloads and the training. These suggestions may be necessary for optimizing the ChildWIN initiative. Further, it should be noted that we encountered multiple focus group attendees who had not yet attended the training. If a substantial percentage of employees had not yet completed the training, the effect of the trainings may not be adequately captured in the analysis.

*The majority of the evidence, both quantitative and qualitative, pointed to a positive impact of ChildWIN on workforce stability. The job satisfaction scores, particularly those that measured satisfaction in April 2016, were highest for Seminole County in most of the categories examined. Further, the qualitative results included many positive comments from caseworkers regarding the effects of the career ladder and reduced caseloads on morale, job satisfaction, and turnover. Despite this, the turnover rates for Seminole County were in the mid-range between Orange County and the Treasure Coast. However, it's possible that this turnover rate represents progress over past years. Caseworkers said that they noticed a decline in turnover since the initiative was implemented.*

*Overall, the study points to a strong possibility that ChildWIN is improving workforce stability and an unproven possibility that ChildWIN can improve child safety and child permanency. To further test the effect of the initiative on safety and permanency, caseworkers' suggestions for overcoming implementation problems would need to be carried out and additional measures for safety and permanency would need to be included. These two tasks would increase the chance of adequately capturing the effect and forming firm conclusions regarding the initiative.*

## Policy Recommendations

Since several portions of the study support the relevance of low caseloads for both case outcomes and case manager workforce stability, local, regional, and state organizations (local agencies, CBCs, and DCF) should ensure that case managers have a caseload size that allows their complete and adequate attention to each child victim and their family. Further, focus group discussions pointed to the importance of weighting high-risk cases in the calculation of caseload levels.

While the case managers have positive impressions of the Solution-Based Casework training, the blocked nature of the training and the lack of buy-in from the court system served as barriers to the full implementation of the model. In order to maximize the full benefit of the training, the agency should work to create greater understanding of the model by the court personnel. In addition, the training should be divided into smaller segments. This will allow the case managers to more readily complete the training, since case demands often prevent them from attending 2 ½ straight days of training.

Though parent services were not the primary focus of the study, this issue was emphasized by case managers as an important concern. Since lack of access to services in the parents' geographical area was identified in focus group discussions as a barrier to achieving positive case outcomes for children, the Florida Legislature should invest additional funding in services (i.e., substance abuse and mental health) that support case plans.