Post-Reunification Support Program Evaluation Results

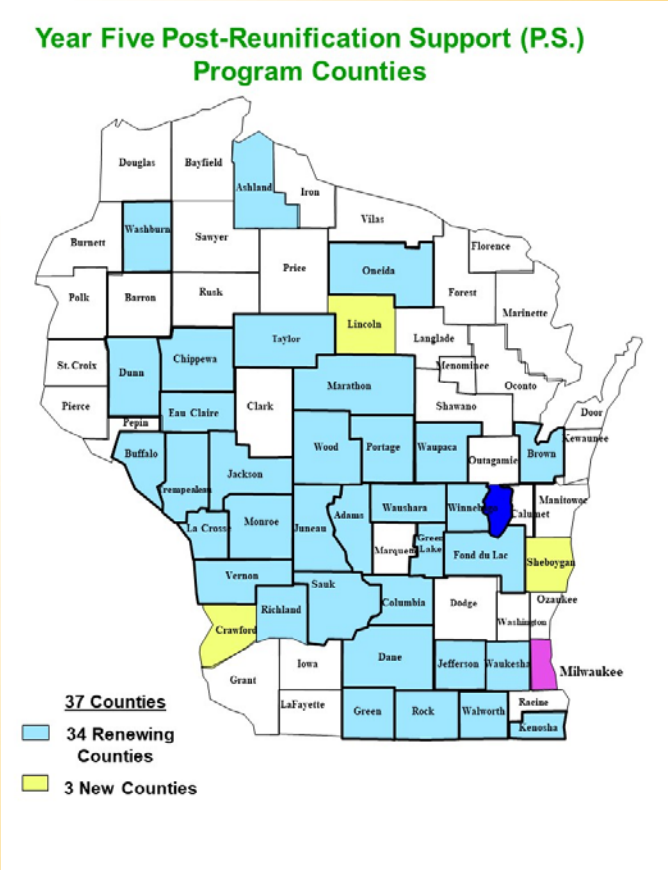
Wisconsin Department of Children and Families

Welcome!

- Agenda
  - Origins of the P.S. Program
  - Evaluation Methods
  - Final Evaluation Results
  - Key Areas for Future Program and Policy Development

P. S. Program History

- 2012: DCF was approved to operate a demonstration project
- 2014: P. S. Program began in 35 counties
- 2018: Enrollment stopped for new families
  - Counties receive a monthly case rate for up to 12 months
- 2019: Final Evaluation and P.S. Program draws to close



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UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN
SCHOOL OF SOCIAL WORK

Highlights from the Wisconsin Title IV-E Waiver Final Evaluation Report

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The P.S. Program Goals

1. Promote family stability and adjustment following a child's reunification to the family home.
2. Empower parents to strengthen caregiver, problem-solving, and coping skills.
3. Reduce the likelihood of maltreatment recurrence and re-entry into out of home care.
4. Improve the short- and long-term well-being of the child and his or her family members.

The P.S. Program Components

1. Pre-enrollment casework activities
2. Family engagement and enrollment in the program
3. Assessment and case planning
4. Case management
5. Service provision to build formal and informal supports

The P.S. Program Evaluation

1. Implementation evaluation – describe *how* the program was implemented
2. Fidelity assessment – describe the components of the program "in the field"
3. Outcome evaluation – compared the short-term, intermediate, and long-term outcomes of reunified children and families who received P.S. Program services to those of similar families in counties that did not implement the P.S. Program

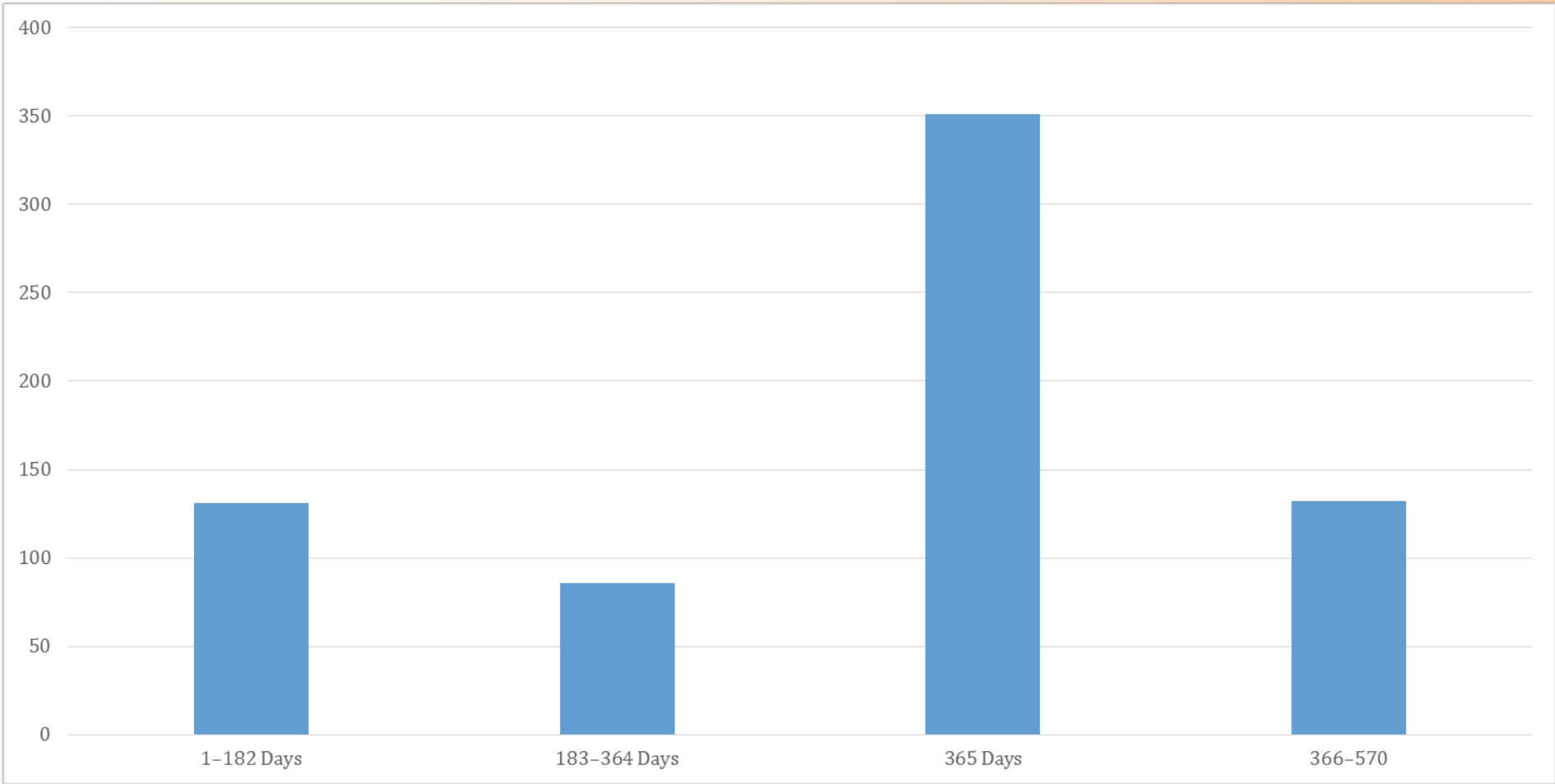
Evaluation Data Sources

1. eWiSACWIS data (maltreatment, re-entry)
2. DPI data (school attendance, disciplinary reports)
3. DHS data (dental check-ups, emergency room visits, psychiatric hospitalizations, psychotropic medications)
4. Monthly Family Service Report (MFSR; case management hours, services received by each family member)
5. P.S. Program county site visits (training, supervision, communication, leadership, implementation barriers)
6. Post-reunification services county survey
7. Parent survey (engagement, parent stress, family economic resources, social support, family functioning, child behavior)

Results from the Fidelity Assessment

The purpose of a fidelity assessment is to determine if an intervention is being practiced in the field in adherence with the specifications of the practice model. For evidence-based interventions with well-defined practice models, fidelity assessment gathers information on the ways in which program components are changed or adapted during the implementation process. For programs with more flexible practice requirements, such as the P.S. Program, a fidelity assessment documents and describes the ways in which practitioners implement the practice components.

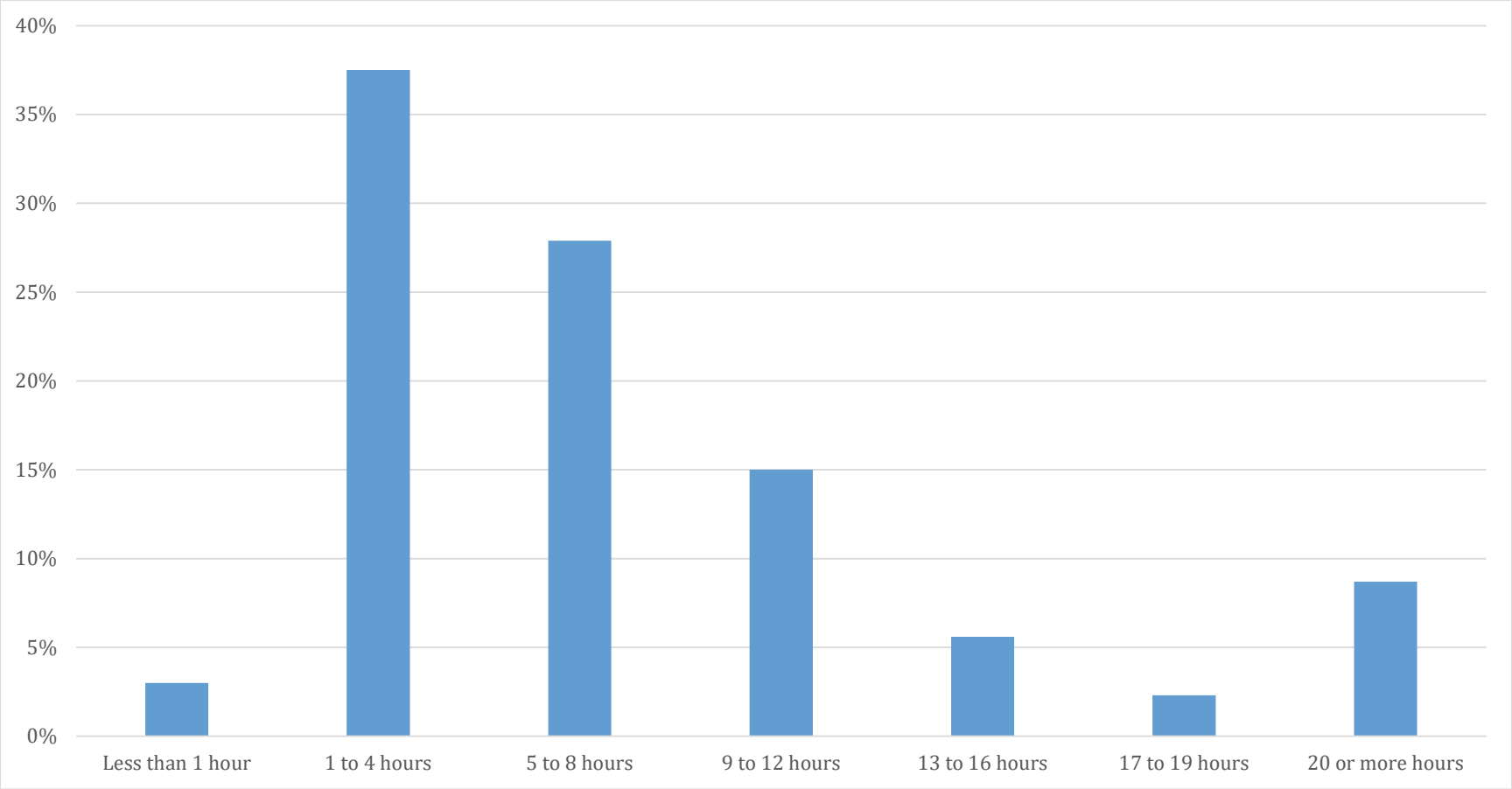
Length of Enrollment in P.S. Program



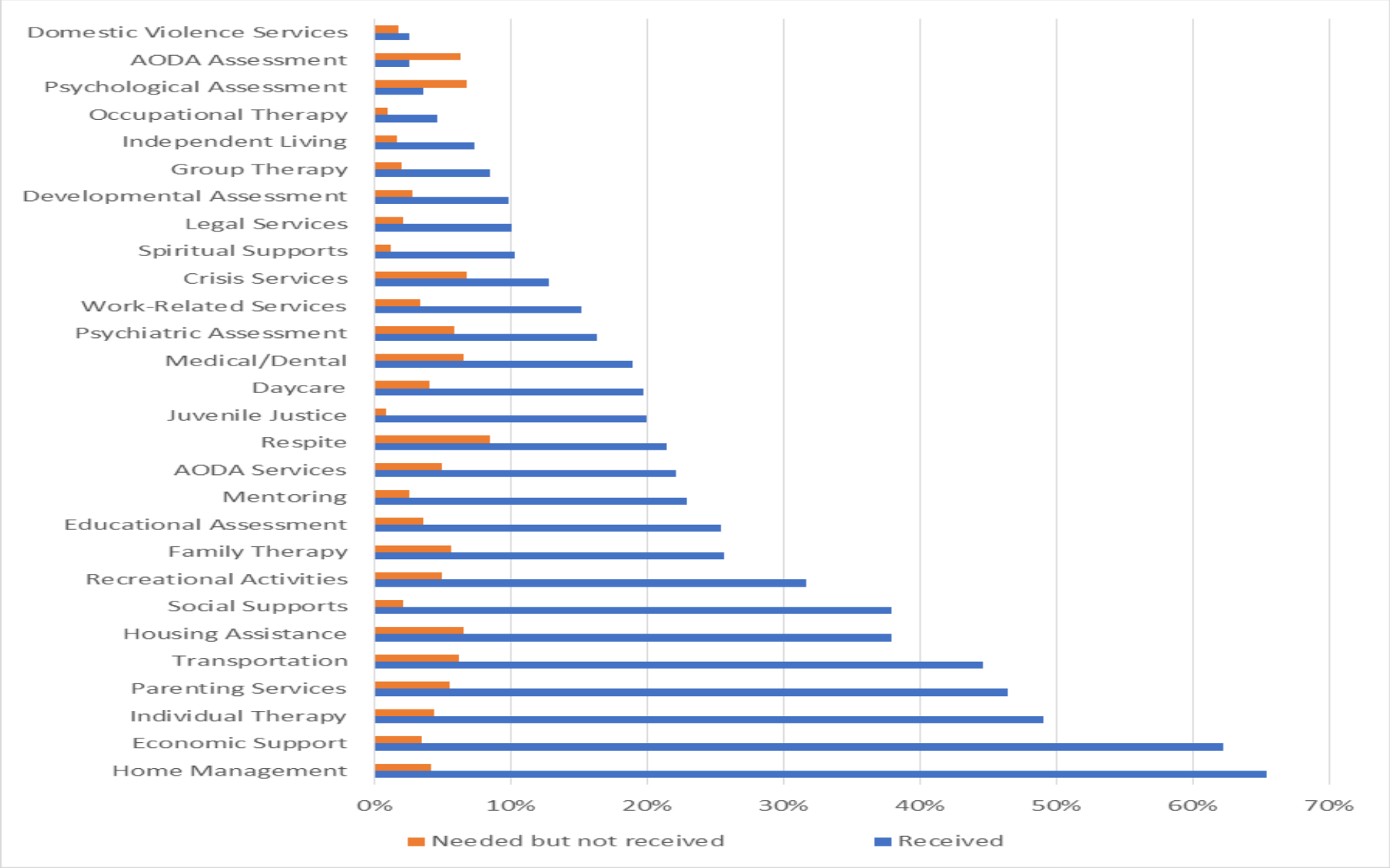
Assessment and Case Planning

	Completed on Time	Completed Later	Not Completed
Initial CANS assessment	74.8%	15.3%	9.9%
Second CANS assessment	60.6%	15.0%	24.5%
Final CANS assessment	38.7%	4.9%	56.4%
Initial case plan	65.9%	8.9%	25.2%
Middle case plan	50.2%	3.7%	46.2%

Case Management



Service Provision



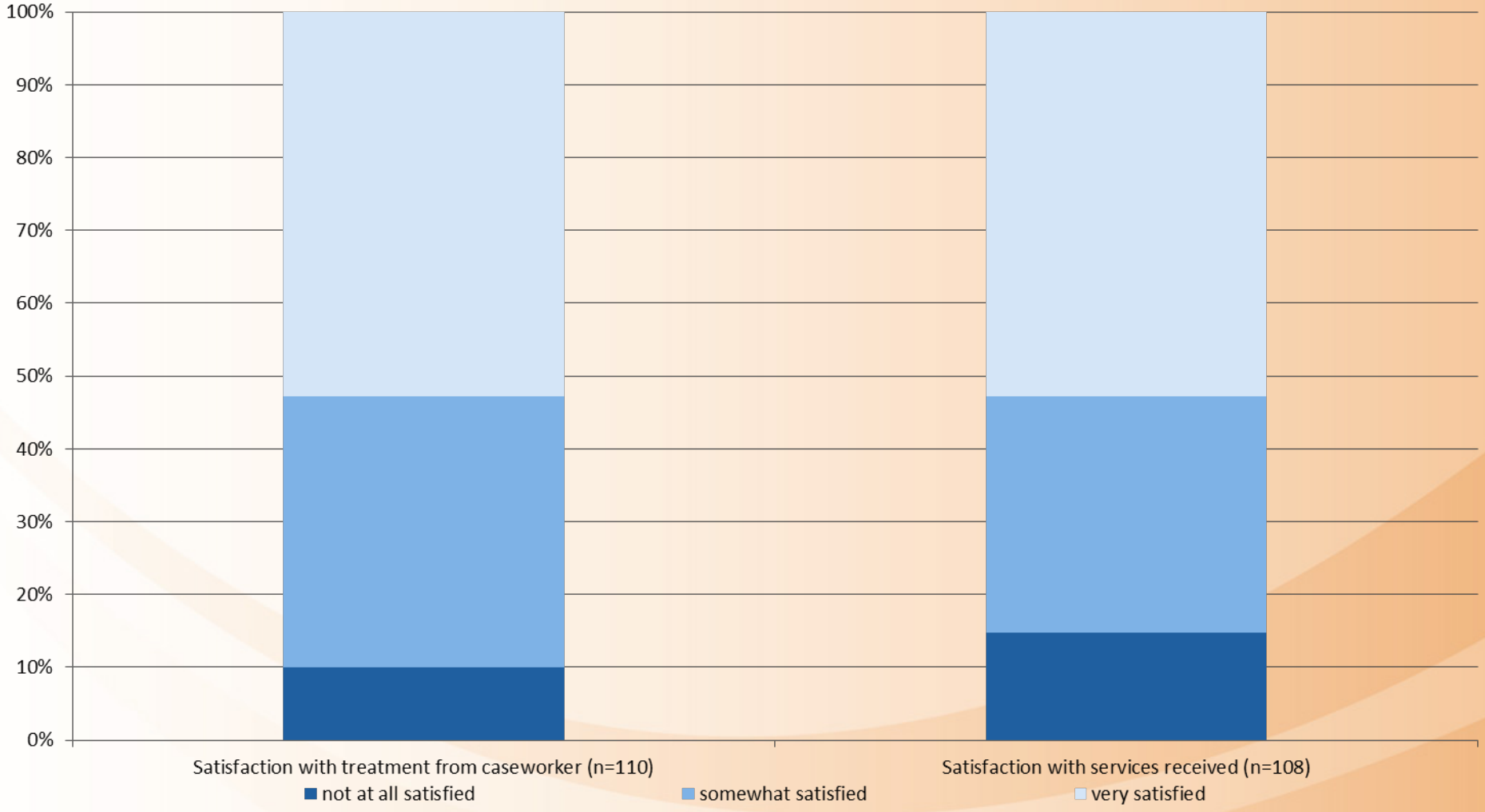
Service Provision

- The MFSR collected data on who received services. Some services were provided to both children and caregivers at same rate: individual therapy, family therapy, transportation, social support, psych assessment, crisis services, legal service.
- Some services were provided by caseworkers (homer management, economic supports, transportation, housing assistance; others were provided by licensed/certified professionals (medical/dental, mental health, legal services).

MFSR Service Provision Summary

	Per Month (N = 6,581 families x months)			Per Family (N = 767 families)		
	Number of services received	Number of services needed but not received	% of needed services received	Number of services received at least once	Number of services needed but not received	% of needed services received at least once
Mean	6.54	0.66	92.0%	11.69	2.44	86.0%
Median	6	0	100.0%	12	1	89.0%
Minimum	0	0	0.0%	0	0	0.0%
Maximum	23	24	100.0%	28	26	100.0%

Parent Satisfaction with Services



Service Provision in non-P.S. Program counties

- CFRC created an online survey to measure post-reunification service provision in each county except for Milwaukee
- Survey responses were received from 66 of 71 counties (31 non-P.S. Program counties and 35 in the P.S. Program)
- Every county except one reported providing some services to families following reunification
- County managers in non-PS counties reported that on average, 92.7% of families receive services for an average of 8 months after reunification

Service Provision in non-P.S. Program counties

- Caseworkers visited families monthly (21 counties) or weekly (7 counties)
- Caseworkers spend an average of 3.5 hours with families each month
- Responses between PS and non-PS counties were compared; the two groups did not differ in % of families receiving services, # of months receiving services, # hours caseworker contact per month, or frequency of most services.
- P.S. counties more likely to provide housing assistance and were more likely to use flexible funds

Outcome Evaluation

The outcome evaluation of the P.S. Program compares the short-term, intermediate, and long-term outcomes of reunified children and families enrolled in the P.S. Program (the treatment group) to those of similar children and families in counties that have not implemented the P.S. Program (the comparison group).

Propensity score matching (PSM) was used to create two statistically equivalent groups of families that did and did not receive the P.S. Program.

Short-term Outcomes

- Parent stress (Perceived Stress Scale)
- Parent coping skills (Brief COPE scale)
- Parent social support (Protective Factors Survey – emotional and concrete support subscales)
- There were no statistically significant differences between the two groups on these measures at 12 months post-reunification.

Intermediate Outcomes

- Family functioning (Protective Factors Survey – family functioning subscale)
- Family economic resources (Family Resource Scale)
- Child behavior problems (Behavior Problem Index, CANS youth behavioral needs)
- Child adjustment to trauma (CANS)
- There were no statistically significant differences between the two groups on these measures at 12 months post-reunification.

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Child Welfare Outcomes

	P.S. Program (n=554)		Non-P.S. Program (n=462)	
	N	%	N	%
CPS re-referral	64	11.6%	53	11.5%
Substantiated maltreatment	19	3.4%	19	4.1%
Re-entry into OHC	122	22.0%	106	22.9%

Educational Outcomes

- School attendance
- Disciplinary reports
- Grade repetition
- Student achievement scores
- There were no statistically significant differences between the two groups on these measures

Health and Mental Health Outcomes

- Preventive dental visits
- Use of psychotropic medication
- At least one day in psychiatric hospital
- Number of days in psychiatric hospital
- Emergency department visits
- 288 of the 598 families in the intervention group had a child that had at least one preventive dental visit during the 12-month post-reunification (48.2%) compared to 192 of the 500 comparison group families (38.4%). This difference was statistically significant at the $p < .001$ level.

Questions and Discussion

Key Highlights From the Evaluation

- Robust Reunification Services Across the State
- Flexible Funding
- Importance of the Child Welfare Workforce

Wisconsin Department of Children and Families

Areas to Sustain Moving Forward

- Continuation of Flexible Funding
  - Targeted Safety Support Funds
- Family Engagement
  - Parents Supporting Parents:

  A Wisconsin Parent Partner Model
- Building upon Existing Service Array
  - Prevention Scan

ANY
questions?

Check out the DCF Website for more information on the P.S. Program

HTTPS://DCF.WISCONSIN.GOV/PSPROGRAM

Evaluation Results Option 2: 6/3 from 2-3

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