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National *Family* Preservation Network

Safe children. Strong families.

An Effective Child Welfare System

&

Evidence-Based Practice for the Child Welfare System

Introduction

The National Family Preservation Network (NFPN) was established in 1992 to serve as the primary national voice for the preservation of families through Intensive Family Preservation Services (IFPS). Since its inception, NFPN has advocated incorporating IFPS into the continuum of child welfare services available to families. In recent years NFPN has been at the forefront of promoting intensive reunification services and father involvement, as well as IFPS, in the child welfare system.

All of the models of service that NFPN promotes are built on research. Public child welfare systems are increasingly called upon to institute research-based or evidence-based practice (EBP) but must do so within the constraints of high caseloads, high turnover of caseworkers, a nationwide federal audit which no state child welfare agency has passed, highly publicized child deaths, and intense scrutiny by public officials and the media. Having to constantly react and respond leaves child welfare administrators with little time to reflect and to create a proactive and truly effective child welfare system.

NFPN offers tools, training, assistance, and resources to the child welfare system. As part of its advocacy role in preserving families, NFPN decided to study effective agencies and evidence-based practice in the child welfare system. In this monograph, NFPN describes one of the most effective child welfare agencies in the United States and presents 21 programs that have been found effective, or show promise of being effective, in the child welfare system.

The description of an effective agency, the Allegheny County Department of Human Services in Pittsburgh, Pennsylvania, is presented here as a guide that may be adapted for use in other agencies. It is an overview, not a comprehensive procedures manual. Some of the system's components are much simpler and easier to implement than others. NFPN's desire is for agencies to continually move their child welfare systems toward improved outcomes for children and families. The best outcome is for children to remain with their parents, whenever it is safe to do so, and this monograph is one way that NFPN can express its commitment and support to that outcome and to all of those involved in the child welfare system.

Priscilla Martens
Executive Director
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Acknowledgements

Part 1: Allegheny County's Effective Child Welfare System

What makes it effective?

All child welfare agencies do a good job in some areas. But, to be truly effective, a child welfare agency must excel at strengthening families and avoiding unnecessary out of home placements.

The Allegheny County Department of Human Services Agency in Pittsburgh, Penn., is a model of excellence for the child welfare system. By comparing key measures of effectiveness with the average of all child welfare systems, Allegheny County surpasses the average, often by a factor of two or three times. The following chart compares Allegheny County with the national average on some of the measures tracked by the federal government:

Measure of Effectiveness	National Average	Allegheny County
Reduction in foster care placements	8% (1998–2003)	24% (1996–2005)
Children reunified with family	55% (FY 2003)	79% (2004)
Children placed with relatives	23% (FY 2003)	62% (2005)
Child deaths from abuse/neglect	2.1/100,000 (2003–2004)	0 (2003–2006)

While it is difficult to find data that correspond to exactly the same time frame in order to compare Allegheny County with national averages, it is apparent that Allegheny County outperforms the national average in all the categories listed. Allegheny County has reduced its foster care placements, there have been no child deaths from abuse or neglect in the past three years, families stay together or are reunited in less than one year (335 days), and placements, when necessary, are most frequently made with other family members. In order to find out the underlying reasons why this is so, we need to look at the pieces that form Allegheny County's child welfare system, beginning with philosophy.

The Philosophy of an Effective Child Welfare System

Within minutes of meeting the top administrators in Allegheny County's human services and child welfare system, a visitor will begin

to hear the philosophy of this system. "Treat people the way you want to be treated." "Don't view child welfare as just a job—go the extra mile." "Try to keep kids in the home whenever possible." "Involve the community—create opportunities for partnerships." "Be visible in the community as a friend, not a foe." None of this is new to child welfare systems, but later on a visitor hears stronger language: "Foster care is stranger care." "Adoption is a failure." Yet, administrators are not being derogatory towards foster or adoptive parents but are simply reinforcing the system's foundation. What exactly is that foundation?

Keeping children safely in the home whenever possible is the foundation and underlying philosophy of Allegheny County's child welfare system. In order to create this shared philosophy, everyone who works in the system needs to learn and understand the language. Thus, it's imperative that everyone speaks in a way that makes the goal of keeping children in the home obvious and achievable. No one wants to fail or to see children raised by strangers, so language itself becomes an incentive to direct efforts and resources to keeping families safely together.

To adhere to any philosophy over time requires constant maintenance, and begins with intensive training. The state of Pennsylvania requires 120 hours of training for new caseworkers. Family empowerment models and strength-based approaches are ingrained in caseworkers throughout this training in Allegheny County. Senior caseworkers (Caseworker III) mentor trainees through job shadowing, thus sharing both philosophy and best practice. Caseworkers who don't share the philosophy are weeded out in the six months probationary period.

Allegheny County's child welfare system demonstrates that effective child welfare administrators do not straddle the fence of keeping families together vs. placing children in substitute care. Trying to do so likely means falling off on the side of substitute care. Fence straddling also leaves caseworkers confused, frustrated, overwhelmed, and not knowing when to place or when not to place. Keeping children out of substitute care whenever safely possible begins with a conviction, not a preference, to maintain the family. This conviction then permeates the entire child welfare agency, resulting in a united culture focused on doing the work that is necessary to keep families together.

Implementing an ironclad philosophy requires a system to direct funds to support that philosophy, as has been done in Allegheny County.

Budgeting for an Effective Child Welfare System

Allegheny County has 1.3 million people and is the 29th most populous county (out of 3,100) in the United States. The child welfare system in Pennsylvania is state supervised and county administered. The county has an integrated human services agency offering all services except for TAN-F. This integrated system permits centralized control over 84 funding streams.

The Department of Human Services (DHS) has an annual budget of about $850 million with the child welfare system, the Office of Children, Youth, and Families, receiving $165 million annually. The DHS director, Marc Cherna, makes all fiscal decisions. Central control over funding and decision-making allows the agency to consider an individual's or family's needs first and then design a program or service to meet those needs.

The private sector also contributes: foundations have assisted in funding a data warehouse that contains data on families served and a description of services provided by the child welfare agency along with information on other county and contracted services including housing, public welfare, and family support centers. Foundation funds were also used to hire additional court hearing officers in order to get rid of the backlog of cases and to hold hearings on child welfare cases more frequently. Perhaps most telling, during his decade of tenure, the agency director has been aggressive about investing in the front of the system, using dollars freed up by reducing placements.

Control over the budget is key to Allegheny County's successful philosophy: just over 50% of the child welfare budget is devoted to prevention and in-home services. Spending at the front end of the system to keep families intact prevents the trauma associated with removal, reduces the need for more costly out-of-home placements, permits a choice of placements when an out-of-home placement is necessary, and holds caseloads to a manageable level.

The effort begins with preventing families from entering the system.

Prevention

Allegheny County invests heavily in prevention with almost one-fifth of the child welfare budget dedicated to that. The County contracts with about 170 other human services agencies. The following are some examples of these services:

The Department of Human Services funds 27 of the 33 Family Support Centers in the county. The agency funds First Steps at four

locations. First Steps is a voluntary program for new mothers that provides a home visitor for moms of children ages birth to five years. The agency also funds after-school and summer programs for high-risk children in public housing communities. It spearheaded a mentoring program, P.O.W.E.R, for early substance abuse identification and rehabilitation for pregnant women and mothers. Women are mentored for 12–18 months with wraparound services provided for the first 60 days. The success rate for women completing the program is 90%.

One unique prevention program funded by the county, called Mother to Son, is run by a church. Boys ages 9–13 have activity groups and "manhood training." Meanwhile, the single mothers of these boys participate in support groups to receive assistance with raising boys and with personal issues.

Another county funded program, Gwen's Girls, is a program for at-risk girls ages 8–18. It offers after-school programs, peer groups, and mother-daughter programs. It also includes a mentoring component to match at-risk girls with women who guide and support the girls in finding and reaching their goals.

Allegheny County enlists the entire community to assist with prevention efforts. Approximately $500,000 is raised annually to provide gifts to children receiving any services through the county. A music festival provides a venue to solicit funding to provide art, music or sports lessons, memberships to museums, and travel money for children. Project Prom helps high school seniors by acquiring prom gowns for girls and tuxedos for boys.

By taking the lead in establishing prevention services and putting a significant amount of its own funds into prevention, Allegheny County's child welfare agency ensures that high-quality preventive services are available and leverages community support and funding to provide even more preventive services. Keeping families out of the system is the first goal. We look next at Allegheny County's approach to the families who enter the system.

In-Home Services

Allegheny County investigates over 10,600 abuse/neglect complaints annually. Approximately one-third of the families, consisting of 8,500 children, receive services. The focus on families receiving services is "family unification" or keeping the family together. The agency spends over one-third of its budget on in-home services.

Following investigation of a complaint, a determination is made about the level of intervention needed to keep the family safely together. A crisis worker can provide or arrange for 12–24 hours of service weekly for up to 30 days. A staffing is then held to determine the level of service needed for an additional 60 days. In-home services are generally provided for a maximum of 90 days with up to 15 hours of aftercare available for an additional six months. The county allocates $500 per family for concrete needs.

In addition to in-home counseling, many other services are also available to families. The agency locates resource specialists at its field offices to assist in linking families with needed services. There are specialists for housing, substance abuse, mental health, resources, and transportation. A high number of referrals, as with most child welfare agencies, involve substance abuse. A substance abuse counselor may accompany a caseworker to see the family and arrange for immediate services. The agency also provides Family Group Decision Making conferences for families.

Parents receive a Parent's Handbook on the first visit from a caseworker. The handbook lists parental rights and responsibilities, and the responsibilities of the agency and the court. Also available to parents is the Director's Action Line, a toll-free phone number that parents can call to request a second opinion on casework decisions. The Action Line now covers the entire Department of Human Services and over 1600 complaints are investigated annually.

What if, despite the services and resources available to keep children in their own homes, the caseworker believes that out-of-home placement is indicated?

Placement

If placement is indicated, a pre-placement conference is held. The conference team, consisting of an administrator, supervisor, and caseworker (minimum) makes the decision as to whether or not placement is necessary. A caseworker is never left with making that decision on her own.

The decision of where to place a child is also critical. Kinship care is the top priority and must be ruled out before a child is placed with non-relatives. Allegheny County places two-thirds of children in out-of-home care with relatives.

All relative placements are licensed. Because the goal is to immediately place the child with relatives, the licensing process also begins

immediately. A special unit conducts the background check on the kin. Workers often take a kit with them when they inspect the home in order to help the kin meet safety standards; the kit contains items such as smoke alarms, safety covers for electrical outlets, etc. With minimum standards being met, including an expedited background check, a preliminary certificate can be issued to allow for immediate placement while other licensing issues are dealt with later. Relatives receive the same board rate for children as foster parents.

If a kinship placement is ruled out, there are 10 contracted providers for non-relative placement. A needs assessment of the child determines the level of care required, and this level and other information about the child are posted on the Internet and in each local office. The providers respond with details about specific foster homes that are available, and the caseworker then selects the home that best fits the child's needs.

Every effort is made to return children to their parents with a wide variety of services provided. Allegheny County returns about 80% of children to their parents each year. An annual Reunification Celebration is held to acknowledge the importance of keeping families together.

In order to quickly move children out of the system, Allegheny County pays close attention to permanency planning.

Permanency Planning

At the first meeting with parents when a child is being removed, the caseworker explains ASFA, what the parents need to do, and the consequences for failing to do so.

A permanency planning conference is held for all cases where children are removed and the plan of reunification will not be completed within 30 days. The caseworker, supervisor, resource coordinator, parents, children over 14, relative caretakers or foster parents, legal advocates, school personnel, and others involved with the child or family are invited to attend. The caseworker provides a summary of the case and current issues, and the group discusses existing goals and any barriers to their achievement, resources, tasks, and the action plan. Goals are developed and agreed upon by all participants, and the action plan becomes part of the case record. Conferences are held at three-month intervals, twice the frequency required by the state. Court reviews are also held every three months.

If the parents have not made sufficient progress by 12 months following placement, alternatives to reunification are considered. Agency officials and the court do question whether 15 months is sufficient to determine a permanent plan for the child, especially where parental substance abuse is involved. The court will waive the 15-month Termination of Parental Rights (TPR) requirement if the family is making progress.

If every effort to reunify the family fails, then termination of parental rights and adoption are the final options. However, Allegheny County judges are reluctant to grant TPRs if adoptive parents have not been identified. They believe that creating legal orphans is not in children's best interests. So the county focuses on speedily identifying adoptive parents.

Adoption

The reluctance of judges to grant TPRs where no adoptive placement has been identified means that the Adoption Unit seeks to identify adoptive families for children who are not yet legally free. The Adoption Unit begins looking for an adoptive family as soon as the court identifies the permanent plan as adoption.

In discussing adoption procedures with the agency's manager for adoptions, her first words are "adoption is a failure." However, when there is no other alternative to an adoptive placement, the adoption unit moves quickly to complete the task. A case averages seven weeks in the adoption unit. The first job is to establish a relationship with the child and find out what type of family the child wants. Every effort is made to maintain the child's ties to biological family, including siblings. Open adoptions are unenforceable in Pennsylvania, so adoptive parents must voluntarily agree to preserve the child's ties to biological family.

Child Deaths

Every child welfare system has to deal with the emotionally wrenching issue of child deaths due to abuse and neglect, especially with those children known to the system.

Allegheny County has had no child deaths of this nature for the past three years (July, 2003–July, 2006). The last child who died was under age 6 and had been "screened out" for services.

Following that death, the director made a decision to investigate all complaints involving children under age 6 even if the complaint did not involve abuse or neglect. The agency responds within two hours

to this type of complaint and makes use of all staff, including administrators, to go out on investigations. The director believes that immediate response to complaints involving young children is the key to preventing child deaths.

Director's Perspective

There are many pieces that fit together to form an effective child welfare system, and it takes time to build an effective system. To get started, Allegheny County's administrator recommends establishing manageable caseloads. Each caseworker in the county averages 17 families. Supervision is also critical, as caseworkers are never asked or expected to make critical decisions about families on their own. Cases are not kept open for monitoring. The agency believes that it is better to close the case, and then reopen if needed, rather than distort caseload and workload by keeping cases open only for monitoring.

Administrators in Allegheny County view themselves as partners with supervisors and caseworkers. They go out on investigations involving children under age six, participate in pre-placement conferences, and do not ask workers to do anything that they themselves are not willing to do. Administrators demonstrate through words and action, "we're all in this together."

System Issues

No child welfare system is perfect and neither is Allegheny County's. The agency faces the nationwide problem of having a disproportionate number of African-American families in its child welfare system—over half of the county's caseload is African-American compared to 13% of the county's child population being African American. The large number of children placed with relatives raises the issue of permanency as relatives may be reluctant to adopt or assume legal guardianship. Relatives may also object to becoming licensed as foster homes.

The philosophy of Allegheny County requires constant tending in order to be accepted and adhered to by all of those working in the system. Everyone has to support the philosophy, and this requires a great deal of time and effort, especially at the beginning.

Summary

Allegheny County has an effective child welfare system because it focuses first on limited entry and second, on quick exits. The philosophy is to keep families together whenever it is safe to do so, and

that message is reinforced in all policies, procedures, and budgeting. By directing a good deal of its own funds to prevention, and working with the community to leverage other funding, many families who otherwise might enter the child welfare system receive a wide variety of community services instead. If a family does enter the system, one-third of the resources are directed to keeping the children with their parents and working with the family in the home environment. Resource specialists are stationed in every child welfare office.

If placement is indicated, the decision is made by a team in a pre-placement conference, never by an individual caseworker. Kin placements are given priority, with two-thirds of children placed with relatives. Relatives are screened, licensed, and paid the same as foster parents. Expedited background checks and kits to help relatives meet safety standards allow for preliminary certification and immediate placement. If the child cannot be placed with relatives, a level of care based on the child's needs is posted, and providers respond with a placement offer. The caseworker then selects the best placement that fits the child's needs. Every effort is made to reunify children with parents, with nearly 80% achieving that goal annually.

A permanency planning conference is held for children who will not be reunified within one month. Case and court reviews are scheduled every three months. Adoption is viewed as a failure or last option. But when the decision is made to place a child for adoption, the adoption unit completes that task within an average of seven weeks.

The child welfare agency has not had a child death in the past three years. The agency takes a proactive approach by investigating every complaint involving a child under the age of six.

Administrators participate in investigations of complaints involving young children and also help out with pre-placement conferences. They work with the community to address needs of families and identify sources of funding. The goal is for the child welfare agency to be viewed in the community as a friend, not a foe. The child welfare agency is an essential member of the community that takes the lead in working with all other members of the community to keep children safe.

Notes

The information on Allegheny County's child welfare system was gathered through phone calls, email, and review of documents. In addition, a site visit was conducted on May 23–24, 2006. The bulk of the information was supplied by Marc Cherna, the director of Allegheny County Department of Human Services, and Marcia Sturdivant, Deputy Director of the Office of Children, Youth, and Families.

Sources for references to data collected by the federal government include the 2004 Child Maltreatment manual produced by the Children's Bureau and the AFCARS Report for 2003.

The National Family Preservation Network assumes sole responsibility for the contents of this paper. Allegheny County administrators welcome visitors who are interested in or would like to replicate their child welfare system. Please contact Marc Cherna (412-350-5705) or Marcia Sturdivant (412-350-5701).

Part 2: Evidence-Based Practice for the Child Welfare System

Introduction

Within recent years, child welfare agencies nationwide have begun to embrace evidence-based practice (EBP) and programs. A growing body of research literature, pressure from policy makers and funders, and federal audits of child welfare agencies have contributed to the mandate and subsequent demand for EBPs.

EBPs are based on best practice as substantiated through research with the gold standard being random assignment control group studies that support the specific program. In actuality, it is very difficult and expensive to conduct randomized controlled studies, so other types of studies may also considered. There is no generally accepted definition of evidence-based practice. The National Family Preservation Network (NFPN) endorses the guidelines and classification system published by the National Association of Public Child Welfare Administrators (NAPCWA). NAPCWA is an affiliate of the American Public Human Services Association; please visit their Web site at http://www.aphsa.org/napcwa/ to view the Guide for Child Welfare Administrators on Evidence Based Practice. NAPWCWA's classification system has six categories with the highest level being well-supported, efficacious practice and the lowest level, concerning practice.

While there are numerous EBP programs, a significant number of the programs, including highly recognizable ones, have studies that support their efficacy in other fields, not the child welfare system. The list provided here includes only research-based practices and programs researched within the child welfare system. The list is not exhaustive but provides examples along a continuum from prevention to post-adoption. Some programs were included in areas in which the research is still in the very early stages (domestic violence, matching children with adoptive parents) but the need for EBP models is great.

NFPN offers this list with the hope that it will inspire child welfare administrators to continue moving towards evidence-based practice by testing some of these practices and programs in their own system.

Evidence-Based Practice and Programs for a Child Welfare Continuum of Services

Parenting Programs

Service	Description	Outcomes	Research Status
1. Nurse-Family Partnership nursefamilypartnership.org	Nurse conducts home visits with family from child's birth to two years of age	79% reduction in child abuse/neglect	Randomized control group studies support outcome listed
2. The Incredible Years www.incredibleyears.com	Parent and child training for children ages 4–8 to prevent, reduce, and treat child aggression and conduct problems	Increases in effective parenting, positive problemsolving and communication; reduced conduct problems/aggression in children	Randomized control group studies support outcomes listed
3. Positive Parenting Program www.triplep-america.com	Behavioral family intervention to prevent severe behavioral and emotional disturbances in children	Improved parenting ability and more positive attitude toward children; children experience fewer problems, are more cooperative, and better behaved at school	Over a dozen comparison group studies support outcomes listed
4. Parent-Child Interaction Therapy (PCIT) www.pcit.org	Coaching physically abusive parents on safe and effective ways to discipline children ages 4–12	Reduced recurrence of maltreatment	Reduced recurrence of maltreatment
5. Project SafeCare Contact: Marcus Institute, Dr. John Lutzker, 404-419-4000	Ecobehavioral parent training model	Reduced recurrence of maltreatment	Comparison group studies support the stated outcome
6. Participation Enhancement Intervention (PEI) http://www.wjh.harvard.edu/~nock/nocklab/publications.html 2005: PEI Manual and Change Plan Worksheet	Intervention to motivate parents to attend and complete treatment sessions for children with aggressive and anti-social behavior	Parents receiving PEI had greater motivation, attended more sessions, and had greater adherence to treatment	Randomized control group study supports outcomes listed

School–Based Programs

Service	Description	Outcomes	Research Status
7. CASASTART http://www.casacolumbia.org/absolutenm/templates/AboutCASA.aspx?articleid=203&zoneid=26	School-centered program to keep 8- to 13-year-olds drug/crime free	Children less likely to use drugs, lower levels of association with delinquent peers, lower levels of violent offenses, more likely to be promoted to next grade	Urban Institute study including random assignment supports positive outcomes listed

Assessment Tools

Service	Description	Outcomes	Research Status
8. Child Abuse Potential (CAP) Inventory Contact: Joel S. Milner, Northern Illinois University tj0jsm1@wpo.cso.niu.edu	Child abuse risk assessment tool (*not* intended for risk assessment of neglect)	Used as predictive tool for risk of concurrent and future abuse and used to evaluate prevention and treatment programs	Valid and reliable tool with numerous studies demonstrating relationship of the tool to risk factors and prevention/treatment programs
9. Family Assessment Tools: North Carolina Family Assessment Scale—NCFAS (for intact families) and NCFAS-R (for use with reunifying families) http://www.nfpn.org/tools/	NCFAS and NCFAS-R measure family functioning	Used with Intensive Family Preservation (IFPS) and Intensive Family Reunification Services (IFRS) and other services to identify goals/treatment and measure pre-post level of family functioning	Tools are valid and reliable with IFPS/IFRS; study underway with differential response program; tools ranked top for child welfare system in study by Berkeley research group
10. Risk Assessment for Foster Care Providers http://www.nccd-crc.org/crc/pubs/fcrp_support_assmnt_sept05.pdf	Assessment tool to determine likelihood of maltreatment or inadequate care of a child by foster care providers	Prediction of future substantiated complaints on foster care providers	Retrospective study supports outcome indicated

In-Home Services

Service	Description	Outcomes	Research Status
11. Differential Response Services http://www.americanhumane.org/site/PageServer?pagename=pb_home#pc	Assessment and services for low risk families	Increased family engagement and cooperation; more services provided; families less likely to have another maltreatment complaint; overall costs lower than traditional CPS investigation	Pilot project in Minnesota with comparison group supports outcomes listed
12. Intensive Family Preservation Services (IFPS) HOMEBUILDERS® model http://www.institutefamily.org/programs_IFPS.asp	Intensive, in-home services include behavioral/cognitive therapy and skill-building	Prevents placement; saves out-of-home care costs; improves family functioning; may reduce disproportionality	Three random assignment, two comparison group, and one retrospective study demonstrate effectiveness; two studies indicate IFPS reduces disproportionality
13. Father engagement and involvement; *Fatherhood Training Curriculum* http://www.nfpn.org/fatherhood/ http://aspe.hhs.gov/_/topic/subtopic.cfm?subtopic=Fatherhood	Motivate and train child welfare workers to engage and involve fathers in their children's lives	Non-custodial fathers and their families become involved in case planning and placement	Outcome evaluation of three-year project demonstrated that training on father involvement for child welfare workers results in changes in practice, including viewing fathers as a resource and involving fathers in case planning; separate Urban Institute study found similar results

Mediation

Service	Description	Outcomes	Research Status
14. Court Mediation Project of the National Council of Juvenile and Family Court Judges http://www.ncjfcj.org/content/view/563/424/	Mediated discussions with attorneys, social worker, and parents to reach mutual agreement regarding child	Adjudication, disposition, case closure reached more quickly; more placements with non-custodial parent/kin; more services provided; lower re-entry rates	Random assignment study in Washington, D.C., supports outcomes listed. Study underway in Cook County, IL.

Substance Abuse

Service	Description	Outcomes	Research Status
15. Involve substance abuse counselors in home visits and treatment plan for substance-abusing parents referred for CPS investigation http://www.financeprojectinfo.org/publications/developingandsupportingIN.pdf (p. 11)	Substance abuse counselors accompany child welfare workers to assess families and refer parents to treatment	Reduced out-of-home placements and length of time children are in foster care	Comparison group study in Delaware supports outcomes listed
16. Relapse Prevention Program for Substance Abusers Contact: Dr. George Parks, Addictive Behaviors Research Ctr., University of Washington, 206-930-1949	Coping strategies to reduce relapses	Effective in preventing relapse with alcohol or polysubstance users	Meta-analysis of 26 studies supports outcome listed

Foster Care

Service	Description	Outcomes	Research Status
17. Visitation Guidelines for Children in Foster Care http://www.co.olmsted.mn.us/departments/services/child_and_family_services_division.asp	Visitation Guide developed by Olmsted County Children and Family Services Division in Minnesota. The Guide is based on research linking frequency of visits between children and parents to successful reunification.	Olmsted County had strengths ratings of 89% and above on federal CFSR ratings for visitation and reunification	CFSR data used for verification of outcomes. No independent evaluation.
18. Multidimensional Treatment Foster Care www.mtfc.com	Intensive training and support for birth/foster parents; family therapy and daily monitoring and intervention for the child placed in care	Fewer placement disruptions, more frequent reunification with birth families, and lower rates of child behavior problems	Large random assignment control group study supports outcomes listed

Domestic Violence

Service	Description	Outcomes	Research Status
19. Domestic Violence Intervention www.thegreenbook.info	Six counties nation-wide funded by the federal government to improve services to families threatened by both domestic violence and child maltreatment	Interim Study report available on progress in six communities	Report on five-year study pending

Adoption

Service	Description	Outcomes	Research Status
20. Connecting Adoptive Families with Waiting Children www.adoptuskids.org *A Guide to Connecting Families with Waiting Children*	Best Practice in Matching Waiting Children with Adoptive Families	Lists child and family characteristics associated with adoption stability and adoption disruption	Most of the research is based on adoption disruption/dissolution
21. Post-Adoption Services (in-home) http://www.nfpn.org/tools/articles/ifpsadopt.php	Services to prevent adoption disruption/dissolution	IFPS is effective in preventing disruption/dissolution	Study showed IFPS and a less intensive service were effective in preventing disruption/dissolution for 80% of families