

## LOGIC MODEL OVERVIEW

Differential or alternative response refers to a dual track service delivery model which allows child protective services to differentiate its response when acting upon received and accepted reports of suspected child abuse and neglect.

This logic model illustrates an overview of Connecticut's efforts to enhance the current child welfare system through the development and implementation of an alternative response system – DCF's DRS initiative. Further, the logic model outlines the interconnections of inputs (personal and resources), outputs (who the Department targets i.e. DRS customers) and outcomes (what is expected to be achieved).

Starting at the left side, this logic model shows the variety of resources and collaborative efforts or *inputs* that are invested in the DRS development process. These include; all levels of DCF staff (workers to senior management), community stakeholders, funding entities, and statewide partners.

DCF has utilized the DRS development process as a forum for multi-level resource collaboration (*inputs*) involving various stakeholders in the development and implementation process.

The Department has engaged *outputs*, or DRS customers, including families, community providers, and local outreach entities, to increase understanding, support, awareness, and garner support for engaging key legislative, and policy making bodies and statewide stakeholders.

DCF facilitated stakeholder collaboration has resulted in program model development and implementation planning, and has aided in the identification and accomplishment of *short term outcomes* listed in the logic model. Families and community providers have partnered with the Department in establishing a methodology and vision for DRS, program criteria, recommendations, and parameters for the DRS initiative which support successful integration into CT's currently existing child welfare infrastructure.

The *intermediate* outcomes are anticipated outcomes DRS will have on the child welfare system as demonstrated by measured effectiveness of the systemic and practice enhancements within the Department, improved capacity and relevancy of local service provision, and better outcomes with families.

The *long term* outcomes illustrate the outlook regarding the Department, community, and stakeholder embrace of the overarching DRS methodology of a shared accountability for child safety. Through this lens, DRS integration has resulted in a paradigm shift within both DCF and the community's consciousness, as Connecticut's low risk, frequently encountered families needs are assessed and met independent of traditional child protective service involvement, increasing positive outcomes for Connecticut's children and families, without compromising child safety.

# **LOGIC MODEL COMPONENTS**

## **Program Title:**

Strengthening and Supporting Families through a Differential Response Model

## **Situation:**

Currently, Connecticut's child welfare system has only one type of response available when attending to one of the 28,000 reports accepted annually by the Child Protection Hotline. This response is a traditional investigation which is primarily a fact finding forensic process focused on determining if there is a victim, an identified person responsible for the abuse or neglect, and if that identified person poses a risk to the safety or well being of other children and therefore should be placed on the Central Registry. This one size fits all approach is perceived by families and communities as adversarial and authoritative.

Family members are reluctant to disclose and engage with a child welfare agency charged with finding fault with one of its members, removing children from homes, permanently placing individuals on a list maintained by the state of those who have harmed children and potentially stigmatizing families by contacting others that know the family in the community. Of the 28,000 investigations, approximately 12%, or 5400, are opened for ongoing services provided by DCF. The remaining 24,600 are closed despite the fact that a service need might be identified, and in the face of national data that suggests frequently encountered families are one of the greatest risk factors for future child maltreatment and predictor of reports to child welfare. As a result, child welfare/community provider relations are strained and child welfare is viewed as being either heavy handed or unresponsive in its work with families. Other jurisdictions have shown that an alternative or differential response can be an effective way to strengthen families, enhance access and quality of community services, and improve child welfare outcomes.

## **Mission Statement:**

A Differential Response service delivery model enhances the Department's service capacity on behalf of low risk and/or frequently encountered families by offering services that assess underlying and/or contributing factors to more adequately address identified needs of families in order to promote lasting change without compromising child safety.

## **Program Customers:**

*Primary:* Low/Very Low risk family members who come to the attention of DCF through a report of suspected abuse and/or neglect made to the Hotline.

*Secondary:* Community stakeholders, including formal and informal entities who wish to collaborate with families and DCF establishing supportive planning linkages to promote lasting change and avert unnecessary CPS involvement.

*Periphery:* Public Officials and Stakeholders.

## **Assumptions**

- There is a place for a differential response to accepted reports identified as being at a lower risk level.
- DCF must maintain the capacity for a traditional investigative response.
- Child safety will not be compromised if a differential response approach is implemented.
- Earlier intervention and coordination with local supports will translate into a lower percentage of frequently encountered families.
- A positive, solution focused approach and engagement style will translate into greater family participation and better outcomes.
- Significant child welfare culture and practice change will be necessary in order to successfully assimilate a differential response model.
- The Department must bolster community/stakeholder belief in and support of the Department's early intervention and prevention efforts, including DRS.
- DCF's early experience with DRS in its Hartford Office has provided important insights and lessons upon which to build this current and statewide effort.

## **External Factors**

- The level of support, readiness and commitment to a differential response will differ across the state due to varying workforce, service, and community related issues.
- Local and community entities may call on the Department seeking leadership and fiscal support to facilitate a broader level of service capacity and participation in the differential response framework.
- Some individuals and communities will be reluctant to allow DCF to take a broader role related to child safety.
- Connecticut's current fiscal climate may affect the speed and scope of differential response implementation.
- Community and service provider wariness exists regarding the Department's ability to effectuate a paradigm shift from the traditional child protective services culture necessary to implement a differential response model.
- The persistent presence of poverty and its foundational impact on families and their functioning will require considerable political will and intergovernmental and interagency coordination in order to mitigate.

# LOGIC MODEL CHART

| Inputs   | Program Development Activities   | Outputs  | Initial Outcomes   | Intermediate Outcomes   | Long-term Outcomes   |
|--|--|--|--|---|--|
| <ul style="list-style-type: none"> <li>• Local community partnerships</li> <li>• Research base</li> <li>• Technology</li> <li>• Training curriculum</li> <li>• Communication materials (brochures)</li> <li>• DCF staff</li> <li>• Funding</li> <li>• Family and family advocate engagement</li> <li>• Public Official and inter-agency transparency, collaboration, and engagement</li> </ul> | <ul style="list-style-type: none"> <li>• Program Purpose<br/>Flexibility, family driven, maltreatment reduction, DCF/community collaboration</li> <li>• Eligibility Criteria<br/>Meets statutory requirements for acceptance, low risk reports, investigation exclusionary criteria requiring investigation</li> <li>• Screening and Assessment Methods<br/>SDM utilization, Family Conferencing, Area Office check and balance</li> <li>• Case Tracks and Track Change<br/>Dual track model, track flexibility with focus on family need (DRS, Inv., Ongoing)</li> <li>• DCF Staffing and Role Clarity<br/>Specialized DRS units w/ CPS oversight, training, staffing, and safety mandates</li> <li>• Service Provision and Delivery<br/>Service Array/Mitigating factors, service provision options including               <ul style="list-style-type: none"> <li>○ HUB</li> <li>○ Community Liaison</li> <li>○ Umbrella provider</li> </ul> </li> <li>*to be assessed via RFI (Pending)</li> <li>• DRS Case Closing Criteria<br/>No safety/risk concerns, Community support identification and utilization plan</li> </ul> | <p>The target population or <i>primary</i> recipients of DRS services include:</p> <ul style="list-style-type: none"> <li>• Families who:</li> </ul> <p>Come to the attention of DCF through a report of suspected abuse and/or neglect meeting statutory criteria for acceptance</p> <p>Are Low Risk Reports not involving possible criminal acts</p> <p>Reports including less immediate safety concerns, often poverty related</p> <p><u>NOTE:</u> 15 exclusionary criteria have been designated requiring a family to be investigated (e.g., Prior Adjudication, 2 Substantiated reports on current household member, caregiver currently incapacitated)</p> <p>Indirect or secondary recipients of the implementation of a DRS service model include:</p> <ul style="list-style-type: none"> <li>• Statewide community providers and stakeholders via DCF provider training, enhanced service capacity, and inter-agency collaborative efforts</li> </ul> | <ul style="list-style-type: none"> <li>• Program Model and Development<br/>DRS program model workflow completed, DCF and local provider discussions have resulted in the implementation of alternative response protocols and steps</li> <li>• Workforce/Organizational Development/Training<br/>Differential Response training curriculum (DCF staff/community stakeholders) developed, staffing and role clarity issues addressed</li> <li>• Communications and Outreach<br/>Key audiences identified, communications plan, and logic model, complete, DRS presentation teams assigned to conduct statewide DRS awareness forums</li> <li>• Legal, Legislative, and Policy<br/>All legal, legislative, and policy related objectives completed</li> <li>• IT Planning and Data Development<br/>LINK database DRS workflow developed, LINK design to IS for build</li> <li>• Data Research and Evaluation<br/>Evaluation and assessment points in place</li> <li>• Community Readiness and Service Array<br/>HUB (or community liaison/provider) role clarified and providers identified, LINK resource directory has been developed, DRS Brochure under development</li> </ul> | <ul style="list-style-type: none"> <li>• Area Office staff are instituting family driven, strength based, solution focused practice while effectively applying risk and safety management strategies, and investigation services when applicable</li> <li>• Area Office staff applying family conferencing "kinship casework" methodology in conjunction with traditional and non-traditional community service provision strategies</li> <li>• DRS process identifying, and engaging client identified community entities, while establishing a plan for accessing support at the family's discretion</li> <li>• Traditional and Non-Traditional community providers are participating in Family Conferences and other meetings focused on building family driven, client specific, support networks</li> <li>• Fiscal and business operations identified and addressed; funding secured, and changes to business practices implemented (RFI)</li> </ul> | <p>Reduction in the number of reports that are repeat or involve frequently encountered families</p> <p>Lower Entry and Re-Entry into Care rates</p> <p>Increase Family Satisfaction-- assess families feelings, attitudes, and investment in the support planning process as they experience an increased capacity to problem solve through establishing local community connections to be utilized in times of need</p> <p>Enhance Community Service System effectiveness and capacity through improving service quality, array, and accessibility, thus supporting and promoting lasting change for at risk families</p> <p>Increase Worker Satisfaction--measure attitude and experiences with DRS as it relates to their practice and job satisfaction</p> <p>Reduce Aggregate Child Welfare Expenditures over time</p> <p>Enhance the cultural sensitivity of DCF and improve agency relations with minority communities</p> |