

# **A Guide for Implementing Improvement Through the CFSP and CFR**



**Children's Bureau  
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# A GUIDE TO IMPLEMENTING IMPROVEMENT THROUGH THE CFSP AND CFSR

This guide translates principles of effective implementation for states and the Children's Bureau to use when working jointly on the development and implementation of the Child and Family Services Plan (CFSP) and Child and Family Services Review Program Improvement Plan (CFSR-PIP). The Children's Bureau developed this framework recognizing the challenges involved in implementing and sustaining system improvements.

This guide presents an implementation framework organized into three phases: Phase 1, Foundation; Phase 2, Planning; and Phase 3, Action. Each phase includes multiple steps that states are encouraged to take to successfully implement improvements. The guide includes questions that states can use as internal points of discussion and planning and that the Children's Bureau can use to guide conversations about a state's progress through each of the three phases. While this tool is not required, it is provided to help states successfully implement and sustain improvements in their change efforts.

The steps appear in a linear fashion, but executing the steps is actually a nonlinear and reflective exercise. At various times, the state may need to circle back to previous steps, reassess previous understanding, and modify actions based on the developments in each step.

## PHASE 1—FOUNDATION

In this phase, the state identifies a planning and implementation team (team) and develops a communication plan. The state also analyzes relevant data and decides what strategic goals and initiatives will be the focus of the work.

### STEP 1: IDENTIFY THE TEAM AND DEVELOP A COMMUNICATION PLAN

The purpose of Step 1 is for the state to identify and/or establish the team; determine team roles and responsibilities; engage stakeholders, Tribes, and courts; and develop a communication plan. The team plays a critical role in the improvement process. The team will be engaged throughout the entire process and will provide guidance through each phase.

#### A. Planning and Implementation Team

The team is the core working group of individuals responsible for the leading the change effort. The team uses the communication plan to facilitate the broader involvement of other partners and stakeholders. (See B. Engage Partners and Develop a Communication Plan later in Step 1.)

##### Membership

The state selects individuals for team membership who are empowered to influence change and make decisions, or have access to those who can. The state includes individuals who have experience and skills in implementing systems change. The state considers the key roles that need to be represented on the team. The state should consider selecting members that would be key partners in implementing reform efforts including:

- Individuals representing various levels and jurisdictions of the child welfare system; e.g., state, county, and private agency
- Individuals from Tribes, courts, and related state agencies—e.g., education, mental health, law enforcement
- Key stakeholders and partners such as providers, foster and adoptive parents, parents, youth, and families, or their representatives
- Formal and informal leaders

### Regular Review of Team Composition

Determine the process for ensuring that the necessary partners are members of the team throughout the CFSP and CFSR program improvement process. As the process moves from the foundation phase to the planning and implementation phases, new members representing different roles or functions may be needed, or the state may find the need to develop additional teams to support the implementation of individual interventions. (See Step 7, C. Team Membership and Local Teams.)

### Key Roles and Responsibilities

Obtain buy-in from state leadership on a written outline of the roles and responsibilities of the team. Consider:

1. What is the purpose of the team as defined by leadership?
2. What are the roles and responsibilities of the team as described by leadership?
3. How does the team fit into the structure of the agency and to whom does the team report?
4. What is the specific plan for reporting recommendations to agency leadership and reporting leadership communication to the team?
5. Are the decisions recorded to ensure clarity of roles and responsibilities over time?

### Clarify Decision-Making Process

Draft a written statement outlining the team's decision-making process to guide implementation. Consider:

1. How does the team plan to make decisions (by majority vote, consensus, or another method)?
2. What values and methods of work has the team decided to follow throughout the project (e.g., working toward consensus, embracing diverse opinions, resolving conflicts)?

## **B. Engage Partners and Develop a Communication Plan**

***Internal partners*** include but are not limited to mid-level managers, supervisors, and caseworkers.

**External partners** include but are not limited to Tribes, courts, service providers, foster and adoptive parents, parents, youth, and families, or their representatives, and other entities that may be affected by the interventions.

### Engagement

Plan for gaining buy-in from internal and external partners. Enlist their support of the improvement process. Plan for their participation throughout the CFSP and CFSR-PIP period.

1. Who are the internal and external partners with whom the state will communicate information and solicit feedback?
2. What strategies will be used to enlist their support?

### Communication Plan

Develop a plan for communicating with internal and external partners during each step of the process. The communication plan identifies the ways that the larger group of internal and external partners will be engaged throughout the process. The communication plan addresses:

- an ongoing review of data and assessment of agency strengths and concerns;
- selection of priority areas for the CFSP and CFSR-PIP;
- identification of goals, objectives, target populations, and interventions;
- identification and installation of implementation supports;
- implementation of interventions; and
- assessment of process and outcome data.

The communication plan should include bi-directional communication for providing relevant information to internal and external partners, then gathering and analyzing their feedback throughout the CFSP and CFSR-PIP implementation period.

**Bi-directional communication** emphasizes both receiving and providing information and ideas in an active, responsive, and receptive manner.

*Helpful Hint: In addition to determining what communication processes are most effective, it is important for the state to consider what types of information and what communication formats are most significant to and most useful for internal and external partners based upon their role. Communicating involves meaningful bi-directional engagement, in which internal and external partners participate in a continuous feedback loop coordinated by the state. Ideally, there should be a method for tracking the information.*

## **STEP 2: ASSESS NEEDS**

The purpose of Step 2 is to use quantitative and qualitative data to get a precise picture of the state's strengths, needs, and challenges, and to prioritize areas of concern that the state chooses to target for system improvement.

## A. Understand the State's Current Context

1. What political and resource issues challenge the state's efforts to develop and implement the CFSP and CFSR-PIP?
2. Do any consent decrees, settlements, or pending lawsuits need to be considered?
3. What state initiatives are already underway?
4. What issues of disproportionality should be considered?
5. What issues regarding the state's implementation of the Indian Child Welfare Act should be considered?
6. If the state has an approved child welfare waiver demonstration project, how will it integrate with the CFSP and CFSR-PIP?
7. What are the goals of discretionary grant projects active in the state that should be integrated with the CFSP and CFSR-PIP?
8. What current or recent training and technical assistance (T/TA) should be considered?

## B. Identify the State's Data to Assess Performance

Identify qualitative and quantitative data that target specific performance concerns. Consider a range of data sources, including relevant data from partners, stakeholder groups, and other organizations that assess performance or otherwise inform understanding.

Prioritize data to maintain focus on specific CFSP goals to be accomplished to strengthen the state's overall child welfare system and required CFSR improvement areas.

1. Identify CFSR outcomes (statewide data indicators and case review data) and systemic factor data.
2. What other performance data in the child welfare information or Statewide Automated Child Welfare Information (SACWIS) systems should be considered?

*Helpful Hint: Examples of additional performance data include: title IV-B caseworker visit data, National Youth in Transition Database (NYTD), timeliness of investigations, relative placements, data on placement types, and other data the state has gathered to target specific concerns. The Child Welfare Outcomes Report Data is a useful website: <http://cwoutcomes.acf.hhs.gov/data/overview>).*

3. What supplemental data are available regarding well-being; e.g., survey or focus group data, trauma screening and assessment tool data, functional assessment data, quarterly or semi-annual progress reports, and/or evaluation findings of an active waiver demonstration project, if applicable?

### **C. Review and Understand the Data**

Consider the strengths and potential limitations of each of the identified data sources to qualify its usefulness or credibility to assess the state's strengths, needs, and challenges.

1. Are there data quality concerns that limit the use of the data or its credibility?
2. Does the age of data limit its usefulness?
3. Are certain populations or geographic areas excluded from the available data?

#### Issues/Strengths/Concerns

Conduct a thorough review of available data to identify issues and determine strengths and areas of concern.

1. In looking at the data, what big issues can be identified? What do the data suggest in terms of higher and lower areas of performance?
2. Which performance areas fall below the national or case review standards and require improvement?
3. What do the data reveal about safety concerns?
4. What do the data show in terms of trends over time?
5. How does performance vary by different factors? Some key factors that may need to be considered include allegation type, age of child, racial and ethnic background, permanency goal, geography, case type, and identified strengths and needs of parents and children.
6. When combining the data into an integrated view of the state, what does it suggest about contributing factors and potential explanations for child and family outcomes in areas of safety, permanency, and well-being?

### **D. Engage Partners in Bi-Directional Discussion of Data**

#### User-Friendly Data

Determine how to provide user-friendly data to internal and external partners. Consider how best to present complex data using trend lines, graphs, charts, and comparisons.

1. What data are most relevant to the different internal and external partners?
2. How will the state organize, present, and discuss the data in a user-friendly way with internal and external partners?



### Methods for Gathering Feedback

Determine how to gather input from internal and external partners on their interpretations of the data, contextual factors, further analysis needed, and the state's priorities for improvement efforts.

#### **E. Determine What Additional Analysis Is Needed**

Based on information gathered in section D, determine whether additional data analysis, collection, clarification, and research are needed.

#### **F. Prioritize Needs or Areas of Concern**

List the critical needs or areas of concern, then consider the following questions:

1. What do the data, analysis, and partner feedback suggest about priorities for improvement?
2. What do the data, analysis, and partner feedback suggest about linkages between the performance areas? What are the cross-cutting issues?
3. What are the strengths to build on?
4. What efforts are currently in place to address performance?
5. What priorities for improvement will produce the greatest effect on the safety, permanency, and well-being outcomes for the state's children and families?

### **STEP 3: ESTABLISH CFSP AND CFSR-PIP GOALS**

The purpose of Step 3 is for the state to determine and clearly articulate the overarching goals of the CFSP and CFSR-PIP in terms of the changes the state hopes to achieve by the end of the improvement period.

The goals should align with the state's prioritized needs, respond to improvement efforts mandated by federal regulations, and reflect the input of key internal and external partners.

Informed by the prioritized needs and areas of concern requiring improvement identified in Step 2, the state determines what changes it would like to see by the conclusion of the CFSP or CFSR PIP period. These desired changes could occur at the systems, family, and/or child levels. It is likely that the CFSP and CFSR-PIP will target outcomes at multiple levels.

*Helpful Hint: During this step, it may be useful to discuss the "big picture." The state should determine what it wants its child welfare system for children and families to "look like" at the end of the CFSP and CFSR-PIP period and which key outcome areas it wishes to target for measurable improvement. This process would likely include state leadership, the planning and implementation team, and key internal and external partners.*

## **A. Draft Goals**

Determine which broad goals will best address the priority needs and areas of concern identified in Step 2. Focus on improved safety, permanency, and well-being outcomes.

1. What goal(s) are needed to address the safety outcomes?
2. What goal(s) are needed to address the permanency outcomes?
3. What goal(s) are needed to address the well-being outcomes?
4. What goal(s) are needed to strengthen systemic factors?

## **B. Review and Finalize Goals**

1. Do the goals selected address all required improvement areas?
2. Are the goals measurable?
3. Are the goals being considered achievable within the CFSP and CFSR- PIP time periods?
4. Do the goals meaningfully target the identified improvement areas?

## **STEP 4: UNDERSTAND TARGET POPULATIONS**

The purpose of Step 4 is to understand the populations whose child safety, permanency, and well-being outcomes the state is attempting to improve through its initiatives, so that the state can select appropriate interventions to address the identified problems.

Before the state selects what reform initiatives and interventions it wants to implement as part of the CFSP or CFSR-PIP, it is critically important to develop a comprehensive understanding of the population(s) whose outcomes it wishes to change, including their characteristics and needs. The state then uses this information to inform the selection of the most appropriate interventions that are likely to improve the identified outcomes for the target population(s).

The state will likely have already begun in Step 2 some of the analysis needed to define the target populations. When the state uses state child welfare information system data to describe their target population(s) (e.g., age, race, reason for removal, placement type, number of placements), states should apply quantitative data analysis methods that will help them better pinpoint needs, characteristics, and/or combinations of factors that are contributing to a specific problem.

Qualitative methods, such as using new or existing interviews, surveys, and focus groups with key staff and stakeholders, and/or case record reviews, should be considered. These are appropriate for gaining deeper knowledge of key issues, detecting patterns, and understanding what is going on in different jurisdictions around the state.

*Helpful Hint: The state may find it useful and meaningful to collaborate actively with its internal and external research and evaluation partners during this phase. This could include leveraging existing relationships with university partners who have the knowledge and statistical analysis programs (e.g., SPSS, SAS, NVivo) to do this work.*

## **A. Identify Target Population**

The state identifies the target populations experiencing the problem(s) that the state wants to address through its CFSP and CFSR-PIP efforts.

## **B. Target Population Characteristics and Needs**

**Characteristics** are generally related to demographics or past experiences that are not readily changeable.

**Needs** define the circumstances and conditions that are amenable to change, and may be targeted as part of the state's CFSP and CFSR-PIP.

For each key target population, identify the child, case, and family characteristics and needs that are associated with the outcomes the state is trying to address, as well as any relevant systemic barriers.

1. What child characteristics and needs, e.g., age, behaviors, are relevant to the identified outcome area? How did the state determine which child characteristics and needs are relevant to the problem?
2. What case characteristics, e.g., foster care, in-home, are relevant to the identified outcome areas? How does the state determine which case characteristics are relevant to the problem?
3. What family characteristics and needs, e.g., incarcerated parent, substance abuse, are relevant to the identified outcome areas? How did the state determine which family characteristics and needs are relevant to the problem?
4. What systemic barriers are relevant to the identified outcome areas? These could include staffing barriers, e.g., recruitment, caseload size; organizational support/service barriers, e.g., lack of appropriate services; insufficient number of foster homes; or leadership barriers, e.g., lack of buy-in from local child welfare directors, conflicting state-court relationships. How did the state determine which systemic barriers are relevant to the problem?

*Helpful Hint: It may be helpful to examine the population(s) that is not experiencing the identified problem, e.g., children who **are** reunified within 12 months; children who **are not** re-entering care, to understand how this population may be different from those experiencing the problem.*

At the end of this process, states should be able to summarize the key child, case, and family characteristics and needs of their target populations as well as the relevant systemic issues that may be affecting their identified outcomes. The state uses this information to inform the intervention selection process.

## STEP 5: DEVELOP OBJECTIVES AND SELECT INTERVENTIONS

The purpose of Step 5 is to develop objectives and select appropriate interventions to meet the needs and challenges and achieve the goals identified in Step 2.

**Objectives** are broad approaches to achieving goals. Objectives are a helpful way to group related interventions that are intended to implement a particular improvement. Each objective may have more than one intervention.

**Interventions** are the specific child welfare practices, programs, or policies and enhancements to infrastructure that will be used to make the improvements.

Step 5 also includes discussion of the work necessary to assess the fit of proposed interventions, adapt any intervention, and/or develop new interventions needed to meet the state's goals.

### A. Identify and Develop Objectives

Identify one to three objectives to achieve the goals. Objectives are broad, may affect more than one child and family outcome and/or systemic factors, and could include one or more interventions. Consider:

1. What potential objectives may help to achieve the goals?
2. Describe each objective. How will it contribute toward accomplishing the identified goal(s)?
3. How does each objective fit with major state, direction? Does the objective align with a federally funded discretionary grant, title IV-E waiver, or consent decree?

### B. Identify and Examine Potential Interventions

#### Identifying Interventions

Identify potential intervention(s) for each objective. It may be helpful to characterize interventions as **evidence-supported**, **adapted**, or **new**.

**Evidence-supported Interventions:** For each objective, what are the evidence-supported interventions that address the priority needs/areas of concern addressed in the identified goals and objectives?

**Adapted Interventions:** For each objective, what evidence-supported interventions can be adapted by the state to address the priority needs/areas of concern addressed in the identified goals and objectives?

**New Interventions:** When, after careful exploration, the state is unable to identify an evidence-supported intervention that can be implemented "as is" or adapted, what new intervention is being considered to address the priority needs/areas of concern addressed in the identified goals and objectives?

*Helpful Hint: Many resources are available for identifying possible interventions, such as child welfare clearinghouses and websites (e.g., Child Welfare Information Gateway, California Evidence-Based Clearinghouse); capacity building or T/TA websites and resources; relevant journals and evaluation reports; and peer networks.*

For each potential intervention the state is considering, what are the core components of each identified intervention?

**Core components** are the essential building blocks of each intervention. They include the principles, functions, activities, or elements of the intervention that address the identified problem and are essential to achieving the outcomes desired.

Who will receive the identified intervention (e.g., children, families, foster parents, caseworkers, supervisors)?

*Helpful Hint: The recipients of an intervention may be different from the target populations whose outcomes the state is trying to improve through the CFSP and CFSP-PIP goals. In order to change practice, a relevant intervention could be a new training curriculum on a particular topic for caseworkers and supervisors. Ultimately, the goal is to improve outcomes for children and families, but in this example, the intervention is targeted at caseworkers and supervisors.*

### **C. Examine Effectiveness of Potential Evidence-Supported Interventions**

When considering evidence-supported interventions, consider:

1. How will the identified interventions address the needs of the target populations?
2. What are the specific short, intermediate, and long-term outcomes the state intends to improve through each intervention?
3. What is known about the effectiveness of the intervention the state is considering?
  - Are there research and evaluation findings linking the intervention to improvements in the outcomes the state is intending to affect?
  - If there are no (or insufficient) research and evaluation findings readily available, what additional evidence is the state using to inform its decision?
4. Has the intervention been shown to be effective and culturally appropriate for the specific target populations identified ?
5. Would the intervention need to be further developed or adapted in order to be culturally responsive and successfully implemented within the state's child welfare system?
  - If adaptation is necessary, what steps is the state taking to ensure that any program changes are evidence-informed?

- Will the state be working with child welfare experts experienced in the intervention during the adaptation process?
- What program adaptation activities are needed?

*Helpful Hint:* Be very cautious when deciding to adapt an intervention. Conversations should be held about the decision and whether the adaptation is truly necessary. Careful consideration should be given to what changes are proposed, how they may affect the intervention's core components, and the extent to which a change creates a deviation from the intervention's original logic model or theory of change.

#### **D. Assess Fit of the Intervention**

##### Alignment

For each intervention the state is considering, assess how well the proposed intervention is aligned with the state's context. Here it may be useful to revisit the questions asked in Step 2 that were used to understand the state's current context to identify opportunities for building upon existing strengths and maximizing resources.

##### Capacity

In assessing the fit of a proposed intervention, the state will need to consider their current capacity to implement the intervention. This should include a high-level review of the anticipated level of internal and external stakeholder buy-in, and the needed infrastructure requirements, such as human resources, training, coaching and mentoring, administrative systems, policies, and financial resources. This high-level review may assist the state in ruling in or ruling out proposed interventions. More in-depth conversations on capacity can occur once specific interventions are selected (see Step 6).

#### **E. Developing New Interventions**

In some circumstances, there may not be existing interventions that will help the state achieve its identified goals and objectives, and the state may choose to develop a new intervention. If the state is choosing to do so, consider:

1. What would be the core components of the new intervention?
2. Who would receive the intervention?
3. How might the intervention address the needs of the relevant target population(s)?
4. Does the state have the resources and support—refer back to D.
5. What would be the specific short, intermediate, and long-term outcomes the state intends to improve through the intervention?
6. What evidence and experts would the state use to inform the development of this intervention?

*Helpful Hint: Before a new intervention is developed, significant research should be conducted to ensure that a relevant practice, program, service, or policy does not exist in the child welfare field that could inform the state's work. States should consider testing newly developed interventions before implementing them statewide and be attentive to any indications that the intervention may cause harm. It is particularly critical when implementing a new intervention to consider the process and fidelity measures discussed later in Step 8.*

## **F. Finalize Intervention Selection and Articulate Theory of Change**

Having carefully considered each possible intervention, the state selects the intervention(s) that is most appropriate. For each identified intervention, the state clearly articulates its theory of change for why the selected intervention is likely to achieve its intended outcome.

The **theory of change** is essentially a concise explanation that logically illustrates how and why the activities associated with each intervention will address the identified problem and help the state accomplish the desired short, intermediate, and long-term outcomes for that intervention.

## **STEP 6: ASSESS READINESS TO IMPLEMENT INTERVENTIONS**

The purpose of Step 6 is for the state to assess its readiness to implement the selected interventions before beginning implementation. It is also to identify the infrastructure development and technical assistance required.

### **A. Assess Buy-In**

#### Leadership Buy-In

To assess leadership buy-in, the state considers:

1. To what extent is senior leadership strongly supportive of the identified interventions?
2. To what extent is senior leadership willing and able to shape and lead the change effort for each of the selected interventions? How committed is senior leadership to establishing and communicating each of the selected interventions as top priorities of the agency?
3. To what extent will state leadership take action throughout the implementation process to make this change fully successful?
4. Have the pivotal points when leadership may need to take specific action to fully engage internal and external partners been identified?

Interventions are often rolled out at the county and local levels. The buy-in and support of child welfare leadership at these levels are integral to a successful implementation effort. Private child welfare agency leadership is also important in states that contract out key components of their child welfare services.

1. To what extent are county, local, and/or private child welfare agency leaders supportive of the selected interventions?
2. How committed are they to successfully implementing these interventions in their agencies/jurisdictions?
3. How has this been assessed?
4. What strategies are in place to facilitate additional buy-in of these key leaders, as appropriate?

#### Internal and External Partner Buy-In

Consider:

1. How has the state assessed buy-in for each of the selected interventions?
2. To what extent do internal/external partners understand the reasons behind making these changes?
3. To what extent are internal/external partners convinced of the value of each selected intervention?
4. Has the state gathered information from internal/external partners to understand how they might be affected by the change?
5. What additional steps need to be taken to gain full support for the interventions and address any concerns preventing full support? For example, has the state considered additional strategies for outreach, engagement, and consensus building?
6. Has the state identified internal/external champions and developed strategies to best use them to engender support for the interventions?

### **B. Identify the Infrastructure and Resources Required**

Consider what infrastructure and resources are required to introduce, implement, and sustain the intervention. This discussion should include identifying which of the resources are readily available and which need to be put in place:

#### Human Resources

- Staffing needs (numbers needed for service delivery as well administrative support, including any redistribution of staff, as needed)
- Changes to job requirements
- New competencies needed by staff and supervisors
- Changes to supervision requirements
- Implications for union agreements



*Helpful Hint: Clearly define and communicate roles for all staff, supervisors, leadership, providers, and other partners within each intervention. All people responsible for implementing the interventions should be clear about the purpose of the intervention and their role in the process.*

### Training, Coaching, and Mentoring

- Initial training
- Ongoing training and support (supervision or coaching) until the practice becomes a routine way of working
- Modifications required to integrate this practice into the state training system, such as a training academy
- Coaching, consulting with, and supporting supervisors to facilitate clinical supervision
- Strategies for peer learning and support (e.g., a shared learning collaborative, online platforms or forums)

### Administrative Infrastructure

- New or modified contracts with service providers
- Tangible requirements such as physical space or transportation

### Automated Systems

- Modifications to automated systems, such as the state's SACWIS system, to capture intervention information or forms and assessment tools used in the intervention

### Policies and Regulatory Requirements

- Existing policy and regulatory requirements that support implementation
- Existing policy or regulatory requirements that could be barriers to implementation
- New policies, regulations, procedures, and intervention guides needed to support implementation

### Financial Resources

- What are the start-up costs associated with each intervention? Consider key elements such as curriculum development, proprietary costs associated with certain evidence-based practices, acquisition and implementation of assessment tools and instruments, required space, initial training, and staff and salary implications.
- What are the ongoing costs to support implementation?
- What funding sources will be leveraged to support identified costs?
- How will costs be supported? For example, will there be a need for additional funding and/or will the state be able to shift funding? Will the state need to modify its cost allocation plan or other federal plans to access available federal support?

## **C. Training and Technical Assistance**

Effective T/TA provides targeted support to build the capacity needed to achieve program goals and improve outcomes. T/TA should be customized, data informed, results driven,

and accountable. The desired outcome for T/TA should be clearly defined, measurable, and aligned the state's theory of change.

To identify required T/TA, it may be helpful to revisit Step 2, where needs were assessed; Step 4, which focused on understanding the target population; and Step 5, which identified and examined interventions including core components, and reviewed the state's theory of change. The state's efforts in each of these stages should help define the T/TA needed to successfully implement each intervention and the primary recipients of the T/TA. T/TA includes T/TA provided from any source, not only that which is Children's Bureau-supported.

#### **D. Cumulative Effect**

Consider the timing, roll-out, and full implementation of all of the selected interventions that will be implemented during this same time period. The state considers whether:

1. The supports are adequate for all of the interventions throughout the time period; and
2. Any ripple effects related to the identified infrastructure, resources, or T/TA needs.

## PHASE 2—PLANNING

In this phase, the state puts needed support in place, designs monitoring and feedback loops, and plans implementation.

### STEP 7: CREATE THE IMPLEMENTATION PLAN

The purpose of Step 7 is to develop and document the implementation plan. This involves documenting the goals identified in Step 3, the target population(s) identified in Step 4, and the objectives, selected interventions, and core components identified in Step 5. Using the results of the readiness assessment completed in Step 6, the state develops the implementation plan by documenting for each intervention the actions to be taken, including the actions needed to put the necessary supports in place; the time frames; and sequencing of key actions.

*Helpful Hint: The state may want to consider a project management tool such as a Gantt chart to capture all of the program development and implementation activities that need to occur throughout the implementation period.*

For each intervention, the state includes both interim benchmarks and a timetable for achieving the objective over the implementation period. These benchmarks should contain sufficient detail to support reporting on progress the state is making in implementing improvements in subsequent years. Benchmarks may be stated in terms of implementation milestones, such as key activities completed and/or process measures and interim targets for improvement of outcome measures.

#### A. Infrastructure Support

In Step 6, the state identified the infrastructure supports and resources needed to successfully implement the interventions. These included leadership supports, human resources, administrative supports, automation systems, policies, and financial supports. Document those actions steps and time frames for accomplishing activities needed to put the necessary supports and resources in place.

##### Leadership Supports

Ensure that leadership is updated on and supportive of all the selected interventions. Initiate additional leadership activities to support implementation of the interventions.

1. Is leadership at all levels of the organization knowledgeable about the selected interventions?
2. Does leadership understand new roles and responsibilities?
3. Has leadership bought into all of the required action steps and timeframes?
4. Have leaders communicated to internal and external partners the reasons for the new interventions and the intended benefits to children and families?

### Administrative Supports and Resources

Consider which of the required resources and supports are in place, which require further development, and how gaps will be addressed:

1. Have job descriptions and required competencies been developed? Have staff been designated, hired, or contracted?
2. Has the training curriculum for each intervention been developed? Are trainers identified? Has training been scheduled? Has the state considered its patterns of worker turnover and attrition and how this might affect the implementation of the interventions? How is the state addressing this important workforce dimension?
3. When will required changes to physical supports be in place; e.g., space and equipment, for staff and families?
4. When will required changes to the data system occur?
5. Will the case review system be used to capture additional information about the intervention? If so, is it ready?
6. When will required changes to legal and policy framework(s) or practice standards occur?

### **B. Sequence Interventions**

Given the infrastructure and resources needed for each intervention, use the information to design an implementation plan. The implementation plan sequences the interventions so the actions and resources needed for each intervention build on or support one another and are not overwhelming to field staff or others affected by the change.

1. Which interventions will the state pursue at the beginning of the time period and when will other interventions be added?
2. What did the state consider when sequencing the interventions?
3. How were decisions made about where to test and when to scale up interventions?
4. Has the state identified any potential barriers to implementation and how these potential barriers may affect the timing and roll-out of the interventions?
5. What is the state's plan for addressing potential barriers and re-thinking sequencing if needed?

### **C. Team Membership and Local Teams**

Review the composition of the planning and implementation team given the interventions that have been selected, and consider:

1. Based on the interventions selected, does the team require additional or alternative members with focused expertise?

2. Based on sequencing decisions, should the state establish an additional implementation team at the local level to direct, manage, and monitor implementation of selected intervention?

When local implementation teams are established, consider:

1. Have the roles and responsibilities for the local team(s) been clearly defined?
2. What communication protocols need to be developed to create linkages across all teams, including linkages to the overarching team?

#### **D. Scale**

In Step 3, the state determined and clearly articulated the overarching goals of the CFSP and CFSP-PIP. In Steps 4 and 5, the state refined target populations, identified objectives, and selected interventions to pursue in order to achieve the goals. While these goals reflect state-level performance, the state should consider implementing in a transformation zone or in one or two sites before scaling up in order to effectively manage implementation.

##### Proposed Scale

1. What is the state's proposed plan for staging the implementation of the interventions over the PIP and the 5-year CFSP period?
2. How were decisions about transformation zones/sites made and what factors did the state consider?
3. Will the scale proposed be sufficient to meet the improvement goals in a timely manner?

##### Criteria for Expansion

1. What is the criterion for expansion?
2. What is the process for selection of additional locations/populations for the expansion? Will the state be conducting readiness assessments at the local level? If so, what will the process look like?
3. What approach will be used to roll out interventions and how was this decided? For example, will the state be working with the developer of an identified intervention? Will the state use a "train-the-trainer" model? Another approach?

#### **E. Managing and Monitoring Implementation Over Time**

Pursuing the objectives and implementing the interventions is a dynamic process that requires ongoing managing and monitoring over the implementation period. Consider:

1. What are the critical times when extra supports may be needed?
2. What process is in place to track and monitor the implementation over time?
3. What process is in place to review the adequacy of the implementation plan over time?

## STEP 8: SELECT MEASURES AND ESTABLISH METHODS FOR MONITORING

The purpose of Step 8 is for the state to establish methods for monitoring. This involves selecting process and fidelity measures; identifying the source of the data for all measures, including outcome measures; and developing feedback loops. The communication plan is updated to reflect the measures and the feedback loops that provide information on whether the interventions are operating as intended and are having the desired effect on outcomes.

### A. Develop Process Measures

**Process measures** collect data on key activities and processes of the intervention.

Identify data and information that can be collected for each intervention to measure progress with implementation. Consider short-term and long-term process measures that can serve as indicators of success.

1. What key implementation activities should be tracked to assess progress? (Refer to the implementation plan activities and time frames identified in Step 7.)
2. What aspects of the intervention and associated processes should be measured to assess progress with implementation? For example, consider indicators like the number of referrals to an identified intervention, number of families enrolled, and services provided.
3. What implementation supports identified in Step 7 might need to be monitored particularly in the initial stages of implementation, to ensure that the supports are in functioning in the way intended? How will they be assessed?
4. What data sources will be used to capture the above information? How will the data be collected and at what intervals? Who will collect and analyze the information?

### B. Develop Fidelity Measures and Assessment Processes

**Fidelity measures** include the formal or informal tools, instruments, or processes that states can use to assess the degree to which interventions are implemented as originally intended. It is useful to refer back to the core components of the intervention and understand the methods for assessing the degree of fidelity to each component.

Determine how the state will know the intervention(s) is being implemented as intended.

1. What protocols or processes will be used to monitor fidelity to the core components of each of the interventions? Will they be formal or informal? How did the state make these decisions?
2. Who will collect and analyze this information?

### C. Identify Outcome Measures

Identify data that can be collected to determine the extent to which the intervention is affecting the desired outcome.

1. What outcome data does the state intend to use to measure the goals identified in Step 3?
2. How will the state track early performance on these outcomes in initial implementation sites and/or initial implementation populations?
3. What measures will be used to determine whether there is improvement in identified outcomes?
4. Are there any data collection or data quality issues to be considered and addressed?

*Helpful Hint: Development and adjustment of data collection efforts take time. Planning and testing for these changes should begin early. Pay special attention to ensuring data quality and ensuring that the state has measures for assessing change in all outcomes it intends to improve through the CFSP and CFSR-PIP process.*

#### **D. Develop Feedback Loops**

Establish feedback loops to report progress, successes, barriers and lessons learned. Consider feedback loops for those implementing the intervention, those supporting the intervention, and the consumers and partners participating in and/or affected by the intervention.

1. What communication process(es) need to be put into place to ensure that the state can learn what implementers, partners, and stakeholders such as parents, youth, and families are experiencing in a timely manner?
2. Which feedback loops are needed at the local implementation level and which are needed at the state level?
3. How will results from the fidelity assessments be shared with those implementing the interventions so adjustments can be made, as needed?
4. What processes need to be put in place to ensure that the feedback is received by someone who can take action to provide supports and/or address barriers?
5. What process will be in place to ensure that bi-directional communication for responses/solutions to concerns are provided in a timely manner?

*Helpful Hint: The state may want to use statewide and local implementation teams that meet frequently during the initial implementation stage. These teams are able to problem-solve and provide a rapid response to barriers identified as the intervention first begins.*

#### **E. Update Communication Plan**

Update the plan for communication identified in Step 1 based on the objectives and interventions selected.

## PHASE 3—ACTION

In this phase, the child welfare agency, partners and stakeholders, including parents, youth, and families, begin to experience the changes, and the implementation team is engaged in continuous monitoring and improvement of the change effort.

### STEP 9: INITIAL IMPLEMENTATION, ASSESSMENT OF PROGRESS, AND ADJUSTMENT

The purposes of Step 9 are for the state to (1) move forward with implementation of the interventions; (2) use feedback loops and process measures to assess how well the implementation is going; and (3) make initial adjustments to address any identified challenges.

#### A. Begin Implementing Interventions

Referring to the implementation plan developed in Step 7, consider:

1. Is the state meeting the timelines for starting the implementation? Are any pieces behind or ahead of schedule?
2. To what extent are the resources and supports for each intervention in place? Consider administrative, staffing, and leadership supports.

#### B. Begin Initial Fidelity Monitoring

Using the measures identified in Step 8, consider:

1. How well is the intervention being implemented according to the model?
2. How well are the core components of the intervention being implemented? Consider key processes such as referral, intake, assessment, service provision, and follow-up.
3. To what extent are the fidelity protocols developed in Step 8 being used? Are any areas of practice not following the fidelity protocols?
4. How consistent is practice from site to site?
5. If there is no information on fidelity, what are the barriers to getting this information?

#### C. Begin Collecting Data On Initial Processes And Outcomes

For each intervention, use the process measures established in Step 8 to consider:

1. What are the process measures indicating? For example, how many clients are being referred, or how many are receiving services at each implementation site?
2. What are the preliminary indicators of success? Is there any indication of unintended negative consequences? Are there differences across sites? What might this indicate?
3. If initial information about implementation processes and preliminary data about children or families served is not available or reliable, what are the barriers to getting this information?



## **D. Begin Implementing Feedback Loops**

Using the feedback loops established in Step 8, consider:

1. What feedback is being received from those implementing the intervention(s), those supporting the intervention(s), and consumers and partners implementing and/or affected by the intervention(s)?
2. What feedback is being received at each level of the agency?
3. If no feedback has been received, or feedback has only been received from some of the key groups, what are the barriers to obtaining feedback?

## **E. Make Initial Adjustments**

Based on information from feedback loops, process measures, and fidelity monitoring, what action(s) will the state take to strengthen implementation for each intervention? Consider statewide actions as well as site-specific actions. Consider actions that address strengthening implementation supports and fidelity.

## **STEP 10: ASSESS IMPROVEMENT IN OUTCOMES AND ADJUST INTERVENTIONS**

The purpose of Step 10 is for the state to determine whether the interventions are having the intended effect, and to make adjustments as necessary.

### **A. Assess Effect**

To determine whether each intervention is having the intended effect and achieving outcomes, the state reviews information obtained through from the feedback loops and outcome measures. Consider:

1. To what extent is each intervention improving performance on the measures?
2. To what extent is the performance on these measures consistent from site to site?
3. Are there any unintended negative effects? If so, what are they, and how can the state mitigate or eliminate them?

### **B. Make Adjustments**

Based on the information identified above, determine whether adjustments are needed.

*Helpful Hint: It is important to determine the reason for the concerns or lack of progress so relevant adjustments can be made. Before making modifications to a component of the intervention, determine whether the concern/lack of progress is because of faulty, incomplete, or insufficiently supported implementation processes. Consider alternative interventions only when the state has ruled out faulty, incomplete, or insufficiently supported implementation processes.*

Address Implementation Concerns (if applicable)

1. What supports need to be put in place or strengthened to improve implementation?
2. How can fidelity to the model be strengthened? Are there barriers that need to be addressed to ensure that the intervention is being implemented as intended?
3. What adjustments can be made that will not alter the core components of the intervention and the associated likely outcomes?

Address Intervention Concerns (if applicable)

1. If implementation is proceeding with the proper supports in place and according to the practice guide (i.e., all core components are in place), why are outcomes not being achieved?
2. Do adjustments to core components need to be made? Consider adjusting core components only after determining that the proposed changes will not have a negative effect on achievement of outcomes. As adjustments are being considered, refer to the theory of change and how the original intervention was supposed to improve the intended outcomes.

**STEP 11: SCALE UP AND SUSTAIN**

The purpose of Step 11 is for the state to determine when an intervention is ready for expansion and to plan and implement this expansion with necessary supports in place.

In Step 7, the state identified the initial site(s) for implementation and the sequencing of sites for subsequent implementation. The state also developed criteria to determine when each intervention should be scaled up. In this final step, the focus is on reviewing the information and data from the initial site(s), identifying lessons learned, and applying the criteria to determine if, when, and how statewide expansion should occur.

**A. Determine Whether Intervention Is Ready for Expansion**

Analyze data and information on the initial implementation efforts to determine whether the intervention is ready for expansion based upon criteria for expansion in the Implementation Plan. Consider information received through feedbacks loops, and process, fidelity, and outcome measures (refer to Step 10).

1. Is implementation in the initial site(s) happening in a way that is consistent with the model?
2. Is the intervention having the intended benefit at the initial sites?
3. Is the intervention achieving the required improvement in CFSP or CFSR-PIP outcomes?

Consider adjustments that were made in the initial site(s):

1. Has the initial implementation site(s) had sufficient time to assess whether adjustments are having the desired benefit?
2. What do data and information show about the adjustments?

## **B. Assess and Adjust Implementation Plan for Expansion**

Revisit roll-out schedule in Implementation Plan. Based on data and information from feedback loops and the process, fidelity and outcome measures, do the roll-out schedule and sequencing still make sense?

Adjust the expansion plan based on data and lessons learned:

1. What new supports have been identified or put in place based on the experience of initial site(s)?
2. Are those supports available for the next sites?
3. Are adjustments made to initial site(s) being incorporated into planning for the next sites?

## **C. Assess Supports and Implementation Activities to Prepare Next Sites**

Review supports and readiness activities for the next site to determine whether the site is prepared to begin implementation activities.

1. Has a local implementation team been formed?
2. Have readiness activities taken place with staff, stakeholders, and community partners?
3. Have the successes and lessons learned from initial sites been communicated to next sites?
4. Are supports in place or planned for next sites?

## **D. Sustain Improvement**

Determine and put in place plans and mechanisms to sustain the improvement efforts after the completion of the CFSR-PIP or achievement of the CFSP improvements.

1. How will the state know the intervention is being implemented on an ongoing basis in the intended manner to achieve positive results?
2. What processes will be in place to monitor ongoing implementation and achievement of outcomes?