

2-2017

# Public Child Welfare and a Multi-Agency Collaborative: Lessons Learned From the DREAMR Project

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## Repository Citation

Tudor, J., Gomez, E., Denby, R. W. (2017). Public Child Welfare and a Multi-Agency Collaborative: Lessons Learned From the DREAMR Project. *The Lincy Institute Issue Brief Social Services Series(4)*, 1-15.

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# Public Child & Welfare

**a Multi-Agency Collaborative:**  
Lessons Learned From the DREAMR Project

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# Implementation Highlights

- One of the strengths of the DREAMR project was the fact that it was a youth-driven, public child welfare-based, multi-agency collaboration from the very beginning to the end of the project.
  - A well-planned, implementation science-based approach was used to guide the project.
  - Four barriers to effective implementation surfaced. Those barriers included: (1) issues surrounding confidentiality and privacy; (2) information sharing; (3) frequent change in leadership; and (4) differences in organizational culture among partner agencies.
  - An implementation and satisfaction tool was created and implemented to analyze project stakeholders' perception of: (1) youth involvement; (2) project goal implementation; (3) accountability and outcomes; (4) communication; (5) involvement in planning; (6) involvement and satisfaction; and (7) sociodemographics.
  - Despite implementation challenges, process and implementation evaluation results revealed that the DREAMR program model spurred innovation, increased collaboration, and led to many of the partner agencies serving child welfare populations when they had not previously done so.
  - Multiple points of consideration for promoting interagency collaboration in child welfare systems are offered.
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February 2017

# Public Child Welfare and a Multi-Agency Collaborative: Lessons Learned From the DREAMR Project

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## Abstract

**A** five-year federal demonstration project funded by the U.S. Department of Health and Human Services, Children’s Bureau, guided by an implementation science model, sought to increase well-being in youths age 12–21 who had involvement with the child welfare system. By increasing the youths’ relational competency skills, the project targeted the reduction of multiple risk factors, including teen pregnancy, depression, anxiety, stress, and other indicators of adverse psychosocial well-being. The project, led by the local child welfare authority, was implemented by a multi-organization collaborative comprising several private nonprofit child- and family-serving agencies, public health, legal entities, private sector (i.e., technology software company), and university researchers. Various barriers to successful program implementation were experienced while at the same time the project witnessed key markers of implementation success. Reported here are some of the strategies used to overcome barriers to implementation success. Also described are the results of an implementation evaluation in which collaborative members assessed the project on its overall effectiveness in meeting indicators of success that were decided a priori and included youth involvement, adherence to program goals, involvement of all partners, accountability, communication, and stakeholder satisfaction. Implications and strategies for promoting interagency collaboration in the context of child welfare are offered.



## **Collaborating to Implement Innovative Programs in Child Welfare: The DREAMR Demonstration Project**

The Determined, Responsible, and Empowered Adolescents Mentoring Relationships (DREAMR) project offered an opportunity to address a critical issue being seen in child welfare across the country. Although progress had been made to decrease the number of youths in foster care, we were seeing increases in the number of youths aging out of foster care without permanency, from 19,367 youths in 2002 to 27,854 in 2010 (U.S. Dept. of Health and Human Services, ACF,ACYF, Children’s Bureau. 2002, 2010a). The Clark County Department of Family Services (CCDFS) and the University of Nevada, Las Vegas (UNLV) Lincy Institute were the first two partners for DREAMR. Several community partners, current foster youths, and alumni of foster care were invited to come to the table to help design our approach and collaborate on the project. Two of the project partners, Olive Crest and Safe Alternatives for Family and Youth (SAFY), both family foster care agencies, provide therapeutic foster homes for youths as well as services to support the foster families and youths in their programs. Big Brothers and Big Sisters of Southern Nevada (BBSSN) provide mentors for youths in the community, and at the inception of the DREAMR project they had recently started providing a specific mentoring program for youths in foster care. Dashun Jackson, the foster youth advisory board president, and Anntesha Chesterton, an alumna of foster care, were all on the initial planning committee and eventually served as technical advisors throughout the duration of the project.

After several brainstorming sessions, various elements of the proposed intervention came together. CCDFS as well as SAFY and Olive Crest had previously received training in the 3-5-7 Model™ and identified it as a promising practice to address relational competency but at the time did not have a plan for how to implement the model into practice in Clark County. The 3-5-7 Model™ became our primary intervention for addressing relational competencies and for developing protective factors in youths. As a result, the planning group invited Dr. Darla Henry, purveyor of the 3-5-7 Model™, to join the collaboration. For more information about the 3-5-7 Model™, see the companion brief in this series titled, Implementation Science and Fidelity Measurement: Using the 3-5-7 Model™ with Foster Youth. Mr. Jackson and Ms. Chesterton were instrumental in identifying the need for mentors, ideally mentors who had previously experienced foster care. Mentors would also be trained in the 3-5-7 Model™. The group also determined that it would be critical for the case

workers and foster care providers involved to be trained in the 3-5-7 Model™ to be able to support the youths who were receiving the 3-5-7 Model™ intervention. SAFY agreed to provide the 3-5-7 Model™ training for foster parents whose youths were participating in the project.

The planning group realized it would need to determine a specific target population, and although everyone felt these services would benefit all youths in foster care, we knew we had to make the project manageable, which meant developing criteria for whom we would serve. At the time, Olive Crest was providing the Nurturing Parenting Program to former foster youths who had received Housing Choice vouchers from the Housing Authority. Olive Crest reported that of the 25 alumni of foster care involved in the Housing Choice Voucher program, 16 were either pregnant or parenting. As we began to look at the number of pregnant and parenting foster youths and former foster youths in Clark County as well as some of the outcomes associated with being a parent in or after foster care, it became clear that this was the population with whom we could have a significant impact, especially in prevention of pregnancy for those foster youths and young adults who were 12 to 21 years old. The planning group invited the Southern Nevada Health District to join our efforts. The Health District already had a project to address unplanned pregnancy in our community and was able to provide a teen pregnancy prevention and reproductive health intervention as part of the overall intervention. (The intervention used was the Be Proud Be Responsible model. For more information, see the companion brief pertaining to reproductive health in this series.) Olive Crest agreed to provide their Nurturing Parent Program to any youths in the program who were already parenting.

The planning group then began to tackle the issue of recruiting youths to participate in the program. Youths in this age group have various competing demands between school, extracurricular activities, and counseling appointments that would make it challenging to engage them in the DREAMR program. The planning group reached out to SPIRIT, a private corporation in the community. SPIRIT is an acronym for Suppression, Prevention, Intervention, Referral, Intelligence Tool (S.P.I.R.I.T.). The SPIRIT software technology provides solutions via an integrated data exchange between public child- and family-serving agencies and private community-based service providers for facilitating, managing, and administering support and services.

SPIRIT had been working on developing applications for smartphones to assist with service coordination for juvenile justice youths. When the planning group approached them about a similar application for the DREAMR project that would include giving youths the

incentive of having a smartphone for participating in the program, they were excited to become part of the project. The SPIRIT application allowed community partners to maintain contact and information about every aspect of a foster youth's involvement in the project. Through the use of smartphones provided to youths and a Web-based application, SPIRIT transmitted to youths reminders regarding appointments, alerts to service providers regarding whether a youth attended their scheduled program, information about what community partners are currently working with the youths, and alerts about any program changes, updates, or information. For more information about SPIRIT and the use of smartphones in this project, see the companion issue brief in this series titled, *Becoming "Smart" about Relationship Building: Foster Care Youths and the Use of Technology*.

One of the strengths for how the DREAMR project was developed was the commitment to collaboration from the very beginning. Historically, the child welfare agencies have tried to address these issues internally, but the difference with DREAMR is that the agency and the community partners committed to this collaborative approach from its inception. Each agency brought their own strengths and quickly identified how they could contribute and acknowledged not only how this project could benefit the target population but could also benefit each of the community partners in serving foster youths and strengthening our community as a whole.

## **Implementation Science and Requisite Supports**

Grantees were encouraged to utilize implementation science as outlined by the National Implementation Research Network (NIRN) and James Bell and Associates (JBA) Concepts (Permanency Innovations Initiative Training and Technical Assistance Project, 2016). The DREAMR project was successful in following the implementation science as it relates to conceptualization and planning. The Department of Family Services and The Lincy Institute partnered to assess community needs and developed the program plan and program evaluation. Infrastructure was developed through identifying DREAMR champions in all of the community agencies involved. The DREAMR project began with committed partners who were enthusiastic and dedicated to the project. The Department of Family Services (DFS) developed internal organizational support through developing and managing the youth care specialists who would implement the 3-5-7 Model™ with the youths and young adults. DFS held site meetings with all the permanency workers to inform them about the DREAMR project and encouraged them to refer youths and young

adults to the program. The community partners also held meetings within their organizations to inform the community and any foster youths who were also being served by their agencies about the DREAMR Project. Implementation teams were developed to manage the overall implementation plan for the DREAMR project. It is important to note that DREAMR project youth leadership remained committed to the planning, implementation, and evaluation. This is definitely worth recognizing as often times in child welfare youth engagement and sustainability has posed challenges to previous projects due to various factors of instability that often interfere with alumni of foster care continuing to participate in child welfare demonstration projects. Ironically, for the DREAMR project, while the youth leadership remained consistent and steadfast throughout the project it was the instability in agency leadership that became one of the major barriers to the success of the project.

As DREAMR moved into the project implementation phase, leadership turnover within the project and a lack of proactive sustainability efforts created many challenges for implementation. In 2011, the DFS director resigned, 93 full-time positions and 78 part-time positions were vacant as a result of cost containment measures that had been put into place due to the Great Recession, and intake reports, investigations, and removals were increasing (Morton, 2011). In 2012, Year 2 of the DREAMR project, a key project champion and manager at DFS left the agency. Although a new manager was identified to lead the project prior to leaving the grant, due to continued understaffing, lack of resources, and new priorities from changes in the DFS director and leadership, the commitment to DREAMR had decreased. In Year 3 of the project, the project manager and supervisor of the youth specialist positions resigned from DFS. Issues related to sustainability influenced the project manager's departure. As DFS leadership commitment decreased, there was no leadership in planning for sustainability. The project manager position was funded by a grant; therefore, with no commitment from DFS to continue the project, the project manager had to pursue a more permanent, funded position.

In times of crisis, child welfare agencies often make the mistake of addressing problems reactively rather than promoting preventative community approaches (Pecora & Chahine, 2016). No one at DFS held the historical knowledge or the will to invest time or resources into a preventative community approach and therefore transferred the youth specialist positions to be managed by one of the community partners, Olive Crest. However, in Year 4 of the DREAMR project the project champion at Olive Crest also unexpectedly left the agency. All of these changes affected the ability to recruit youths and young adults into the program and to maintain the

collaboration among community members as the child welfare agency became more and more reactionary to competing priorities and focused on other initiatives.

Research has shown that when child welfare leaders face competing priorities they are well served if they are able to identify how grant initiatives complement the larger goals of the agency. When child welfare administrators are able to identify the parallel interests of the grant and that of the agency, they are able to diffuse tensions and generate support among key stakeholders (U.S. Department of Health and Human Services, 2010b). Although there were various project champions at management levels within DFS and other community agencies, these project champions were not able to engage the executive leadership in their agencies to continue to support DREAMR or commit to sustaining DREAMR.

## Implementation and Satisfaction Evaluation

The research team decided that it was important to measure the quality of the interactions among all partners involved and to ascertain the partners' perceptions of project implementation. As a result, a project implementation and satisfaction survey was created with the help of the project committee. The purpose of the survey was to focus on areas that might need some work such as communication, accountability, and involvement.

In this context, throughout the 5 years of the project, the research team distributed an annual implementation and satisfaction survey. This survey had the primary objective of capturing the reactions of all stakeholders (managers, providers, advisory board members) involved in the DREAMR project. The survey consisted of 36 questions divided into seven sections: Youth Involvement, Project Goal Implementation, Accountability and Outcomes, Communication, Involvement in Planning, Involvement and Satisfaction, and Stakeholder Sociodemographics.

An email listing of individuals identified as stakeholders for the DREAMR project was compiled. The majority of these individuals were active members of the DREAMR advisory board that convened monthly to discuss project progress and offer feedback. The individuals on the email listing were then emailed a link to a survey using the data collection platform Qualtrics®. The survey was open for 14 days each year and final results were shared with project members.

## Sample

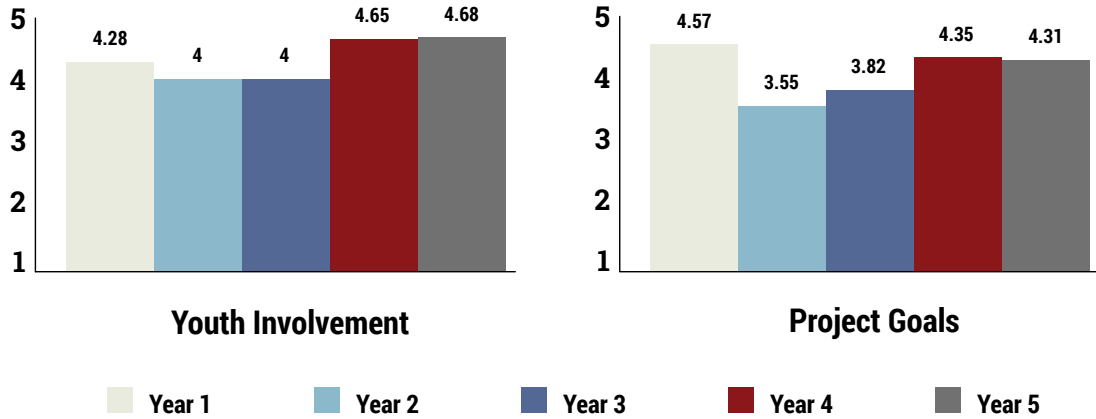
The majority of respondents (80%) were female, and 20% were male. The following ethnicities were represented among the stakeholders: White/Caucasian (46%), Black/African-American (36%), and Latino/Hispanic (9%). A number of professional fields were represented among the stakeholders, with the majority (46%) being employed in the area of social work. The remaining individuals were employed in education or public health, were former foster youth, or represented other professions, including technology and human services staff at nonprofits. Regarding their positions in their agencies, approximately 23% identified as administrators, another 23% were employees, and another 23% identified as "other" or "community contacts." Furthermore, 8% identified as group leaders and 15% were managers.

## Results

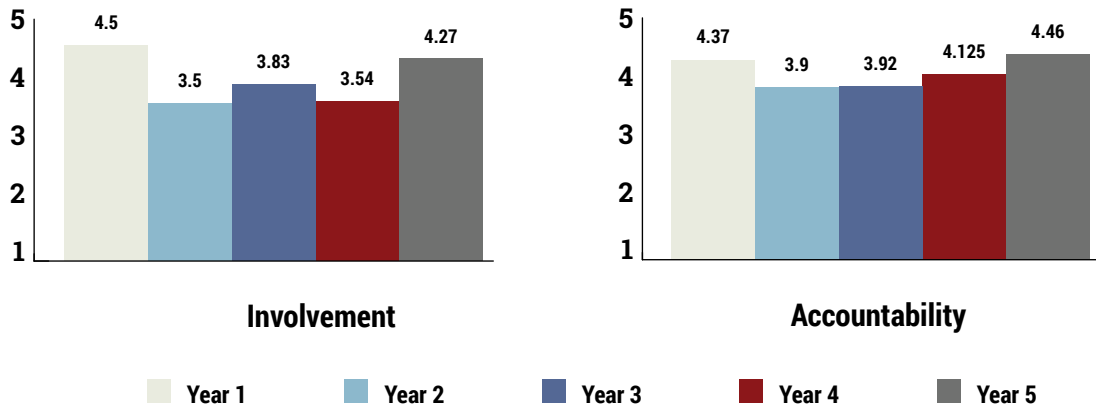
For each question, a Likert-type scale was used to rate respondents' level of agreement with a statement. The possible responses included strongly disagree (1), disagree (2), neutral (3), agree (4), and strongly agree (5). As shown in Figure 1, most stakeholders agreed with the level of youth involvement elicited throughout the project, averaging toward the end of the grant a 4.68 (situated in the upper scale of level of agreement). With respect to project implementation, we noticed a slight decrease from early years (4.57 to 4.31)—this decrease could be a result of changes in leadership that affected the proper implementation of the project goals by losing momentum and institutional memory. Figure 2 indicates that stakeholders reported neutral to slight level of agreement with their involvement in the project, particularly in Year 2 (3.5) and Year 4 (3.54). During these 2 years there were several changes in service implementation, and as previously mentioned, the management of the project was transferred from the Department of Family Services to a partner agency. For the category of Accountability, as more outcome, process, and implementation data were collected, they became available to all partners through continuous data summits. This helped partners to guide their services using a data-driven approach and making adjustments (if needed) in their service provision. As seen in Figure 3, there was a steady increase in the level of agreement among stakeholders with respect to having an effective communication among partners and members involved. For overall satisfaction, stakeholders reported a significant drop during Year 2; after that year, all mean scores increased over time.

During the final year of the project, the respondents' level of satisfaction was high. They either agreed or strongly agreed with affirmative questions about the project (e.g., I am satisfied with the DREAMR Project's progress in implementing its goals).

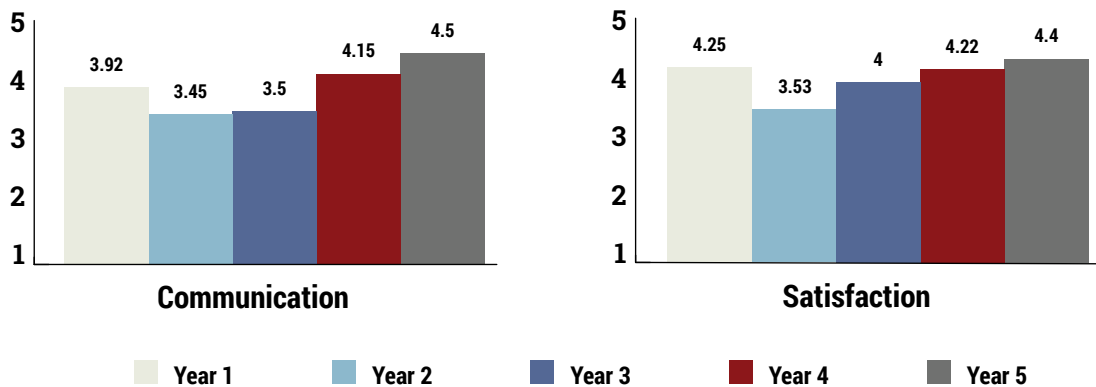
**Fig. 1 Stakeholder's Perception of Youth Leaders' Involvement & Project Goal Implementation**



**Fig. 2 Stakeholder Involvement & Accountability**



**Fig. 3 Stakeholder Communication and Overall Satisfaction**





## Barriers to Project Implementation

Multiple barriers arise when a large, multi-organization partnership implements innovative programs. Four of the more pervasive barriers to program implementation were issues of confidentiality and privacy, information sharing, a frequent change in leadership, and differences in organizational culture among partner agencies.

## Confidentiality and Privacy

Confidentiality and privacy issues are always at the forefront when conducting an experimental model of research such as the DREAMR project. Additionally, the grant required that all methods and aggregate outcomes be shared publicly but individual youth information remain confidential.

The researchers and evaluators for the DREAMR project had a very strict protocol in place to maintain the confidentiality of individual youths involved in DREAMR.

DREAMR had an innovative approach through the use of smartphones to incentivize youths to participate in the program, and the development of an application for the smartphone that would allow for service coordination and youth surveys for evaluation and would provide some normalcy for youths in foster care. The SPIRIT organization was new to the Las Vegas community and had initially come to the attention of the child welfare agency from developing a software application for juvenile justice youths. The application that had been developed for the juvenile justice population had the ability to provide service referrals as well as tracking features for youths who were on probation or house arrest. These features utilized the camera on the devices and GPS locators to ensure that juvenile justice youths were complying with the terms of their probation.

For the DREAMR project, we were exploring how we could adapt the software application to provide service coordination among various community providers who would be serving the youths. In addition, we could maintain a calendar and reminder functions to assist youths in keeping track of their appointments and conducting youth surveys about the project and have limited access to contacts based on honoring any no-contact orders or restrictions for contacts based on safety concerns from case managers. Utilizing smartphones as an incentive posed many challenges but was seen as a worthwhile innovative approach to engage youths in DREAMR.

The Children's Attorney Project (CAP) represents children in the foster care system. Although CAP had been invited to be on the planning team, in the beginning of the project they were inconsistent in attending meetings. Prior to program implementation CAP approached

the DREAMR project planning group with several concerns regarding confidentiality and privacy. They were concerned that the research approach could not guarantee the privacy of the youths involved and were concerned about the experimental approach of having a control group and treatment group where some youths would receive the intervention and others would not. CAP also had concerns with the use of smartphones. They were familiar with how the smartphones were to be used with the juvenile justice population and wanted assurances that the SPIRIT application would not have camera capabilities or GPS tracking that could violate the youths' privacy. CAP indicated that without a guarantee for youths' confidentiality and privacy, they would recommend to the court that consent not be given for youths to participate in DREAMR.

DREAMR requested technical assistance from the Children's Bureau to help frame discussions with CAP. Researchers ultimately obtained a Federal Certificate of Confidentiality to further safeguard the youths' data. Meetings between CAP and The Lincy Institute were held to describe the research and evaluation confidentiality procedures. Meetings were also scheduled with CAP and SPIRIT to assure CAP that the software application being developed would not have the tracking characteristics that were originally developed for the juvenile justice populations. DREAMR also arranged for a representative from CAP to attend the annual grantee meeting to hear about other demonstration projects and trends across the nation to improve child welfare outcomes. After several meetings and negotiations, CAP agreed to support the program. This process emphasized the importance of engaging all of the key stakeholders early in the planning process in order to get buy-in and collaboration from all stakeholders.

## Information and Data Sharing

Collaboration among all DREAMR project partners spurred service innovation. For example, when foster youth participants received a smartphone as an incentive to be part of the project, many of them reported that the smartphone had given them a “voice” and a more flexible outlet to communicate not only with service providers but also with their family members and friends (Denby, Gomez, & Alford, 2015). Furthermore, as a result of interagency collaboration, many partners were able to increase their service accessibility. For instance, Big Brothers and Big Sisters of Southern Nevada was able to expand its mentoring program to foster youths due to the strong support it had from the child welfare agency. As expected, increased service accessibility and service innovation required an information sharing system that could align with the needs of each service provider. As described, the SPIRIT organization provided software that was built into the smartphone of youth participants, and also created an electronic platform that allowed all partners to share notes with each other about a youth, input case updates (such as changes in placement), and enhance youth involvement by allowing the service provider to send messages or appointment reminders to their youths.

Unfortunately, the electronic platform proved to be difficult to use. The team and youths experienced glitches with the smartphone software, which affected communication among service providers. The lack of a reliable interoperable system created friction among service providers who were unable to properly share information about their youths, often causing disruption in service delivery.

## Organizational Culture

The lack of strong and consistent program leadership hindered the referral process of the project. One major obstacle faced by the project was the clear understanding of its overall purpose, i.e., to use a rigorous evaluation method to test the effectiveness of the services provided. Moreover, the lack of knowledge with respect to partners’ policies and practices interfered with interagency collaboration. Furthermore, implementing and conducting research activities in contexts not supported by a strong data-driven culture can undermine the research design. For example when the project coordinator left in the early years of the grant, many members involved—particularly caseworkers at the child welfare agency—did not fully understand the importance of the research component of the project and the additional steps that this demonstration project required in order to ensure participants’ confidentiality and privacy. This was an immediate problem because it decreased the number of referrals coming into the project as many

caseworkers (a primary source for referrals) were disinclined to recommend DREAMR to their youths because they might be placed in the control (treatment as usual) group. After the first project coordinator left, there was a significant loss of presence at the child welfare agency, and the institutional memory about the project and its overall purpose began to fade, ultimately resulting in the removal of the DREAMR project from the Department of Family Service and its adoption by a partner community agency.

The interagency collaboration created a multi-faceted line of services and project stakeholders were interested in learning the effect (if any) that each service component had on youth participants. This was easier said than done, a project with the dynamicity of DREAMR required comprehensive data systems that can help to track the trajectory of participants as they embark into a new, unprecedented service array. These data systems were not in place, and those systems available did not provide reliable information. As a result, the research team had the immediate need to collect primary data for even the most common variables that were of interest to the project e.g., is the youth pregnant or parenting? Collecting this information was difficult not only due to the transitory nature of foster youths, but because of the amount of time that it was required to administer and manage these data.

Second, each agency involved in the project had its own practices and policies (often unknown to the other partners) that were repetitive and sometimes slowed down service delivery. For example, even though all partners worked with the same youths, each partner agency had a different intake form. The absence of a universal and comprehensive assessment of the youths proved burdensome as they had to deal with many different people on a daily basis. The use of a comprehensive assessment would have helped the intervention team more effectively manage of each of their cases.

## Frequent Changeover in Leadership

One of the biggest barriers for the DREAMR project was the inability to sustain the innovation and collaborative preventative program during various changes in administrations, leadership, and priorities. The DREAMR grant began at a time when communities began to feel the effects from the Great Recession of 2008. As mentioned previously, DFS was beginning to see a spike in intake reports, investigations, and removals while functioning with more than 100 vacant positions in full-time and part-time positions. There were lawsuits looming from the National Center for Youth Law and highly publicized critics of DFS questioning the ability of the agency to keep children safe. Within a month of receiving the DREAMR grant the DFS director resigned, and unfortunately there would be two more director resignations and three managers directly responsible for DREAMR would also resign before Year 4 of the DREAMR grant. With this level of turnover in leadership, it is no surprise that there was also significant turnover for case managers within DFS as well. As a result, as new interim leaders stepped into their positions, the agency became more reactive to addressing competing priorities, rather than being strategic about how to move the agency practice forward. Job satisfaction decreased among the workforce, resulting in turnover and burn out. When faced with limited resources, those resources that were available went to support day-to-day policy and procedure requirements; therefore, support for a more preventative program such as DREAMR was often not given the attention needed to plan for participant recruitment challenges and program sustainability.

The first manager of the DREAMR project and its key champion left in the summer of 2013, the second manager left in early 2014, followed by the project manager leaving in summer of 2014. Each time the manager over the project left, the agency lost historical knowledge and commitment to the project. This situation eventually led to transferring the project management to one of the community agencies. Without the leadership and commitment of the child welfare agency the planning for sustainability did not occur.

These changes in leadership and management over the course of the grant directly affected the DREAMR projects success. Without the child welfare agency to champion the cause and help the community, legislators, and other key stakeholders recognize how the DREAMR outcomes directly affect key child welfare outcome goals regarding safety, permanency, and child well being, there was no commitment to sustainability. Throughout the DREAMR project youth leadership remained committed to the planning, implementation, and evaluation. This is definitely worth recognizing as often times in child welfare youth engagement and

sustainability has posed challenges to previous projects due to various factors of instability that often interfere with alumni of foster care continuing to participate in child welfare demonstration projects. Ironically, for the DREAMR project, while the youth leadership remained consistent and steadfast throughout the project it was the instability in agency leadership that became one of the major barriers to the success of the project.

## Looking Forward: Promoting Interagency Collaboration in the Child Welfare System

The saying “It takes a village to raise a child” is quoted frequently as we strive to make the world a better place for children, but for years child welfare agencies and the community have responded to child maltreatment as a “child rescue” intervention. According to Pecora and Chahine (2016), our response to maltreatment in child welfare needs a paradigm shift to understanding that “children need strong healthy families and families need strong healthy communities for children to be safe and thrive. This change would set the stage for a broader framework in which child maltreatment is a public health problem that requires the active involvement of multiple systems and communities to promote child safety and well-being in order to prevent maltreatment from happening in the first place” (Pecora & Chahine, 2016, p. 11).

Child welfare agencies are often surviving in resource-poor environments that can cause them to put every available resource toward the day-to-day supports of child protection. However, child welfare agencies are in the unique position to bring several community leaders, service providers, philanthropists, businesses, faith-based organizations, and government officials together to partner in developing policies and funding to address social issues that could prevent child maltreatment and benefit all involved by strengthening our communities and the families that contribute to those communities. Demonstration projects like DREAMR give communities the opportunity to collaborate and partner in ways that allow them to experiment with focusing on working together toward outcomes that not only benefit foster youths but also improve deep-rooted social issues like teen pregnancy and promoting healthy relationships among young adults so they can be productive members of our society. Research has shown that children have better outcomes when they remain home than in foster care (Kortenkamp & Ehrle, 2002). Children in foster care have higher levels of behavioral and emotional problems and expulsion from school than children who live with their parents and with high-risk single parents. Child welfare agencies must

move beyond the typical crisis response to tragic events to intervene only after the problem has occurred and become a convener for partners across public and private sectors to leverage resources that promote the well-being of children and families (Pecora & Chahine, 2016). This type of work requires us to successfully address the typical barriers to effective collaboration, including those experienced in the DREAMR project. Based on our experiences, we recommend the following points of consideration:

1. Early in the project, identify multiple champions of the work, especially if those individuals are employed by the lead child welfare agency. Likewise, there should be multiple champions of the project affiliated with each of the partner agencies.
2. Designate co-managers to oversee the project.
3. To the extent possible, reassign the managers' primary roles and responsibilities so that they have dedicated time for new program implementation.
4. Involve external policy makers, fiscal authorities, and other stakeholders early in the project.
5. Consider having leadership for the new project rest with a partner agency from the onset as opposed to the public child welfare authority. This consideration may be viable if there is less turnover in leadership and organizational stability within one of the partner agencies.
6. Solidify the role of each project partner early in the process.
7. Streamline the presence of work groups and subcommittees and ensure that there is research and program representative overlap in each workgroup.
8. Consider embedding the project in the child welfare authority's prevention or permanency units.
9. Be sure that the partner agencies' communication directors are members of the project advisory board.
10. Be sure that the head of the partners' (especially the child welfare agency) training units (worker and caregiver training) is a member of the project advisory board.
11. Engage in regular interface and communication with the partner agencies' board of directors so as to increase project buy-in and the desire to participate in project sustainability.
12. Engage technical advisors (current and former foster youths and caregivers) in every aspect of project planning, implementation, and evaluation.
13. Determine organizational-level and executive-level commitment to the implementation of innovative, multi-agency-involved endeavors and continue to update the assessment throughout the life of the project.
14. Illustrate how new projects and community innovations align with each partner agency's own goals and missions so as to keep the commitment and momentum for the grant-funded project going.
15. From a research vantage point, it is important to identify strong support from agencies through a strong data-driven culture and making sure all stakeholders understand the value of evaluation in improving practice.

Many aspects must be attended to in large-scale collaborations (Gray, 2000; Thomson, Perry, & Miller, 2007), and the DREAMR project was particularly challenged with respect to issues of agreements concerning confidentiality and privacy, data sharing, organizational culture, and constant turnover in leadership. Although the DREAMR project experienced many of the known barriers to implementation science, the project was able to achieve remarkable success. Much of that success can be attributed to the commitment to interagency collaboration that existed throughout every phase of the project regardless of the challenges. Process and implementation evaluation results revealed that the DREAMR program model spurred innovation, increased collaboration, and led to many of the partner agencies serving child welfare populations when they had not previously done so. Indeed the literature has documented the benefits that children and youths experience when they receive services through interagency collaboration models (Bai, Wells, & Hillemeier, 2009; Chuang & Wells, 2010; Colby & Murrell, 1998; Cottrell, Lucey, Porter, & Walker, 2000; Hurlburt et al., 2004).



# References

**Bai, Y., Wells, R., & Hillemeier, M. (2009).**

Coordination between child welfare agencies and mental health service providers, children's service use, and outcomes. *Child Abuse & Neglect*, 33, 372–381.

**Chuang, E., & Wells, R. (2010).**

The role of inter-agency collaboration in facilitating receipt of behavioral health services for youth involved with child welfare and juvenile justice. *Children and Youth Services Review*, 32, 1814–1822.

**Colby, S., & Murrell, W. (1998).**

Child welfare and substance abuse services: From barriers to collaboration. Thousand Oaks, CA: Sage.

**Cottrell, D., Lucey, D., Porter, I., & Walker, D. (2000).**

Joint working between child and adolescent mental health services and the department of social services: The Leeds model. *Clinical Child Psychology and Psychiatry*, 5(4), 481.

**Denby, R., Gomez, E., & Alford, K. (2015, July).**

Becoming “smart” about relationship building: Foster care youths and the use of technology. Social Service Series No. 3. Las Vegas: The Lincy Institute at the University Nevada Las Vegas.

**Gray, B. (2000).**

Assessing inter-organizational collaboration: Multiple conceptions and multiple methods. In D. Faulkner & M. DeRond (Eds.), *Cooperative strategy: Economic, business, and organizational issues* (pp. 243–260). New York, NY: Oxford University Press.

**Hurlburt, M., Leslie, L., Landsverk, J., Barth, R., Burns, B., Gibbons, R., et al. (2004).**

Contextual predictors of mental health service use among children open to child welfare. *Archives of General Psychiatry*, 61(12), 1217–1224.

**Kortenkamp, K., & Ehrle, J. (2002).**

The well-being of children involved with the child welfare system: A national overview. Series B, No. B-43. Washington, DC: Urban Institute.

**Morton, T. (2011).**

Department of Family Services director's report to the policy and fiscal affairs board. Retrieved from [http://www.clarkcountynv.gov/jjs/Documents/Department%20of%20Family%20Services%205\\_11.pdf](http://www.clarkcountynv.gov/jjs/Documents/Department%20of%20Family%20Services%205_11.pdf)

**Pecora, P. J., & Chahine, Z. (2016).**

Catalysts for child protection reform. CW 360 Child Welfare Reform, Spring, 11.

**Permanency Innovations Initiative Training and Technical Assistance Project. (2016).**

The development, implementation, and assessment approach. Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau.

**Thomson, A., Perry, J., & Miller, T. (2007).**

Conceptualizing and measuring collaboration. *Journal of Public Administration Research and Theory*, 19, 23–56.

**U.S. Dept. of Health and Human Services, ACF, ACYF, Children's Bureau. (2002).**

The AFCARS Report: FY2002. Retrieved from <http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport12.pdf>

**U.S. Dept. of Health and Human Services, ACF, ACYF, Children's Bureau. (2010a).**

The AFCARS report: FY2010. Retrieved from <http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport18.pdf>

**U.S. Dept. of Health and Human Services, ACF, ACYF, Children's Bureau. (2010b).**

Leadership in improving child welfare outcomes of care initiative. Retrieved from <https://www.childwelfare.gov/pubPDFs/LeadershipBrief.pdf>

# Suggested Collaboration, Implementation Science, and Program Innovation Resources

## Building and Sustaining Child Welfare Partnerships

In recent years, the importance of interagency collaboration and community partnerships in child welfare has been increasingly acknowledged. Collaboration allows child welfare agencies and other child- and family-serving agencies to meet the complex needs of children and families while building on their strengths. This brief summarized Systems of Care evaluation findings that relate to collaboration also draws from lessons learned by Systems of Care communities to present key steps and strategies for building and sustaining effective partnerships. Retrieved from <https://www.childwelfare.gov/pubPDFs/BuildingandSustainingChildWelfarePartnerships.pdf>

## Social Innovation Fund

This website discusses the Social Innovation Fund (SIF), which mobilizes private resources to improve community solutions followed by evidence of results. Users will find information about their programs, evidence and evaluations, knowledge initiatives, and more. Retrieved from <http://www.nationalservice.gov/programs/social-innovation-fund/our-programs>

## Stanford Social Innovation Review

Stanford Social Innovation Review's (SSIR) mission is to advance, educate, and inspire the field of social innovation by seeking out, cultivating, and disseminating the best in research and practice-based knowledge. This site includes webinars, conferences, magazines, online articles, podcasts, and theories on a wide variety of topics such as human rights, impact investing, and nonprofit business models. Retrieved from <http://ssir.org/>

## Integrated Services for People with Complex Needs

Center for Health Care Strategies, Inc. (CHCS) supports practical and cost-effective solutions to ensure that all Medicaid beneficiaries with complex physical, behavioral, and social service needs are served by person-centered systems of care. The organization works with the federal government, multiple state agencies, health plans, providers, and consumer organizations to foster the best ways to organize, finance, and deliver care.

High-risk children and youths, adults with complex needs, and Medicare-Medicaid enrollees' managed long-term services and supports are their priority populations. Retrieved from [http://www.chcs.org/focus\\_area/integrated-care-for-people-with-complex-needs/](http://www.chcs.org/focus_area/integrated-care-for-people-with-complex-needs/)

## Permanency Innovations Initiative (PII) Evaluation, 2010–2015

The Permanency Innovations Initiative (PII) is a multi-site federal demonstration project designed to advance permanency outcomes among children in foster care who have the most severe barriers to permanency. This website gives more information about this project and also lets users browse by topic. Some of the topics discussed include abuse, neglect, adoption, family and youth services, strengthening families, healthy marriage, and responsible fatherhood. Retrieved from <http://www.acf.hhs.gov/opre/research/project/permanency-innovations-initiative-pii-evaluation>

## Creating a Permanence-Driven Organization: Center for Advanced Studies in Child Welfare A Guidebook for Change in Child Welfare

This guidebook aims to promote practices that assist organizations with improving permanency outcomes for children and youths exiting treatment foster care. The writers believe innovation that advances child welfare practices significantly diminishes the systemic re-traumatization of children and youth and want to serve all youths living in all settings, including foster homes, group homes, residential, juvenile detention, kinship care, and so forth. Retrieved from <https://www.anufs.org/assets/forms/AnuGuide.pdf>

## Casey Family Programs

Casey Family Programs' mission is to provide and improve—and ultimately prevent the need for—foster care. Through consulting, direct services, public policy, and research analysis, this program works to influence long-lasting improvement in the safety and success of children, families, and the communities in which they reside. Retrieved from <http://www.casey.org/>

## **Indiana Child Welfare Education and Training Partnership**

The Indiana Child Welfare Education and Training Partnership's vision and mission is to enhance the health, safety, and well-being of all children and families in Indiana. This partnership provides services in training delivery and curriculum development, production and training support, training records management, and training evaluation to meet the workforce development needs of the Indiana Department of Child Services. Retrieved from <http://childwelfare.iu.edu/about.html>

## **Longitudinal Data Analytics Publications**

Chapin Hall at the University of Chicago provides policy research that benefits children, families, and their communities. Some of their research areas focus on child welfare and foster care systems and community change, and they also have longitudinal data analytics for readers to follow. Retrieved from <http://www.chapinhall.org/about>

## **Practice Innovations in Child Welfare**

Improving outcomes for children, youths, and families served in the community has been the objective of new practices emerging throughout the nation. Child welfare agencies are working to improve results to strengthen workforce capacity and stakeholder buy-in and also to increase trust with customers and stakeholders. Implementing innovative practices that are proactive to the needs of the community that are strategic in their focus, flexible and adaptable while producing more efficient and sustainable outcomes for those served are discussed. Retrieved from <http://www.aphsa.org/content/dam/aphsa/pdfs/OE/InnovativePracticesinChildWelfare.pdf>

## **Engaging Parents: Innovative Approaches in Child Welfare**

Purposeful engagement of parents in the child welfare system can often appear evasive, but innovative approaches that alleviate the obstacles of engagement and more effectively address concrete and support needs can ease the process. This article discusses two innovative approaches to parent engagement, the challenges and innovative features of each, and program efficacy data. The first model, The Parent Mentoring Program, uses specially trained foster parents to support biological parents. The second model, the Parent Partners Program, is a peer-to-peer program that uses parents who have successfully navigated the child welfare system. Retrieved from <http://www.centerforchildwelfare.org/kb/bppub/engaging-parents-innovative.pdf>

## **National Implementation Research Network (NIRN)**

This group has studied implementation drivers and has a data collection tool that can help assess infrastructure supports needed to successfully implement a program. The three major drivers of implementation success—competency drivers, organization drivers, and leadership drivers are—reviewed on their website. <http://nirn.fpg.unc.edu/>

## **RAND Health of the RAND Corporation**

This website and related resources contained on the site provide a discussion of the challenges that programs encounter when trying to implement prevention programs. A 10-step strategy, contextually discussed in three stages—planning, implementing and evaluating—is offered to support new program implementation. [http://www.rand.org/pubs/technical\\_reports/TR101z2.html](http://www.rand.org/pubs/technical_reports/TR101z2.html)

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## Acknowledgments

This study and the DREAMR project are funded by the U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. The authors wish to thank Maya Porter editing drafts of this brief. Also, we would like to express our gratitude to Imani Gayden for her important contributions. A debt of gratitude is extended to Anntesha Chesterton and Dashun Jackson for their leadership and guidance. The DREAMR Advisory Board and all project partners are the true champions of this project. Thank you for your dedication to the children and families of our community.

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Established in 2009, The Lincy Institute conducts and supports research that focuses on improving Nevada's health, education, and social services. This research is used to build capacity for service providers and enhance efforts to draw state and federal money to greater Las Vegas. The Lincy Institute also highlights key issues that affect public policy and quality-of-life decisions on behalf of children, seniors, and families in Nevada. The Lincy Institute has been made possible by the generous support of The Lincy Foundation. Robert E. Lang, Ph.D., serves as the Institute's Executive Director. To learn more visit <http://www.unlv.edu/lincyinstitute>

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### FOR MORE INFORMATION

Visit the DREAMR website <http://dreamrproject.org/> and our Youtube Channel

<https://www.youtube.com/channel/UCemvcrC4RPtgdRMG6DnAsfQ>

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