



Improving the Match Between Connecticut Families and Child Welfare Services

The Government Performance Lab awarded pro bono technical assistance to help Connecticut's Department of Children and Families pilot improvements to the way the agency matches families to services.

The Challenge:

Connecticut's Department of Children and Families (DCF) identified three areas where the agency sought to strengthen its practice: 1) When matching families with services, social workers often lacked important information on the history and risk factors of the family, what services were available, and the providers who administer those services. Data collected at the social worker, regional, and central agency levels were not connected, so it was challenging for case workers to know whether the family had been treated before and whether or not the treatment had been effective. Heavy caseloads and high turnover among social workers made it difficult to build informal institutional knowledge, so social workers often were only familiar with a handful of the more than 90 services available, matching clients with available slots in the services they were familiar with. Clinical staff were available to social workers to advise on cases with factors such as trauma or substance use, but many workers did not consult the clinical staff, causing information on client needs to pass undetected. 2) The agency was eager to shift its service array to better match the needs of the population it serves, but because it did not track service preferences or consistently maintain waitlists, it was not able to judge what services its population actually needed but had not been able to obtain. 3) Providers and agency staff wanted to work more closely on improving service fit, timeliness, and program delivery but needed additional supports in structuring that collaboration.

The Project:

Across DCF's six regions, agency staff had developed local improvements to the referral process, but requested the GPL's assistance in synthesizing those innovations into a coherent, consistent set of practices and tools to support workers in matching families with the right services. The Enhanced Service Coordination project created a new process for matching clients to the services. The new process provided key information to social workers to improve their referral decisions, collected data from social workers and providers to inform agency decisions about what services to buy, and helped the agency and providers work more closely to address challenges with service delivery.

The Innovations:

Redesigning the referral process to focus on more effectively assessing families' needs and matching them to services

The Enhanced Service Coordination project redesigned the referral process and created a set of data, tools, and resources for staff to draw on to increase the consistency and quality of service match and improve outcomes for clients. Those supports include:

- Institution of a Service Coordinator, a **new role that supports social workers** in the referral process. The Service Coordinator assists social workers in navigating available information on client history, service types, and provider performance. Social workers assess client needs and recommend the best service for those needs. The Service Coordinator consults with social workers to assess referral appropriateness and, after considering available slots, makes the referrals to providers. The Service Coordinator also

troubleshoots concerns with providers, tightening the feedback loop between social workers and providers.

- Testing a **universal referral form** to replace 89 different paper referral forms for services. The redesigned referral form complements a **referral decision making tool** to focus referral decisions on ascertaining what service best suits the client's needs. The streamlined form reduces the burden on front line workers, allows staff to more nimbly adjust referrals between service types, and will inform how to structure the referral process in DCF's new case information system.
- Service Coordinators use tools such as a newly-developed **service array summary** to equip social workers to communicate with families about previously underutilized services, including community services designed to meet the needs of target populations, such as African American fathers.

Use of data to inform real-time decision making including improvements to case practice and gaps in the service array

- The **referral decision making tool makes previously siloed data available to agency staff**, allowing them to draw on information including client service history, response to prior services, impact of services on similar families, and cultural or language considerations such as availability of bilingual clinicians during the referral process.
- The new process incorporates targeted clinical insight on family needs through **case review and multidisciplinary consultations on high priority cases**. Consultations previously happened on an ad hoc basis; cases that missed clinical insight often ended up in crisis. Under the new process, consultations occur earlier, more regularly, and are cross-discipline in order to consistently identify needs such as intimate partner violence, substance use, mental health, and trauma.
- Implementation of a **referral log and dashboard** allows agency leadership to track trends in referral, share insights between different levels of the agency, address delays between intake and admission to appropriate services, and prevent clients from falling through the cracks during handoffs.
- By asking social workers to indicate service preferences on the **universal referral form**, the new process captures the services the social workers would recommend assigning clients to if all services had open slots, allowing the agency to identify areas of unmet need and adjust its procurement in response. It also allows the agency to identify areas where social workers would benefit from additional training to improve referrals and provides a more accurate account of service demand for many interventions.

Collaboration with providers to improve performance

- The Enhanced Service Coordination process shifts providers from multiple overlapping points of contact across the agency to the Service Coordinator as a single point of regional contact for related services. Providers reported during the initial pilot that shift to a Service Coordinator who is knowledgeable about the services and empowered to raise and resolve issues with service delivery had already significantly improved interactions with the agency and allowed the agency to quickly identify and correct cases of poor service fit. Providers reported, for example, that ineligible referrals, which must be sent back to the agency and caused delays in processing, had ceased.
- As part of the project, the agency is piloting use of collaborative, data-driven conversations between agency and providers intended to resolve problems with service delivery and identify opportunities for systems reengineering. This active contract management approach is being tested on intensive family preservation services across the state with the goal of expanding to other service types.