

## Good Child Welfare Metrics May Help Avert Lawsuits

Today's child welfare administrators, supervisors, and front-line staff need real-time information for real-time concerns. So do the clients, regulators, advocates, and journalists that have an interest in the agency. Without immediate access to relevant data, tragedies—otherwise preventable—may occur. And, as we all know, lawsuits frequently follow tragedies.

Child welfare workers need to be able to perceive trends, establish goals, and measure results. A great aid is to use appropriate metrics. Trying to make informed agency decisions without metrics is like driving at night in a dense fog.

This article suggests some meaningful metrics that can be easily captured.

1. **Average First Reply Time.** Speed may not be a client's foremost concern, but it is undoubtedly very important. Valid or not, clients easily interpret a slow response from an agency as incompetence and lack of concern. An agency that responds to a call quickly dramatically increases its chances of gaining client satisfaction and addressing a potentially serious situation.
2. **Average Resolution Time.** There are countless child welfare activities. Many of them have imposed timelines, either by statute, regulation, or internal policy and procedure manual. For instance, depending on the nature of a report of suspected child abuse or neglect, a child protective service investigator must respond within 24 hours. A supervisor or administrator would benefit greatly by knowing the exact response time of each worker or unit. Yes, an average response of 23 hours is legally acceptable, but this is far from ideal.



3. **Client Satisfaction.** Every child welfare administrator wants to know that when someone calls for help that is exactly what they'll receive. This metric measures the overall satisfaction level of clients and their interactions with the agency. It also helps to pinpoint specific decision points that need improvement. Most important, it measures what matters to the clients ("clients" meaning the public, regulators, or actual clients). If we don't know what clients want, we can't measure it.
4. **Team Functioning.** Every child welfare agency openly declares its commitment to teamwork. Teams create an atmosphere of mutual support, boosting the confidence of individuals, assisting each person to do his or her best. Good teamwork

can reveal talents and leadership skills. Some basic metrics to gauge team functioning might include regular attendance at team meetings and prompt return of phone calls to other team members. Quality teamwork cannot be measured by a single metric; a diverse array is needed. More sophisticated metrics can measure whether individual team members are contributing to the creativity and success of the team.

5. **Human Resources.** As an administrator or supervisor, there are a number of simple metrics to look at: absence rate, turnover rate, time it takes to fill a position, and tenure of employees.

*See Metrics on page 34*

---

## OPIOIDS continued from page 7

includes their income, employment status, use of the health care system, chronic diseases, and history of substance abuse, to name a few.

With this data insight, agencies can calculate the cost of interventions across the health and human services spectrum for a 360-degree cost analysis of the patient and the impact to their families. With this insight, agencies can align resources with specificity and prioritize addressing high-cost causal factors. This model would apply to any disease associated

with IV drug use such as HIV, hepatitis C, or endocarditis.

### The Work Must Never Stop

Once a program is in place, it is vital to measure its results. Constantly. Diligently. Continuous reporting of progress gauges the efficacy of opioid addiction programs and indicates where and how they may need to be adjusted. By using data and analytics to create new insights, this nation can come one step closer to mitigating, even preventing, the spread of this epidemic. 📌

#### Reference Note

1. Comments made at the 2017 National Drug Rx Drug Abuse and Heroin Summit, Atlanta, GA

**Michael Petersen** is Medical Director, Innovation Lead, and North America Opioid Epidemic Solutions Lead at Accenture.

**Joseph Fiorentino** is Managing Director of Health and Human Services at Accenture.

---

## DRUNK DRIVING continued from page 30

judiciary, driver licensing agencies, probation, manufacturers, and treatment (p.2).”<sup>10</sup> It’s time to add state foster care programs to that list. 📌

#### Reference Notes

1. Rev. Stat. § 71-1903; Admin. Code Tit. 474, §§ 6-003.14; 6-003.25B-25B3.
2. Rules §§ 37.51.210; 37.51.216.
3. Rev. Stat. § 424.031; Admin. Code §§ 127.240; 424.190; 424.195.
4. Admin. Code Tit. 40, §§ 745.651; 745.657; 745.657.
5. Code of Rules §§ 78-2-13; 78-18-16.
6. Department of Transportation (US), National Highway Traffic Safety Administration (NHTSA). Traffic Safety

Facts 2014 data: alcohol-impaired driving. Washington, DC: NHTSA; 2015. Retrieved from <http://www-nrd.nhtsa.dot.gov/Pubs/812231.pdf>

7. Department of Transportation (U.S.), National Highway Traffic Safety Administration. Traffic Safety Facts 2014 data: alcohol-impaired driving. Washington, DC: NHTSA; 2015 Retrieved from <http://www-nrd.nhtsa.dot.gov/Pubs/812231.pdf>
8. Department of Justice (US), Federal Bureau of Investigation (FBI). Crime in the United States 2014: Uniform Crime Reports. Washington (DC): FBI; 2015. Retrieved from <https://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2014/crime-in-the-u.s.-2014/tables/table-29>

9. See <https://online.flippingbook.com/view/886615/4-5>

10. National Highway Traffic Safety Administration. (2013, December). Model Guideline for State Ignition Interlock Programs. (Report No. DOT HS 811 859). Washington, DC: Author. Retrieved from <http://www.nhtsa.gov/About-NHTSA/Press-Releases/U.S.-Department-of-Transportation-Announces-%27Drive-Sober-or-Get-Pulled-Over%27-Holiday-Crackdown>

**Daniel Pollack** is a professor at Yeshiva University’s School of Social Work in New York City. He can be reached at [dpollack@yu.edu](mailto:dpollack@yu.edu); (212) 960-0836.

---

## METRICS continued from page 31

**6. Website Effectiveness.** After completing an inventory of the agency’s website, it should be easy to identify the specific interests of site visitors. Is there a “comments” section prominently displayed on the website? What are the metrics of those comments?

Washington attorney Bryan G. Smith reflects that “there is a common denominator in every lawsuit I have filed against a social service agency on behalf of a foster child who was abused or neglected while in care: The agency

had few or no metrics with which to measure its own success or failure and consequently had no internal accountability for those successes and failures.”

It is no easy task to come up with conclusive metrics that measure a child welfare agency’s performance, especially because, based on experience and data, child welfare systems and services are constantly being redesigned. Just as an agency’s goals and objectives alter over time, the toolbox of performance metrics to track progress toward those goals will

continuously change. In any event, our job is to make sure the way child welfare systems and services are designed in theory is the way they are working in practice. Good child welfare metrics help us monitor, audit, and make tough, informed decisions, and can help us keep the agency out of legal hot water. 📌

**Daniel Pollack** is a professor at Yeshiva University’s School of Social Work in New York City. He can be reached at [dpollack@yu.edu](mailto:dpollack@yu.edu); (212) 960-0836.