
State of Mississippi
Title IV-E Child Welfare
Waiver Demonstration Project

Final Evaluation Report

Executive Summary

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Executive Summary

This is the final evaluation report of the Mississippi title IV-E child welfare demonstration project. The state's request for a IV-E waiver to operate in eight counties was approved by the Department of Health and Human Services on September 17, 1998. After significant delays, implementation began on April 1, 2001 and the demonstration was approved to run for 60 months. The project was suspended after 42 months, however, and ended on September 30, 2004. The final evaluation report provides findings from the process, impact and cost studies that formed the evaluation. It describes both the challenges faced by the state agency in the operation of the demonstration and the project's outcomes and successes despite these challenges.

Program Model and Purpose

The waiver project in Mississippi was designed as a response to specific findings of the 1995 ACF/DHHS assessment of the state child protection system. The project was built around an intensive services model that emphasized practice that is child-focused and family-centered. The state sought to use the waiver to increase the nature and extent of available services to children and their families in an effort to reduce harm to children, reduce foster care placements and achieve greater permanency and safety for children. The plan from the beginning was to improve the assessment of family needs, and to individualize and broaden the array of services provided to children and their families. A key mechanism in this process was expected to be family team conferences that would involve family members more directly in case planning and identify a circle of support for them. Greater emphasis was to be placed on home-based and prevention services, the provision of greater support to foster parents, especially relative caregivers, and ensuring child well-being.

Implementation

The waiver demonstration operated in eight counties, four in Region 3, which ranges from the area around the city of Jackson over towards the Mississippi River Delta, and four in Region 6-North, an area south of Jackson and around the city of Hattiesburg. The waiver was not begun simultaneously in all eight counties as originally planned but was phased in. Implementation began in April 2001 when the waiver program was started in two counties, Rankin (in Region 3) and Jones (In Region 6-North). In April 2002 the waiver was extended to two additional counties, Holmes (Region 3) and Lamar (6-North). In September 2002, it was begun in the final four counties, Madison and Yazoo in Region 3, and Pearl River and Covington in Region 6-North. DFCS

administrators and the evaluators combined in providing training to CPS staffs as the waiver began in each of the counties.

The waiver program was stopped on September 30, 2004 due to cost neutrality concerns and staffing problems. From the date the waiver began in the first two counties until it was suspended was a period of 42 months. This amounts to 70 percent of the 60 months for which the project was approved. However, only two of the eight counties had active waiver programs for 42 months. Two others operated waiver programs for a period of 30 months and the remaining four had programs for 25 months. In addition, staffing problems that were exacerbated by a state hiring freeze caused some of the counties to slow down or temporarily suspend their waiver projects once begun and before final termination.

Design and Data

The design of the Mississippi waiver involved an experimental and a control group. Cases that met screening criteria were randomly selected for inclusion into one of the two study groups. A computer-based program was developed by the evaluators for the random selection of cases, and the program was placed on laptop computers. Each of the waiver counties was provided a laptop computer with the selection program on it, and workers in each county received training in how to use it. The impact and cost-effectiveness studies utilized outcome and cost data associated with the experimental (waiver) and control (non-waiver) cases.

In Mississippi the waiver program focused on particular types of families and children that either were in court custody (and, in most cases, in out-of-home placement), or were high-risk non-custody cases. The laptop computer program used for random assignment also had waiver screening criteria built into it so that screening and random assignment were carried out simultaneously. Demonstration cases were defined as entire families, including children in active cases with the agency, other siblings, and parents or other caretakers.

The screening criteria did not include any reference to IV-E eligibility. The waiver was viewed as a broad and flexible instrument to improve the provision of child protection services in demonstration counties. It was not limited to IV-E eligible cases because it was believed that if the overriding goals of the project were achieved with any measure of success, the reduction in costs for placement would offset the increase in costs for support services provided to families and children, whether they were among those eligible for IV-E reimbursement or not. And, as a more practical matter, new cases coming into the system would not have their eligibility determined until after efforts to

ensure the safety and well-being of children had been initiated, and there was no interest in delaying the provision of services judged to be needed.

The main research database was composed of data obtained from counties and the Mississippi Automated Child Welfare Information System (MACWIS). MACWIS was in development at the time the Mississippi waiver demonstration was beginning. The delay in the start-up of the waiver had the advantage that all eight counties participating in the demonstration had switched to MACWIS by the time data collection began.

The first extraction of MACWIS data was received by evaluators via the Internet in October 2002. Although the demonstration was suspended as of September 30, 2004, data tracking continued for another quarter. The shortened time period for the project made it less likely that significant differences might be found in longitudinal outcomes between the experimental and control groups. Because of this concern, the research database was kept open as long as possible. The last extraction of MACWIS data utilized in final analyses was received by evaluators via the Internet on January 20, 2005. These data were folded into the research database and analysis proceeded.

While MACWIS provided key data for the impact and cost study, the data collection for the process study often involved interviews and regular site visits to state and county offices. Interviews were routinely carried out with state-level and regional administrators during site visits as well as with child welfare supervisors and social workers in the waiver counties. Because of the difficulties in starting the project, early site visits by evaluators involved as much technical assistance and trouble shooting as organized data gathering. For example, the development of the laptop computer program for random assignment, and the training of supervisors and social workers in its use, was an ad hoc solution to the problem of screening and waiver assignment. The original work plan called for semi-annual visits by evaluators, but more frequent visits were often required. The final site visits and interviews were done in February 2005.

Challenges and Delays

From the very beginning of the project state administrators were faced with significant challenges that impeded first the start of the demonstration and then its operation once it began. These included a lengthy delay in receiving final approval of cost neutrality procedures, which pushed back the start of the waiver at least two years, and significant staffing problems, which hindered the subsequent operation of the project.

There were three significant staff losses that each had serious implications for the waiver. 1) One of the two key regional administrators who developed the waiver

proposal left state employment before the end of the first year of the project. Her replacement was not familiar with the waiver demonstration nor its history or goals, and was absorbed in dealing with basic staffing problems her region was experiencing. 2) One of the two regional waiver coordinators left to take a different job in state government in the first year of the project and was not replaced for two years due to a state hiring freeze. 3) The third loss was probably a casualty of the delay in the start of the project, and was not a person who left but a position that was never filled. The waiver business consultant, who was to have been responsible for constructing a business plan for the project, for monitoring the project's financial data and, significantly, for overseeing cost neutrality, was never hired. Among other consequences, this left essentially all central office waiver responsibilities to an administrator whose plate was already overflowing.

After the first year of the demonstration, the remaining waiver coordinator (for Region 6-North) had to take on a larger caseload in her own county as well as assist in other non-waiver counties hit hard by staff losses, leaving little or no time for waiver-related activities. The functional loss of both waiver coordinators meant a suspension in the use of family team conferences, which the coordinators were to facilitate and which were intended to be the key instruments in improved family assessments and service delivery under the waiver. The coordinators were also meant to provide ongoing technical assistance and support to social workers in all the demonstration counties and to be the day-to-day champions of the waiver in their regions. Without them, especially in the region that had lost its original regional administrator, county CPS supervisors and social workers received much less waiver-related guidance and active help.

Waiver Case Assignments

Through the 42 months that the program operated, 667 cases that met the screening criteria for the waiver were entered into the random assignment program in the eight counties. Approximately equivalent numbers were randomly selected for the waiver group (346) and control group (321). These cases included 1,549 children, 777 in waiver households and 772 in control households. Three in 10 (30.5 percent) of the cases pre-existed the start of the waiver, while 69.5 percent were new cases that entered the child protection system after the waiver had begun. At the time they entered the study population, a slightly higher proportion of experimental children were in court custody (36.9 percent) and/or in out-of-home placement (28.2 percent) than was the case for control children, of whom 32.0 percent were in court custody and 23.7 were in placement outside the home. Seven in 10 (70.8 percent) cases that had been assigned to the waiver had closed by the end of data collection and 29.2 percent of the cases remained open.

Outcomes

Services to Children and Families—Intermediate Outcomes. System changes under the Mississippi waiver were dependent on changes in the way families were approached by child welfare workers. Because the Mississippi waiver followed the intensive services model, the primary expectation was that patterns and levels of services to children and families would change in families and among children assigned to the experimental group as compared to control families and children. This was the *necessary precondition* of other expected effects of the waiver. Unless the service approach changed, other changes could not be expected to follow.

Overall, *experimental families were somewhat more likely to receive services than control families. Three out of four (74.6 percent) waiver group families received one or more purchased services compared with two out of three (67.0 percent) control families.* The waiver primarily made a difference in the provision of assistance in four service categories: school supplies for children, housing-related needs, food, and other unmet personal needs. For example, 28.9 percent of waiver families received help with their housing, utility bills or home improvements compared with 19.4 percent of control families. Experimental-control group differences in other service areas were small, although more often than not a slightly larger percentage of waiver families received services (such as childcare, counseling, medication, and transportation).

Recurrence of New Reports—Measure of Child Safety. The simplest measure of recurrence is the proportion of experimental and control children with new reports of child maltreatment. *A statistically significant difference was found between the two groups: 14.5 percent of experimental children had new incident reports compared to 19.7 percent of control children ($p=.004$).*

When considering specific types of maltreatment, *a statistically significant difference was found in new reports of physical abuse: 3.7 percent of experimental children had new incident reports of physical abuse compared with 6.0 percent of control children ($p=.02$).*

A survival analysis was conducted that showed difference between the experimental and control groups to be distributed evenly over the follow-up period, that is, there was a consistent difference between waiver children and control children who received a traditional intervention. The analysis found that *control children experienced new reports sooner and, therefore, more reports during the follow-up period. The difference between survival rates of experimental and control group children was statistically significant ($p = .03$).*

Waiver services appear to have made an impact: *15.8 percent of experimental children in families that received waiver services had new incident reports compared to 21.4 percent of control children in families receiving services (p=.04).*

Recurrence of Substantiated Reports. The difference between the study groups in new reports that were substantiated was in the hypothesized direction but not statistically significant. Overall, 5.7 percent of experimental children had new substantiated reports compared with 6.2 percent of control children. While the difference was small, it was persistent and found among pre-existing cases as well as new cases and closed cases as well as ones that remained open when data collection was suspended.

Children Remaining with their Parents—A Measure of Family Integrity. At the time they were assigned to one of the two study groups, 402 (26.0 percent) children in the study population were in placement in foster settings outside their parental homes, including placement with relatives. Of the children who were not in placement at the time of waiver assignment, 146 (about 1 in 8; 12.7 percent) were removed from their homes and placed in a foster care or relative care setting by the end of data collection.

Experimental children who had not been removed from their parental homes prior to the start of the demonstration were less likely to be removed and placed in an out-of-home foster care or relative care setting than control children; 9.1 percent of the experimental children were removed from their homes compared to 14.1 percent of control children. This difference was statistically significant (p=.005).

A survival analysis conducted on these data confirmed that *control children experienced out-of-home placement sooner and more often during the follow-up period. The difference between survival rates of experimental and control children was statistically significant (p = .025).*

Effects of Services on Placement. *Control children who received services were more likely to be placed outside the home than experimental children who received services (57.2 percent vs. 33.1 percent), a difference that was statistically significant (p<.001).*

Reunification. Among all children in out-of-home placement during the demonstration, 22.4 percent of experimental children and 19.6 percent of control children were reunified with their parental families before the end of data collection. This included children who were in placement at the time of waiver assignment and those

removed from their homes at a later point in time. Among children in placement at waiver assignment, 20.1 percent of experimental children were reunified compared with 17.5 percent of control children. Among children placed after waiver assignment, 31.0 percent of experimental children were reunified compared with 23.9 percent of control children. Considering only those children in placement in cases in which services were provided, 20.5 percent of experimental children were reunified compared with 15.9 percent of control children. Although each of these differences is in the hypothesized direction, none are statistically significant at $p < .05$. However they represent statistical trends that may have reached statistical significance had the demonstration continued.

Placement with Relatives. Of the 146 children removed from the homes of their parents after waiver assignment, 1 child in 3 (32.1 percent) was initially placed with a relative. This figure was virtually the same for experimental children (32.9 percent) as control children (31.4 percent).

Placement of Siblings Together. No difference was found in the percentage of experimental and control children who were placed with their siblings when removed from the home.

Placement of Children Near their Families. No difference was found in the percentage of experimental and control children placed within the same county as their parental home.

Movement of Children among Different Foster Providers. The mean number of foster care settings in which experimental and control group children were placed when removed from their homes was nearly identical (1.7 vs. 1.8).

Time in Foster Care and at Home. The mean number of open case days for all experimental children during the demonstration was 409 and for control children it was 380. This includes all children in the study population whether or not their cases were closed at the time data collection ended. The difference in the mean number of case days between the study groups primarily involved days spent at home. The mean number of days spent in non-emergency out-of-home placement was nearly identical (147 for experimental children and 145 for control children). The mean number of days spent at home was 263 for experimental children and 235 for control children.

Considering only children not in placement at the time of waiver group assignment, the mean number of open case days was 350 for those in the experimental group and 333 for those in the control group—as with the entire population, experimental

cases stayed open a little longer. And, as before, this was accounted for by time spent at home, not in placement. In fact, the mean number of days in placement was less for experimental children (41) compared with control children (56).

Other Measures of Child Well-Being. The demonstration was truncated at a time critical to the collection of data from families and children. The process of obtaining feedback from families ended prematurely and with an insufficient critical mass to draw distinctions between the two study groups. Accordingly, there is no reliable data on the effect of the waiver on the wages of families or their reliance on public assistance, nor on the school performance of children or their emotional well-being. Data was available related to the provision of health-related services to children, but no difference between the study groups was found.

Cost Analysis

Services and Funding Sources. The waiver represented an important source of funding for services during the demonstration period. For the experimental group waiver funds accounted for a relatively large share of the costs of certain services, such as housing (47.6 percent), home improvements (72.6 percent), food (57.6 percent) hygiene (40 percent) transportation (58.6 percent), and child care (87.0 percent). Overall, waiver funds accounted for one-fourth (25.4 percent) of all funds used to provide services to experimental families, and nearly half (48.1 percent) of all public money (county, plus state and regional funds).

With the availability of waiver funds, the total spent on the experimental group for non-placement services exceeded the total spent on the control group. We would expect this in a project in which dollars formerly available only to pay for placement costs could be used for a variety of other services that might, among other benefits to families and children, prevent or limit placement. However, the difference in service expenditures between the two groups was considerably less than what was accounted for by waiver expenditures on experimental households. This resulted from more being spent on average from other public sources to pay for services for control families. In a resource-poor service environment this may be understandable, and it means that the demonstration was used to benefit not just families in the experimental group but those in the control group as well.

Cost Effectiveness. Two separate designs for determining the cost effectiveness of the Mississippi waiver demonstration were employed. The first involved a comparison of program investment costs with longer-term and bottom-line costs. The second involved examining costs in relation to outcomes.

The results of the first analysis on the entire study population found that mean expenditures for services and foster care was greater for experimental children (\$3,737) than for control children (\$3,200). These figures included costs during the initial case period and any subsequent costs resulting from a child re-entering CPS. These costs were affected by the slightly greater proportion of experimental children already in placement at the time they entered the study population. When the analysis was restricted to the subset of children not in placement at the time of initial screening, mean expenditures were greater for control children (\$1,162) than experimental children (\$1,003). Based on impact study results that found a reduction in subsequent maltreatment reports among experimental children and greater placement avoidance among those not in placement at screening, it might be expected that the demonstration would have produced a positive return on money invested in waiver services.

The results of the second analysis, which examined outcomes in relation to the costs incurred to produce them, were: 1) that *it cost an average of \$270 more per waiver child to produce a reduction of 5.2 percent in subsequent reports of maltreatment; and 2) that it cost an average of \$37 less per child using the approach tested in the demonstration to produce a reduction of 5.0 percent in placement in foster care during the shortened follow-up period.* These figures were based on the entire study population and, as in the previous analysis, do not take differences in administrative costs into account.

Why the Waiver was Suspended

The state faced a number of significant challenges in implementing and operating its IV-E child welfare waiver demonstration. These included a lengthy delay at the start of the project and serious staffing problems throughout. Neither of these was within the control of administrators of the state agency, but both had a crippling effect on the project. But the expressed reason the waiver was abandoned had to do with cost neutrality problems, specifically, administrative cost overruns.

The criteria for selecting cases for the waiver was based on the level of risk to the child and the child's custody status. IV-E eligibility was not considered. In a state with a large number of children in poverty this was not expected to be a problem. But it was. The bottom-line problem for the waiver was that, while Mississippi ranked first in child poverty among the 50 states in 2000, first in the percent of families in poverty, and 47th in median household income, it was, at the same time, 42nd in the percent of foster care cases determined to be eligible for IV-E. Even if the state agency had not experienced severe staffing shortages while the waiver was being operated and was a resource rich

service environment, it is hard to imagine how it could have survived the cost neutrality test with this level of IV-E eligibility.

But whether or not interim administrative overruns would have diminished if the demonstration had been allowed to continue will never be known now. Two areas of cost offsets were possible. If experimental cases re-entered CPS less frequently than control cases and if experimental cases spent less time in foster care, as suggested in the abridged impact analysis, this would have produced savings in both maintenance and administrative costs. At the same time, however, experimental cases tended to stay open longer, suggesting higher administrative costs. Whether differences in administrative costs would have evaporated with fewer experimental cases re-entering the system will never be known, nor will the overall relationship between maintenance and administrative costs for the two groups across a 60-month period.