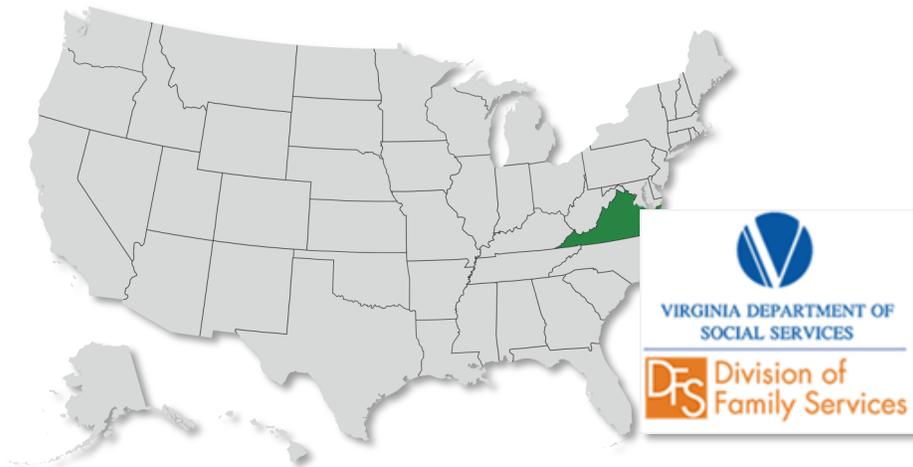


Site Profile

VIRGINIA DEPARTMENT OF SOCIAL SERVICES

Intervention: Case-Supportive Technology Innovations



QIC-WD Overview

The Quality Improvement Center for Workforce Development (QIC-WD) is dedicated to understanding how to improve child welfare workforce outcomes. The QIC-WD partnered with eight child welfare agencies to evaluate evidence-informed workforce interventions and how they are related to outcomes for children.

Site Overview

The VDSS is a state-supervised and locally-administered child welfare system. There are 120 local departments of social services (LDSS). At the local level, the child welfare workforce is comprised of approximately 1,500 Family Services Specialists, 390 Family Services Supervisors, 50 middle management employees, and 117 senior management employees. The average turnover rate for an entry level Family Services Specialist in 2016 was 29%, an increase of 11% since 2012. The annual turnover rate for Family Services Specialist II (an intermediate level) is greater than 20%. In partnership with QIC-WD, VDSS and 18 LDSS will research the effects of case-supportive technology interventions for Family Services Specialists and the impact it has on retention of the child welfare workforce.

Workforce Challenge

In 2016, VDSS conducted a number of focus groups across the state. They found that the biggest complaint among front line workers and the reason for leaving their jobs was the lack of technological supports and flexibility to help them complete job tasks more quickly. VDSS decided to introduce two technological interventions to address the issues unearthed in the needs assessment process: transcription services and a mobile application.



Theory of Change

The ability to use transcription service for case notes and to complete administrative tasks to assist with practice in the field will give staff the flexibility in how, when, and where casework is completed. It will also allow staff to spend less time on paperwork. The saved time will reduce staff stress and lead to enhanced efficiency and accuracy of case documentation. This will result in better job satisfaction and increased intentions to stay with the agency. In terms of practice, the time usually spent on paperwork completion and driving to and from the office repeatedly will be shifted to increased time with families. Staff will feel more self-efficacious about work with families leading to enhanced outcomes, particularly safety.

Interventions

Two technology innovations make up the VDSS intervention.

1. Transcription services for all Family Services Specialists who manage caseloads in child welfare and adult protective services in Virginia. Family Services Specialists can dictate notes from their case visits via telephone to FlexDictate. This service is available 24 hours a day, 365 days per year. The transcribed notes are returned to the worker by email between several hours to several days. Workers are notified via email that the transcription is available; via a secure website, the worker copies the transcribed notes to place in the electronic system of record.

2. A mobile application (app), connected to the case management system, for all Family Services Specialists who manage caseloads in child welfare to maximize their time away from the office. The app will be on iPads that can be used in both online and offline mode to enter new case notes and read existing ones from the

case management system, complete assessments, access and update demographics and relationships, upload pictures, complete forms, and access Structure Decision Making (SDM) assessment tools.



Evaluation and Expected Results

The evaluation will seek to understand the relationship between providing technology to Family Services Specialists to assist with paperwork and administrative responsibilities and retention of the child welfare workforce.

Expected results for staff include:

- spending less time on paperwork;
- shifting their time from paperwork completion and travel to and from the office to more time with families;
- reporting more streamlined and efficient coordination of casework with families and children;
- completing case documentation efficiently and more comprehensively; and
- continually improving their casework practice, which may enhance child safety.

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