

**QUESTIONS FOR THE EVALUATION:**

1. Does the system of providing case management services through contracted supervising agencies improve outcomes for children (relative to providing case management through CA)?  
OR
2. Does the system of providing case management services through contracted supervising agencies make things worse for children (relative to providing case management through CA)?

**RECOMMENDATIONS FROM THE TRANSFORMATION DESIGN COMMITTEE REQUIRING LEGISLATIVE ACTION:**

***A. Allow the use of random assignment in the research design?***

Why research design is important:

- Establishing causality
- Other evaluations of these kinds of programs have not been able to give good information about outcomes for children, mainly due to research design

Possible designs:

1. Compare demonstration sites before and after implementation

Pros: Simplest design

Cons: Problems with data (e.g., CAMIS versus FamLink), problems with service landscape changing over time (e.g., move to performance-based contracting, implementation of solution-based casework). Difficult to determine effect of 2106.

2. Compare demonstration sites to other comparable areas in the state

Pros: Don't have to worry about assigning cases

Cons: In most cases, there are no truly comparable areas

- Demographics
- Courts
- Crime
- Poverty

This approach would also mean loss of infrastructure in certain areas (because 2106 requires case management to be wholly provided by contractors in the demonstration areas).

3. Randomly assign cases to state or private case management within demonstration sites, neutral entity determines assignment.

Pros: Best chance of comparability between groups (comparing in real time, in the same locations), best chance of determining causality, no need to close whole CA offices (retains infrastructure).

Cons: Chances of bias if system allows workers to influence assignments.

**NOTE: RESEARCH DESIGN DOES NOT AFFECT THE REQUIRED SAMPLE SIZE.**

### ***B. Extend the evaluation period for a longer length of time?***

The Transformation Design Committee has recommended extending the evaluation period to three years. Depending on the way outcomes are defined, this recommendation would allow us to evaluate outcomes for children who enter the child welfare system over a two-year period, with one year for follow up.

#### **Why is the Committee asking to extend the evaluation period?**

The legislation requires:

- Power of .70 (“probability greater than seventy percent that a meaningful difference will be detected”)
- P-value of .05 (“ninety-five percent probability that observed differences are not due to chance alone.”)

The greater the power required, and the more stringent the p-value, the larger our sample size must be. Because of the legislative requirements regarding power, WSIPP must estimate the outcomes of the evaluation in advance. To estimate the size of the sample, the site selection advisory committee hypothesized that the demonstration would result in the larger of:

- differences on the order of 0.10 standard deviation units (“effect size”), or
- 10% in the rate of occurrence.

Depending on the outcome of interest, the estimate of required sample size varies. With a p-value of .05 and power of .70:

To detect differences in family reunification, we need to capture:

- 28% of the annual statewide caseload to detect changes in family reunification (14.25% in the “treatment” group, 14.25% in the comparison group)

To detect differences in return to out-of-home care AFTER reunification, we need to capture:

- 125% of the annual statewide caseload to detect changes in family reunification (62.5% in the “treatment” group, 62.5% in the comparison group)

	Percent of total ANNUAL caseload required for demonstration		
	P=.05, power=.70	P=.10, power=.70	P=.10, power=.60
Reunification	28%	22%	17%
Return to care after reunification	125%	95%	73%

**How do these factors affect the timing of the evaluation?**

By spreading the required sample size over multiple years (e.g., multiple yearly cohorts of children entering the child welfare system), we can reduce the proportion of the state that must be involved in the demonstration.

		Percent of total ANNUAL caseload required for demonstration		
		P=.05, power=.70	P=.10, power=.70	P=.10, power=.60
Reunification	1 cohort	28%	22%	17%
	2 cohorts	14%	11%	8%
	3 cohorts	9%	7%	6%
Return to care after reunification	1 cohort	125%	95%	73%
	2 cohorts	63%	47%	36%
	3 cohorts	42%	32%	24%

### Potential Timeline for WSIPP Outcome Evaluation for Case Management Demonstration (2SHB 2106)

