Mid-Term Report for the E-referral Demonstration:

Status Update, Mid-Term Data Analysis and Training Implementation Evaluation

Prepared for

State of Washington, Department of Social & Health Services

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Chapter 1 Overview and Status of the Evaluation

BACKGROUND

In 2007, the Administration for Children and Families' federal Office of Child Support Enforcement (OCSE) awarded Washington State's Division of Child Support (DCS) an 1115 demonstration grant with the goal of improving cooperation between DCS and its sister agencies. Through the proposed demonstration, DCS committed to invest in a focused, three-year project to revamp and reinvigorate its five-year old e-referral process. E-referral is the electronic process by which the clients associated with new Temporary Assistance for Needy Families (TANF) and Medicaid cases are referred by Community Service Offices (CSOs) to DCS for enforcement services.

The demonstration project consists of two key interventions:

- **Expansion of data sharing with vital records and full automation of the data exchange**. DCS currently shares voluntary paternity affidavit data with the Department of Health (DOH)—Washington States's vital records department—and has expanded its data sharing agreement to include marriage, divorce, and death certificate records. DCS is in the process of fully automating its data exchange with DOH, which will ultimately eliminate the need for cumbersome case-by-case record checks.

- **Statewide training of TANF/Medicaid and DCS staff on the process of referring new cases.** During 2004, a DCS/TANF workgroup identified staff training on e-referrals as a critical need throughout the state. The group, which was convened through OCSE's *Better Outcomes Through Collaboration* seminars, found DCS and TANF/Medicaid have different interpretations of the data fields on the non-custodial parent (NCP) screen in the CSD computer system, and that no systematic training was available. Through the demonstration project, DCS has documented the existing referral processes, identified strengths and weaknesses across the state, and built a joint TANF/Medicaid/DCS training curriculum with the goal of sharply improving the quality of information transferred by TANF/Medicaid.

DCS managers anticipate that more accurate and complete e-referrals will expedite the enforcement of child support for new TANF and Medicaid cases. Better information at the beginning of the process presumably will save a considerable amount of DCS staff time, prevent inappropriate paternity referrals to the courts, and get support to children sooner. In 2008, DCS received about 1,400 referrals monthly with incomplete or no information about the NCP. Through the 1115 demonstration, management expects to cut that number by half or more.

Through improved e-referrals, Washington is addressing at least three goals in OCSE's strategic plan:

- **Improve rates of paternity establishment** (OCSE Goal 1). By setting the case up appropriately and incorporating all the information known to DOH, DCS can quickly isolate and target those cases that truly need paternity establishment services. DCS and prosecuting attorneys will no longer start judicial establishment motions only to later discover a voluntary affidavit or evidence of marriage. The automated data match with DOH will also improve the quality of DCS's paternity data and increase the likelihood the division will continue to pass its annual audits.

- **Expedite the establishment of orders for support** (OCSE Goal 2). Incomplete or inaccurate referrals slow down the order establishment and/or enforcement process. In some cases, DCS officers may be investigating old, inappropriate addresses when an interview or untapped database has more current information. In other instances, DCS officers may be starting their investigations from scratch when clearly they should not have to. DCS expects a measurable decrease in the elapsed time between the DCS case opening and the establishment of a support order. A rigorous evaluation will be able to precisely measure the effects of the new system.

- **Strengthen the efficiency and responsiveness of DCS operations** (OCSE Goal 5). The inefficiency of the current system is widely recognized by frontline DCS staff across the state. By invigorating the efforts of TANF/Medicaid staff and making full use of all information known to the state, a revamped e-referral system should sharply reduce the amount of unnecessary investigative work associated with new cases. The Department of Social and Health Services anticipates DCS, TANF, and Medicaid satisfaction with the referral process will measurably improve over the course of the demonstration.

KEY FINDINGS TO DATE

Due to delays in the implementation of the key interventions associated with this 1115 grant, currently we have no data about the effectiveness of the interventions. However, an analysis of baseline data from e-referrals sent by CSD to DCS adds strength to the theory behind the interventions: Better data in the e-referral will lead to better child support outcomes. Specifically, an analysis of the baseline data shows the following:

- The average elapsed time from the date of referral to DCS and the establishment of paternity was about two weeks shorter for cases that were referred with an NCP name and social security number.

- Similarly, the elapsed time from referral to the date of order establishment was about a month shorter for cases with name and social security number.

- Referrals that included the NCP name and social security number also were 14 percent more likely to be handled through an administrative rather than a judicial order, saving families and the state from entering the court system.

- Two other important outcome measures that we expect to be affected by the intervention, the average arrearage at the time of order establishment and the share of current support paid as due, are similar in this baseline data set. We will continue to examine these indicators, and expect to see differences over time as the training intervention is further implemented and evaluated.

PURPOSE OF THIS REPORT

As a condition of the grant, DCS must evaluate the outcomes of the demonstration project. DCS contracted with ECONorthwest to conduct this evaluation. The publication of this mid-term evaluation report comes at the end of the second year of the demonstration. Based on the original project schedule, both interventions were to have been implemented at this point. However, due to a series of setbacks, the DOH data-matching project has not yet been implemented and the timeframe for completion is unclear. The training intervention is underway, but is only in the second of three implementation phases. In the best case, the training intervention cannot be completed until the summer of 2010, but severe staffing shortages and workload increases make that unlikely.

This chapter outlines the original research design, outcome measures and timelines for evaluating the key interventions intended for Washington's e-referral program under the 1115 demonstration grant. It also discusses how the evaluation actually unfolded under several important constraints, including a severe fiscal crisis, workload increases, staffing shortages, and difficulty coordinating with the Department of Health (DOH) to automate data matching of vital records.

Chapter 2 provides an assessment of the data at the mid-term of the demonstration, provides baseline outcome data, and discusses the post-implementation follow-up time needed to evaluate impacts. Chapter 3 describes the training development process and early feedback reported by trainees.

ORIGINAL EVALUATION DESIGN

Early in this project, ECONorthwest recommended a design for the implementation and evaluation of the planned interventions. Specifically, we recommended that DCS implement the interventions in phases that would allow for analyzing pre- and post-intervention data. First, the automated DOH data matches and staff training were to be implemented in CSOs associated with four DCS field offices: Everett, Kennewick, Spokane, and Tacoma. These sites were chosen because DCS's SEMS staff is already collaborating with CSD field staff in Everett, Kennewick, and Spokane, and staff in the Tacoma office has expressed interest in collaboration.

In the second phase, all relevant staff in the regions associated with these pilot offices (Regions 1, 2, 3, and 5) would receive training. Finally, in Phase 3, the training would be rolled to all staff in the remaining two CSD regions (4 and 6). Ultimately, about 3,000 CSD staff statewide will be asked to take the training.

The original evaluation design called for collecting pre- and post-demonstration data on selected child support outcomes for all 10 DCS field offices during the three implementation phases, and using regression analysis to estimate whether the implementation of the automated DOH matching and the staff training had independent effects on any of the key evaluation outcomes. To differentiate between the effects of the automated data match and those of CSD staff training, the original study design required staggered implementation of the two interventions. Ideally, DCS would have implemented the automated matches with DOH beginning in early January 2009, and staff training would have commenced in April 2009, roughly three months thereafter.

OUTCOMES TO BE EVALUATED

Both interventions planned under the 1115 demonstration grant were intended to accomplish a similar goal: expedite the assembly of solid information about the identity and location of a non-custodial parent. The main difference in anticipated impacts lies in the point in the e-referral process where data improvements occur. Staff training is intended to help CSD intake workers collect better information from clients and enter more complete information into ACES. Further downstream in the process, the automatic match with DOH was intended to similarly improve the quantity and quality of non-custodial parent (NCP) data available to DCS caseworkers *after* the e-referral is transmitted to DCS.

The planned evaluation of this demonstration project focuses on a number of important child support outcomes for which we hypothesized improvement with more accurate and timely data. Presumably, these outcomes should differ noticeably across the treatment and control offices if the demonstrated interventions have the hypothesized impacts, although the two interventions may differ in the extent to which they affect each outcome measure.

The automated matches with DOH birth and paternity information were intended to provide a low-cost method that would ensure DCS knew everything about a potential NCP that DOH knew. At the very minimum, the matches would eliminate the need for Support Enforcement Technicians (SETs) to manually review the DOH database. In some cases, the matched DOH information would ultimately allow SEMS to automatically create and update cases—bypassing the SET altogether for a sizeable share of e-referrals. In other cases, the data match should correct incorrect information transmitted from ACES, allowing caseworkers to more efficiently locate the appropriate NCP.

The CSD staff training intervention was hypothesized to have a similar, but potentially broader, effect compared to the automated DOH data-matching project. All CSD intake workers have online access to the DOH paternity database, so ideally, CSD staff would always check the DOH database, and the subsequent automated data matching would become obsolete. However, perfect

implementation rarely occurs, and the evaluation is intended to examine the extent to which CSOs fail to make full use of their online DOH access and the factors that drive this underutilization, including the impact of demographic characteristics on the performance of individual CSOs in sending DCS accurate information.

The training has potential benefits well beyond the CSD staff's use of specific DOH data elements. The training is intended to explain the benefits, for CSD, DCS and their clients, of gleaning better information about the NCP during the initial TANF interview. A better understanding of the DCS mission and how DCS services improve the lives of CSD clients may result in more thorough probing about NCP information during CSD intake interviews. More in-depth interviews should, in turn, improve the quality of paternity information DCS receives about children, including those born outside of Washington for whom DOH may have no data.

Beyond the upfront savings in DCS staff time resulting from reduced need for manual casework and NCP location activities, the expedited assembly of accurate NCP information may help expedite case openings, result in smaller arrears judgments at order establishment, and possibly lead to higher compliance on support orders resulting from smaller arrearages and earlier order establishments.

Specifically, the evaluation of the training project (exclusive of the DOH data-matching project) is intended to measure impacts of the intervention on the following outcomes (these are explained in greater detail in Chapter 2):

1. The share of e-referrals that require manual Support Enforcement Technician (SET) intervention.
2. The elapsed time from e-referral to case opening.
3. The elapsed time from e-referral to DCS-recognized paternity establishment.
4. The share of e-referral cases with paternity established through an administrative process.
5. The elapsed time from e-referral to establishment of an order for current support.
6. The share of e-referral cases with an order for current support established through an administrative process.
7. The average arrearage at the time an order is established.
8. The share of current support paid as due.

CURRENT STATUS OF THE EVALUATION

The actual implementation schedule has varied from the original plan for a number of reasons.

Table 1 shows a comparison of the original and actual timelines for the various activities involved in the intervention. The DOH data matching

implementation was scheduled to occur before the training began, but delays and setbacks have prevented this part of the project from being implemented as of January 2010. DCS decided to move ahead with the training project without the DOH data-matching component, and began developing the online training module in early 2009.

Table 1: Original and Actual Implementation Timeline

Activity	Sites	Original Timeline	Actual/New Timeline
Begin automated matches with DOH vital records data	DCS pilot sites	January 2009	Has not occurred to date
Training Phase 1: Begin training in pilot offices (Pierce North, Everett, Spokane Valley, & Kennewick)	4 CSO pilot sites	April 2009	July 2009
Training Phase 2: All CSOs in regions 1, 2, 3, & 5.	27 CSOs	At completion of Phase 1	March 1 through April 30, 2010
Training Phase 3: All CSOs in regions 4 and 6.	25 CSOs	At completion of Phase 2	May 1 through June 30, 2010

Because both parts of this 1115 demonstration have met with delays from the original project timeline, we do not yet have a full set of data with which to evaluate the impacts of the interventions. With respect to the DOH data-matching project, implementation has not yet occurred, so there are no impacts to measure. With respect to the training intervention, Phase 1 is complete, Phase 2 has been implemented but not completed, and Phase 3 is awaiting the completion of Phase 2.

Phase 1 began when the training was made available to staff in the four pilot offices in regions 1, 2, 3 and 5 in July 2009. In this phase, the training was mandatory. As of August 28, 89 out of 138 CSD staff at these offices had taken the training. As of late October, 132 CSD staff members had taken the training, for a 96 percent completion rate. On October 19, the CSD Training and Development office sent a request for the pilot training participants to take an online survey about their experience. By October 26, 22 trainees had responded to the on-line survey, for a response rate of 17 percent. Although this is a relatively small response rate, CSD staff reported greatly increased workloads at CSD during this period, so project staff decided not to push for a greater response. During this period, ECONorthwest also conducted two focus group sessions with training recipients at the Pierce North CSO.

At the end of Phase 1, the training developer revised the training based on the content of the survey responses and the focus groups, and uploaded the training to the DSHS training system (however, staff would not be aware of the training unless they were specifically invited to take it). Phase 2 involved advertising the training to all CSD staff in regions 1, 2, 3 and 5. This advertisement was sent to region managers by email on November 16th. Unlike the first phase, the second

phase of training has not been deemed mandatory. This phase is still underway, but severe caseload increases and staffing shortages at CSOs have made it nearly impossible for staff to devote time to training. At the end of December only two CSD staff members had taken the training. DCS and CSD managers have discussed the possibility of making the training mandatory, but this may not be feasible because these departments currently are struggling to meet more immediate needs. CSD training and development staff estimates that the CSOs need approximately two months from the date the training is made mandatory to reach a satisfactory completion rate. At the earliest, this means Phase 2 could be completed at the end of February.

The delay in Phase 2 has, in turn, caused a delay in implementing Phase 3. During Phase 3 the training will be advertised to the remaining CSD regions (4 and 6). In the best case, Phase 3 could begin in early March and end late April, but given the ongoing staffing crisis, it could occur much later in the year.

As noted in Chapter 2, we do not currently have sufficient data to evaluate the demonstration's impact on any of the outcome measures identified in the evaluation plan. Chapter 2 does provide baseline outcome data and discusses the post-implementation follow-up time needed to evaluate impacts. The project team hopes to resume the training rollout and data collection when workload and staffing levels at the CSOs allow.

Chapter 2 Mid-term Data Analysis

INTRODUCTION

The evaluation framework for the e-referral grant includes a detailed analysis of data contained in the electronic referrals and from the DCS data warehouse. These data will provide reasonable estimates for the impact of the major e-referral interventions—CSD staff training and the DOH data match—if and when the interventions are implemented. As described in Chapter 1, neither of the interventions has progressed far enough to give us post-implementation outcome data. While we had originally anticipated including post-implementation data in this Year 2 report, the baseline data described below nonetheless will support Year 3 evaluation of training impacts. This preliminary analysis provides a profile of e-referral cases and subsequent child support outcomes.

As of November 2009, the CSD training was essentially completed at four "pilot" CSOs and made available throughout the state. The training appears to have been successful based on responses to a post-training survey and other staff feedback, but we would not expect to find dramatic changes in outcomes so soon after the training. The DOH data match remains well behind schedule, and we are unlikely to have sufficient, if any, post-implementation data for this intervention by the end of the three-year grant period.

The remainder of this chapter describes the outcomes to be measured by the evaluation, and the data used to measure them, and provides pre-implementation, baseline estimates for these outcomes for all of Washington and smaller regions. We consider the results preliminary because of the relatively short period of time covered by the available data.

CHILD SUPPORT OUTCOMES

Because both of the demonstration's planned interventions seek to improve the quality of NCP information received by DCS through e-referrals, we hypothesize that impacts would be similar for both interventions, although of different magnitudes for each outcome. Our Year 1 e-referral evaluation report, published in 2008, identifies the eight outcomes on which we planned to base our evaluation. Below, we present a slightly modified list of these eight outcomes, with brief explanations of the outcomes specific to impacts of the training intervention, as this intervention is the most likely to produce measurable results by the end of the grant. We hypothesize that improving data quality will:

1. *Reduce* the share of e-referrals that require manual Support Enforcement Technician (SET) intervention. Interviews conducted for the e-referral process study highlighted the fact that data entry errors can greatly increase the time DCS spends identifying an NCP and establishing an order for support—the e-referral training module reiterates the idea that no information can be better than bad information. At the same time, when CSD intake workers

submit more complete, accurate data, processing time is also likely to fall. In some cases, more accurate information might reduce duplicate referral submissions or allow the DCS information management system to process a referral without requiring staff intervention.

2. *Reduce* the elapsed time from e-referral to case opening. As for the first outcome, better data quality will improve processing speed and order establishment. More accurate and complete NCP information increases the likelihood that the legal father will be identified within a given amount of time.

3. *Reduce* the elapsed time from e-referral to paternity establishment. For newly created cases where a child's paternity has not been established, better NCP information will expedite NCP location and therefore formally recognized paternity establishment. If paternity is already established at the time of e-referral, better quality data will also reduce the likelihood of conflicts about paternity between e-referral data and that from other sources.

4. *Increase* the share of e-referral cases with paternity established through an administrative process. An important goal of the demonstration is testing the theory that improved e-referral processes will reduce the number of paternity cases referred to the courts. Presumably, better NCP data on the e-referral will allow administrative paternity establishment on cases that would otherwise be transferred to county prosecutors for paternity proceedings, saving court resources and reducing the burdens on parents.

5. *Reduce* the elapsed time from e-referral to establishment of an order for current support. The reduction in case processing time hypothesized for outcome 3 will, in turn, increase the likelihood that a current support order is established within a given amount of time after NCP identification.

6. *Increase* the share of e-referral cases with an order for current support established through an administrative process. By expediting case processing and other actions, better NCP data can also facilitate administrative order determination rather than the judicial alternative.

7. *Reduce* the average arrearage at the time an order is established. Better NCP information will accelerate paternity and order establishment, thereby resulting in smaller accumulated amount of arrears at the time of order establishment.

8. *Increase* the share of current support paid as due. The reduced arrearage resulting from better NCP information will allow NCPs to devote more income to current support payments. As a practical matter, we plan to evaluate the share of current support paid during the first six months after order establishment.

Some of the outcomes, such as the share of referrals requiring SET intervention, are easily measurable at the time that an e-referral is transmitted to DCS. Others, such as the share of current support paid as due, are only measurable with a lag at least as long as the time to order establishment plus a suitable follow-up period (e.g., six months). Thus, the timing of the

demonstration's interventions plays a critical role in determining the extent to which we can investigate each outcome. For the training, we will be able to evaluate each outcome to some degree. It is unlikely that we will be able to evaluate the impact of the data match on any of the outcomes that occur more than a few weeks after a referral.

DATA USED FOR THE EVALUATION BASELINE

After we identified the key data elements needed for the evaluation, DCS provided a set of data files with information about all e-referrals submitted during calendar year 2008 and files extracted from the DCS data warehouse that contain IVD case information related to any e-referral resulting in a newly opened case. The case data include child information, case status indicators and dates, and order payment information for calendar year 2008. For referrals with an associated IVD case, the IVD case number and NCP individual identifier provide the links across data sources.

Table 2 identifies the key elements from the e-referral data file provided by DCS. The data also include additional elements that may be incorporated into the final evaluation.

Table 2: Key e-referral data elements

Data element
Referral displayed to SET or not
New referral or modification
Referral date
Referral CSO
DCS region assigned
IVD case number
Custodial parent gender
Custodial parent date of birth
Number of children on referral
Relation of child/children to head of household
NCP identification number
NCP gender
NCP date of birth
DCS classification of referral
Indicators for whether the e-referral included NCP:
First name
Last name
Social security number
Phone number
Address
Employer
Employer address
Employer phone number

Table 2 identifies key data elements from the IVD data files provided by DCS. Here, too, we list only a subset of the data already received.

Table 2: Key IVD data elements

Data element
Child data
Child identification number
IVD case number
Child gender
Child date of birth
Paternity status indicator
Paternity status date
Type of paternity establishment
Order status and payment data
IVD case number
Type of order
Order date
Current payment due
Arrears due
Payment dates
Current amount paid
Arrears amount paid
Case data
IVD case number
Case type
Case creation date
Case status (open or closed)
Case closure reason
Good cause status
Interstate case indicator
NCP identification number

In all, the data contain records for 374,222 referrals submitted during 2008. Of these, 62,504 (17 percent) were displayed to DCS field office staff. In total, the displayed referrals resulted in 31,723 new DCS cases during 2008. In other words, about 1 of 12 referrals ultimately results in a new case. All other referrals were processed automatically, without the need for staff intervention.

The new cases were directly associated with 28,934 identified NCPs and an additional 2,789 cases with an unidentified NCP, for a total of 31,723 IVD cases. The data also include additional IVD cases associated with the identified NCPs. In all, 34,586 children were associated with the set of new IVD cases; many more were associated with the e-referrals not linked to a IVD case.[1] The new cases were associated with 12,520 established orders. The data include payments for about half of the established orders.

Together, these data provide a snapshot of e-referral activity during 2008 and provide quantitative evidence supporting the planned demonstration interventions.

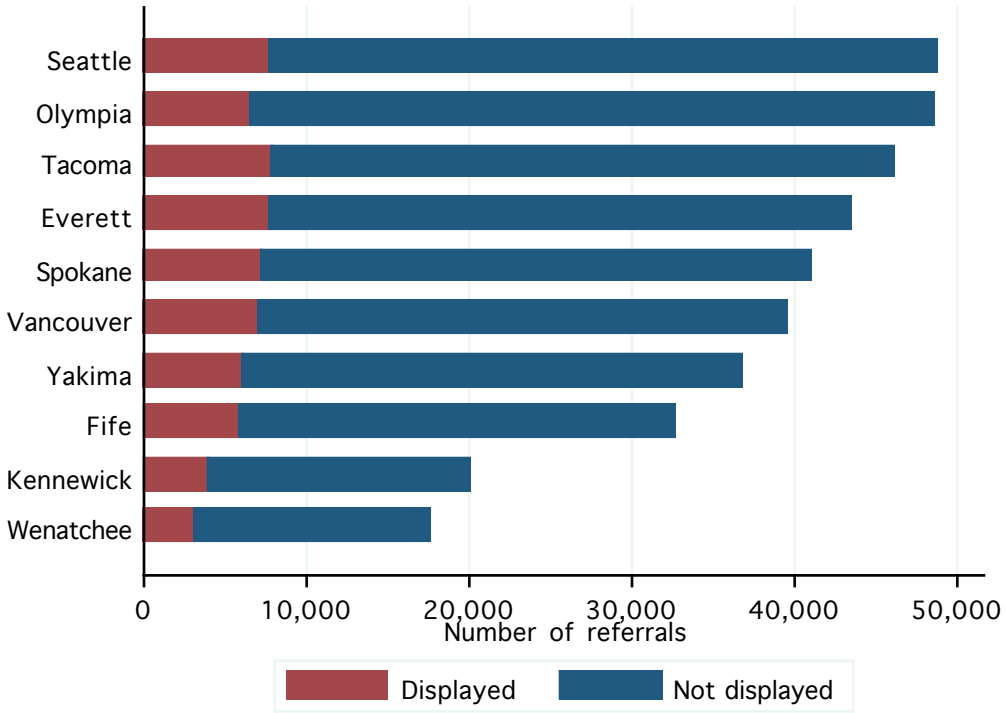
[1] We do not have identifiers for the children included on an e-referral. Thus, we do not have a precise method to count the number of children involved in e-referrals not linked to a IVD case.

Subsequent analysis on a larger, updated dataset will better address the central evaluation questions.

OVERVIEW OF THE E-REFERRAL CASELOAD

While DCS field office caseload drives the volume of e-referrals, the type of referral, the quality of the referral data, and characteristics of the parents and children identified on the referral, vary significantly across regions. This variation directly impacts field office workloads, and therefore drives one of the central questions of this evaluation: What are successful regions doing differently and can their success be replicated elsewhere? Figure 1 and Table 3 illustrate the geographic variation in share of referrals requiring SET intervention for case processing.

Figure 1: E-referrals by display status and DCS field office, 2008



Source: ECONorthwest analysis of Washington DCS data

The DCS information management system automatically processes a majority of all referrals without the need for human intervention. Only referrals that cannot be processed automatically—those that involve a new case or that have errors or missing data—are displayed to DCS field office staff. This has lead to the perception that referrals contain low-quality data. However, larger numbers of such referrals do not necessarily indicate that CSD staff necessarily submit more problematic data, but more referrals obviously require more staff resources to process, all else equal, and understanding the source of the variation in referral quantity and quality is critical to any effort that seeks to improve office efficiency.

While overall caseload clearly drives the total volume of referrals, and a region's caseload characteristics likely influence the amount of staff resources required to process the referrals, significant variation across CSOs within some DCS regions in referral quality suggests that other factors are at play. For example, across DCS field offices, the share of referrals displayed to staff ranges from about one in 7.5 (Vancouver) to one in five (Wenatchee). But each DCS field office receives referrals from multiple CSOs, and the variation in the share of displayed referrals is greater among CSOs than across DCS field offices—about twenty percent of referrals from both Auburn and King North (Ballard) CSOs are displayed to DCS staff, while the figure is only thirteen percent for referrals from the Alderwood (Arlington) CSO. All three CSOs submitted a similar number of referrals during 2008 (4,993, 4,108 and 5,403, respectively).

Table 3: E-referrals by type and DCS field office, 2008

Field office	Total e-referrals	Number displayed	Percent displayed	Number of displayed referrals associated with new cases	Percent of displayed referrals associated with new cases
Seattle	48,772	7,613	15.6	4,325	56.8
Olympia	48,467	6,476	16.9	3,586	55.4
Tacoma	46,027	7,775	17.5	4,467	57.5
Everett	43,451	7,607	16.5	4,516	59.4
Spokane	41,057	7,194	17.5	3,931	54.6
Vancouver	39,561	7,032	13.4	4,087	58.1
Yakima	36,731	6,052	17.8	3,049	50.4
Fife	32,615	5,776	17.8	3,263	56.5
Kennewick	20,026	3,856	17.7	2,136	55.4
Wenatchee	17,509	3,123	19.3	1,781	57.0
Washington total	*374,216*	*62,504*	*16.7*	*35,141*	*56.2*

Note: Six referrals had no associated DCS field office and are not included in Table 3.

Source: ECONorthwest analysis of Washington DCS data

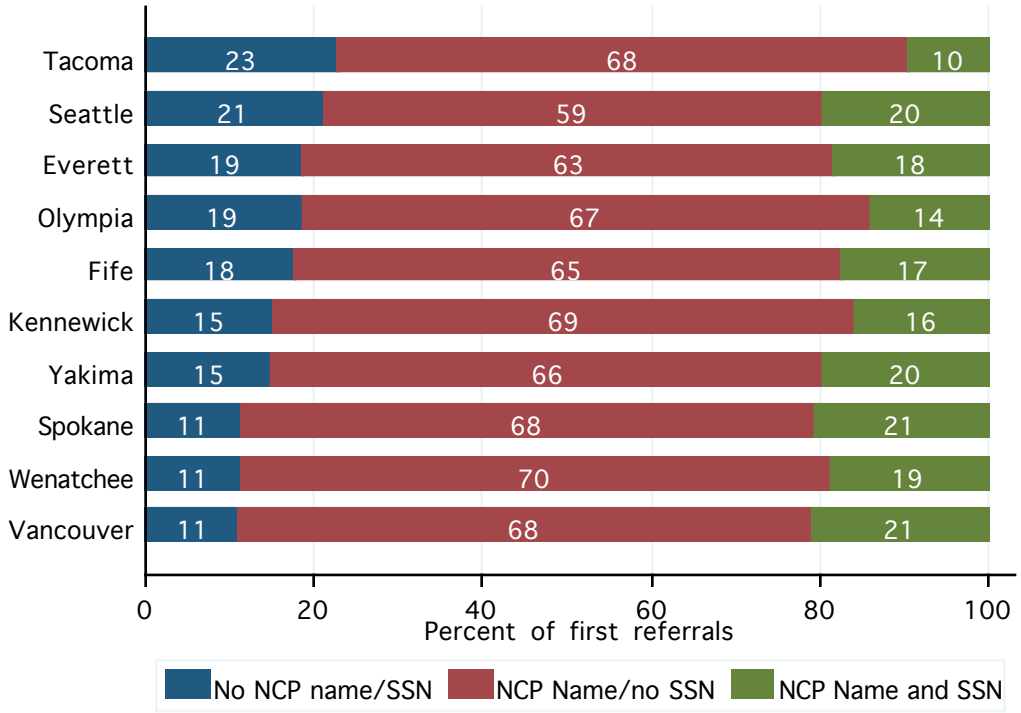
The remainder of this report focuses on referrals that related to any new IVD case during calendar year 2008. These referrals comprise just over half of all displayed referrals and require the most work on the part of field staff because they involve new, rather than established, cases. Ten percent of the cases associated with this group of referrals produced more than one referral during 2008. The data include a single referral for the remaining ninety percent of cases. Unless otherwise indicated, the analysis below includes only the first referral associated with each IVD case.

The share of displayed referrals associated with a new case also varies by DCS field office. Offices with a higher share of displayed referrals tend to have relatively fewer new e-referral cases, contrary to expectations if new case creation were the only important driver for the number of displayed referrals. Below, we investigate variation in data quality across DCS field offices and CSOs, and case characteristics that might drive regional trends in the e-referral flow.

REGIONAL VARIATION IN REFERRAL DATA QUALITY

Although the NCP screens CSD staff complete for an e-referral contain many data fields, during the process study interviews DCS staff repeatedly identified a small number of key NCP identifiers as most important to a useful referral. NCP name and Social Security number (SSN) rose to the top of this list. Consistent with this finding and with earlier analysis by DCS, we focus on these fields as most indicative of an e-referral's data quality. In fact, referrals that lack both an NCP's name and SSN have very little other data that could aid in locating the NCP.[2] Of the 5,323 "first referrals" with no NCP name or SSN data, only 170 (three percent) had *any* other NCP identification data. Only ten referrals had NCP SSN included but no name data. Figure 2 illustrates the variation in e-referral data quality across regions.

Figure 2: E-referral data quality, by referred DCS field office, 2008



Note: "NCP Name/no SSN" includes the 10 referrals with SSN data but not NCP name data.
Source: ECONorthwest analysis of Washington DCS data

The share of referrals with essentially no NCP identifiers varies from eleven percent (Spokane, Wenatchee, Vancouver) to 23 percent—nearly one quarter—in Tacoma. The pattern is more or less reversed when considering the share of referrals with both name and SSN data. These complete referrals comprise a low of ten percent of the referrals in Tacoma to about twenty percent in most other

[2] Complete information is not necessarily accurate information. Interviewees also stated that no information can be more useful then incorrect information. Our data do not allow us to assess the accuracy of data submitted with an e-referral. Analysis of SEMS-supplied referral classification codes may provide some insight into this issue.

regions. But some regions (e.g, Seattle) with high "completion" rates also have high rates of referrals with no identifying information. Variation in data quality among CSOs exceeds that across DCS field offices, as illustrated in Table 4.

Table 4: E-referral data quality, by referring CSO, 2008

DCS Field office	CSO	Total first referrals	Percent with no NCP name or SSN	Percent with NCP name but no SSN	Percent with NCP name and SSN
Everett	Bellingham	843	27.8	54.6	17.7
	Everett	835	19.9	70.7	9.5
	Friday Harbor (Out Station)	674	16.8	67.2	16.0
	Smokey Point	631	17.0	63.7	19.3
	Alderwood	462	8.0	59.3	32.7
	Skykomish Valley	306	17.6	65.4	17.0
	Oak Harbor	188	10.6	61.7	27.7
Fife	Bremerton	792	16.4	64.3	19.3
	Federal Way	557	22.8	68.4	8.8
	Auburn	511	12.1	68.5	19.4
Kennewick	Kennewick	1,598	15.8	68.3	15.9
	Walla Walla	282	11.0	74.5	14.5
Olympia	Olympia	1,118	20.0	68.3	11.6
	Chehalis	595	15.0	70.8	14.3
	Aberdeen	521	20.7	62.6	16.7
	Shelton	313	14.7	73.8	11.5
	Port Angeles	289	19.0	61.6	19.4
	Neah Bay Outstation	130	31.5	63.8	4.6
	Port Townsend	109	7.3	73.4	19.3
Seattle	White Center	1,101	23.3	57.1	19.6
	King South	758	19.8	58.7	21.5
	Renton	678	14.2	63.6	22.3
	Rainier	549	14.0	54.6	31.3
	King Eastside	432	13.4	72.2	14.4
	King North	429	23.3	57.1	19.6
	Capitol Hill	250	23.6	64.0	12.4
	Bell Town	165	33.9	60.0	6.1
Spokane	Spokane North	1,212	14.1	68.8	17.1
	Spokane Valley	872	8.3	73.3	18.5
	Spokane South West	521	12.3	55.1	32.6
	Tri county/Colville	246	10.6	69.5	19.9
	Clarkston	212	8.0	77.4	14.6
	Newport Branch Office	116	13.8	64.7	21.6
Tacoma	Lakewood	1,117	22.1	65.7	12.2
	Pierce South	1,041	19.2	74.4	6.3
	Puyallup Valley	1,025	21.1	67.1	11.8
	Pierce North	771	31.6	60.3	8.0
Vancouver	Columbia River	1,458	13.0	70.0	17.0
	Kelso	570	9.5	57.4	33.2
Wenatchee	Moses Lake	590	11.4	70.0	18.6
	Wenatchee	504	10.3	68.1	21.6
	Okanogan	286	12.2	68.5	19.2
	Othello Outstation	117	11.1	76.9	12.0
Yakima	Yakima	1,216	16.9	60.1	23.0
	Sunnyside	633	14.1	74.4	11.5
	Wapato	613	11.4	69.2	19.4
	Ellensburg branch	148	14.2	69.6	16.2
Multiple	Other	2,871	16.1	65.8	18.1
	Small offices	468	7.9	67.5	24.6
	Total	*31,723*	*16.8*	*65.9*	*17.3*

Notes: The table combines referrals from offices with fewer than 100 displayed referrals during 2008 into a single "Small offices" CSO. The "Other" CSO category includes all referrals not submitted by regular CSOs.

Source: ECONorthwest analysis of Washington DCS data

This table, sorted by referred DCS field office and CSO referral volume, indicates that while some DCS field offices benefit from relatively high quality referrals from all CSOs (e.g., Spokane), most DCS field offices see referrals of very different average quality across their referring CSOs (e.g., the Olympia field office), and CSO referral volume does not appear to explain much of this

variation. For example, the percent of first referrals with no NCP name or SSN varies from 13 to 23 percent among DCS field offices with more than 1,000 referrals, while the average for these offices is 18 percent, compared to 16 percent for smaller offices, although the data in Table 4 do not necessarily indicate individual CSOs. Differences in case characteristics across CSOs might affect the custodial parent's (CP) willingness to provide NCP identifiers, although our interviews suggest that CSD intake staffs' willingness and ability to collect the NCP data plays an important role as well. In the next section, we turn to important case characteristics.

REGIONAL VARIATION IN CASE CHARACTERISTICS

Factors such as case complexity (e.g., good cause status or multiple NCPs), number of children, and the relationship of the CP to the children could all impact the willingness and ability of the CP to divulge NCP information to the CSD caseworker. In this section, we examine differences in these case characteristics, across DCS field offices and across CSOs, to determine whether observed differences seem likely to explain a significant amount of the variation in referral data quality discussed above.

Table 5 displays, by DCS field office, the share of referrals with more than one child listed on the referral and those for which the youngest child on the associated IVD case was one year old or younger on the case creation date. Table 6 displays the same information by CSO. Other demographic characteristics such as race likely correlate with case outcomes, if not with referral quality, but the available data include very little useable demographic data beyond birthdates and geographic location.

Table 5: Number and age of children associated with an e-referral by referred DCS field office, 2008

Field office	Total first referrals	Percent with multiple children	Percent youngest child one year old or younger
Seattle	3,787	22.7	47.1
Tacoma	4,106	21.1	46.1
Everett	4,041	22.7	42.7
Yakima	2,744	24.7	49.7
Spokane	3,488	20.7	44.8
Olympia	3,291	21.9	42.6
Wenatchee	1,583	26.3	45.0
Vancouver	3,792	22.4	40.6
Fife	2,956	22.4	46.5
Kennewick	1,935	25.1	46.8
Total	*31,723*	*22.6*	*45.0*

Source: ECONorthwest analysis of Washington DCS data

Table 6: Number and age of children associated with an e-referral by referring CSO, 2008

DCS field office	CSO	Total first referrals	Percent with multiple children	Percent youngest child one year old or younger
Everett	Bellingham	843	25.0	37.2
	Everett	835	21.4	48.3
	Friday Harbor (Out Station)	674	22.7	43.8
	Smokey Point	631	21.6	41.7
	Alderwood	462	21.6	42.4
	Skykomish Valley	306	20.6	47.1
	Oak Harbor	188	27.1	42.6
Fife	Bremerton	792	22.7	41.7
	Federal Way	557	18.1	52.1
	Auburn	511	24.5	50.3
Kennewick	Kennewick	1,598	24.3	47.4
	Walla Walla	282	29.8	43.6
Olympia	Olympia	1,118	23.8	43.3
	Chehalis	595	20.5	42.7
	Aberdeen	521	17.9	44.7
	Shelton	313	16.9	46.6
	Port Angeles	289	19.7	42.6
	Neah Bay Outstation	130	16.2	41.5
	Port Townsend	109	25.7	32.1
Seattle	White Center	1,101	22.4	45.2
	King South	758	21.2	47.5
	Renton	678	22.7	46.6
	Rainier	549	24.8	51.2
	King Eastside	432	23.4	44.2
	King North	429	21.4	42.7
	Capitol Hill	250	24.8	54.0
	Bell Town	165	11.5	51.5
Spokane	Spokane North	1,212	19.3	47.4
	Spokane Valley	872	21.2	43.0
	Spokane South West	521	20.0	48.8
	Tri county/Colville	246	20.3	34.6
	Clarkston	212	21.7	46.7
	Newport Branch Office	116	18.1	39.7
Tacoma	Lakewood	1,117	19.8	48.7
	Pierce South	1,041	19.1	45.1
	Puyallup Valley	1,025	24.6	43.2
	Pierce North	771	19.6	48.9
Vancouver	Columbia River	1,458	23.4	41.9
	Kelso	570	21.8	45.3
Wenatchee	Moses Lake	590	28.0	46.4
	Wenatchee	504	24.6	47.0
	Okanogan	286	26.6	36.4
	Othello Outstation	117	25.6	49.6
Yakima	Yakima	1,216	24.6	48.4
	Sunnyside	633	26.7	54.3
	Wapato	613	26.1	46.0
	Ellensburg branch	148	17.6	48.6
Multiple	Other	2,871	24.4	40.2
	Small offices	468	25.2	38.7
	Total	*31,723*	*22.6*	*45.0*

Source: ECONorthwest analysis of Washington DCS data

Even at the DCS field office level, Table 5 indicates significant variation in these characteristics. Just under one in five referrals to the Spokane field office, for example, had more than one child identified, compared to one in four in Kennewick, Wenatchee, and Yakima. Differences in the youngest child statistic exhibit similar variation. As indicated in Table 6, we again find greater differences among CSOs, although looking across individual referrals, there is no strong statistical correlation between these case characteristics and whether an e-referral includes NCP name or SSN. It may be that the incentives to provide NCP information increase with case complexity, in aggregate effectively canceling out the effect of complexity on referral completion. The final evaluation report will include results from a more robust regression analysis that will quantify the impact of these characteristics on referral quality.

Family structure might also play a role in determining referral quality. For example, a head-of-household (HOH) who is not the child's biological parent may know relatively less about an NCP. In many, but not all, such cases, both parents are NCPs, increasing the burden on CSD staff to collect all requested NCP data. On the other hand, a grandparent is likely the CP in such cases. Unfortunately, the data do not identify the relationship between CP and NCP to determine whether a grandparent is from the child's maternal or paternal family. Good cause status might also affect the data contained in an e-referral. Table 7 and Table 8 display the prevalence of these characteristics across DCS field offices and across CSOs.

Table 7: Relationship to head-of-household of children associated with e-referrals, referrals associated with multiple NCPs, and Good Cause status at referral by referred DCS field office, 2008

Field office	Total first referrals	Percent where head-of-household is parent	Percent associated with two NCPs	Percent with Good Cause pending or approved at referral
Seattle	3,787	73.0	19.7	2.5
Tacoma	4,106	69.8	20.8	0.7
Everett	4,041	67.6	24.5	2.3
Yakima	2,744	65.8	25.1	0.4
Spokane	3,488	69.5	23.9	3.5
Olympia	3,291	65.6	26.0	1.2
Wenatchee	1,583	70.6	22.3	0.9
Vancouver	3,792	72.8	21.6	1.2
Fife	2,956	70.5	21.9	0.9
Kennewick	1,935	74.1	21.1	1.3
Total	*31,723*	*69.8*	*22.7*	*1.6*

Note: The data do not include a complete set of individual identifiers and their links across IVD cases. Thus, identification of referrals associated with multiple NCPs is based on an assumption that multiple referrals to the same CSO on the same day with the same CP birth date refer to the same family unit. When such referrals include at least one male NCP and one female NCP we conclude the case involves multiple NCPs.

Source: ECONorthwest analysis of Washington DCS data

Table 8: Relationship to head-of-household of children associated with e-referrals, referrals associated with multiple NCPs, and Good Cause status at referral by referring CSO, 2008

DCS field office	CSO	Total first referrals	Percent where head-of-household is parent	Percent associated with two NCPs	Percent with Good Cause pending or approved at referral
Everett	Bellingham	843	66.2	19.8	5.10
	Everett	835	73.1	20.8	3.11
	Friday Harbor (Out Station)	674	66.2	25.7	1.04
	Smokey Point	631	65.6	26.3	0.95
	Alderwood	462	63.0	35.5	1.52
	Skykomish Valley	306	67.0	25.8	0.33
	Oak Harbor	188	71.3	25.5	1.60
Fife	Bremerton	792	69.6	22.6	0.63
	Federal Way	557	77.2	14.5	1.26
	Auburn	511	63.4	28.6	1.37
Kennewick	Kennewick	1,598	74.2	21.0	0.81
	Walla Walla	282	73.0	23.4	4.26
Olympia	Olympia	1,118	70.9	21.0	0.98
	Chehalis	595	65.4	25.7	1.68
	Aberdeen	521	60.8	29.9	1.34
	Shelton	313	67.7	29.1	0.96
	Port Angeles	289	62.3	29.1	1.04
	Neah Bay Outstation	130	57.7	21.5	1.54
	Port Townsend	109	62.4	36.7	0.92
Seattle	White Center	1,101	69.8	18.9	1.00
	King South	758	74.3	19.1	0.79
	Renton	678	74.6	20.4	1.33
	Rainier	549	67.8	27.5	1.09
	King Eastside	432	72.0	21.5	4.63
	King North	429	72.5	21.2	8.39
	Capitol Hill	250	78.0	14.8	2.40
	Bell Town	165	84.8	10.9	4.85
Spokane	Spokane North	1,212	69.1	21.9	4.70
	Spokane Valley	872	67.3	27.8	1.61
	Spokane South West	521	72.9	24.2	6.33
	Tri county/Colville	246	56.5	34.1	2.44
	Clarkston	212	78.8	18.4	1.89
	Newport Branch Office	116	59.5	37.9	0.00
Tacoma	Lakewood	1,117	72.5	19.6	0.81
	Pierce South	1,041	68.5	24.7	0.48
	Puyallup Valley	1,025	66.4	22.6	0.98
	Pierce North	771	73.3	15.4	0.26
Vancouver	Columbia River	1,458	76.7	18.9	0.89
	Kelso	570	68.6	27.2	1.23
Wenatchee	Moses Lake	590	69.0	21.0	0.51
	Wenatchee	504	70.6	24.8	1.98
	Okanogan	286	66.4	28.3	0.35
	Othello Outstation	117	81.2	12.8	0.00
Yakima	Yakima	1,216	67.3	23.2	0.16
	Sunnyside	633	70.5	19.7	0.47
	Wapato	613	55.0	36.5	0.16
	Ellensburg branch	148	68.9	28.4	4.05
Multiple	Other	2,871	71.5	19.9	0.91
	Small offices	468	70.3	23.1	2.99
	Total	*31,723*	*69.8*	*22.7*	*1.58*

Note: The data do not include a complete set of individual identifiers and their links across IVD cases. Thus, identification of referrals associated with multiple NCPs is based on an assumption that multiple referrals to the same CSO on the same day with the same CP birth date refer to the same family unit.

Source: ECONorthwest analysis of Washington DCS data

The strongest statistical correlation between these variables and data quality is that referrals associated with two NCPs are somewhat more likely to have NCP name or SSN included on the referral than are single-NCP referrals—94 percent

of two-NCP referrals had name or SSN compared to 80 percent of single-NCP referrals.

As noted, most cases where the HOH is not the natural or adoptive parent have two NCPs. Thus, the two characteristics are inversely correlated. The Seattle field office, with nearly the highest prevalence of HOHs who are the child's parents, also has the lowest prevalence of two-NCP cases. The reverse is true for Yakima. Beyond the reasonably large geographic variation in good cause status, these summary statistics reveal no obvious patterns. As for other measures, many DCS field offices receive referrals with quite different average characteristics depending on the CSO submitting the referral.

REFERRAL QUALITY, CASE CHARACTERISTICS, AND OUTCOMES

Beyond its impact on DCS staff resources, referral quality is of interest only to the extent that quality affects child support outcomes. This section describes the relationship between referral data quality, the case characteristics described above, and the child support outcomes listed earlier. As noted, our data at present give us only a snapshot for calendar year 2008. Thus, we cannot thoroughly examine outcomes that occur with a significant lag (e.g., support payments six months after order establishment).

Below, we provide summary statistics for each of the outcomes with one exception: we defer analysis of the share of referrals that require manual intervention to the Year 3 evaluation report when we will have more complete data. In most cases, variation in these summary statistics is also greater across CSOs than across field offices, although we do not present the CSO-level detail.

ELAPSED TIME FROM E-REFERRAL TO CASE OPENING

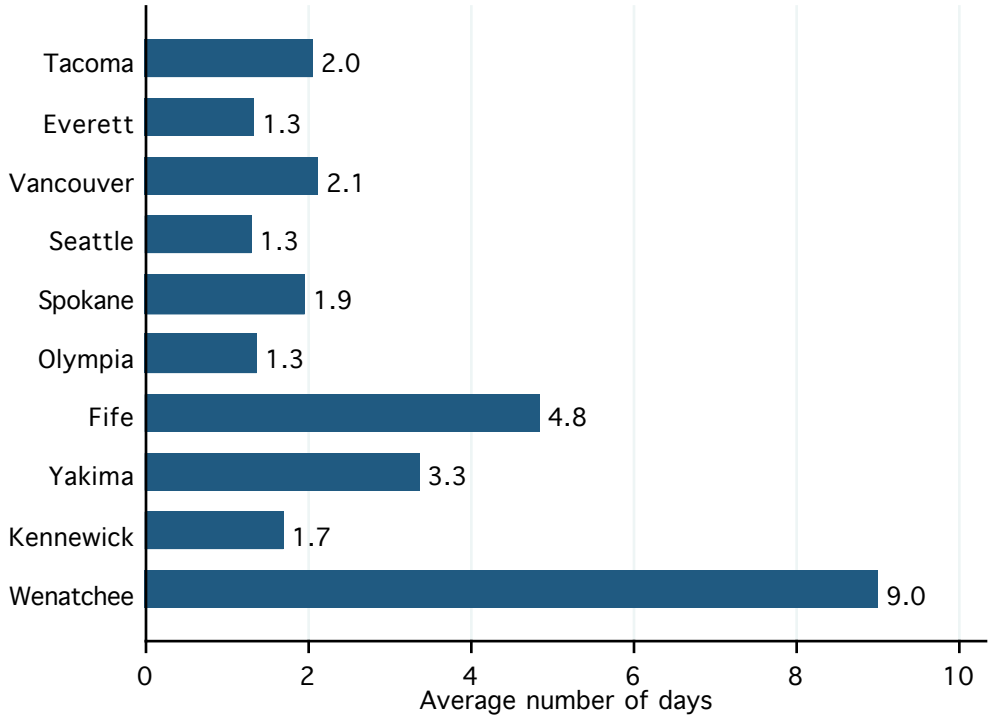
Figure 3 illustrates the rather wide differences across DCS field offices in the average time between the date of the e-referral and the date a IVD case was opened, with Wenatchee standing out as both a geographic outlier and an outlier in the average time to case creation, with an average of 9.0 days, compared to the state average of 2.5 days. Fife had the second highest average, at 4.8 days, almost twice the state average. Statewide, most cases were created within one day of the referral, and a relatively small number of extreme outliers could exaggerate differences between DCS field offices or between CSOs. However, the geographic pattern of median time to case creation is similar, with the median time in Wenatchee and Fife several times the statewide median.

These differences seem quite large and warrant further investigation. But neither the data quality metrics nor the case characteristics described above correlate strongly with time to case creation, although the small correlations are nonetheless statistically significant. Across the entire sample, order creation averages 0.2 days slower for referrals with NCP name or SSN. The regression analysis planned for the final evaluation may uncover stronger and different impacts of these characteristics on this outcome. Regardless, a lack of correlation

does not necessarily imply that improvements in data quality that follow the CSD training will not impact this metric, although it does suggest that the impact will not be large.

One possibility is that the training can measurably impact time to case creation for referrals from CSOs producing referrals of well below average quality but not for those from CSOs performing close to the average or above. Another possibility is that our measures of data quality do not capture important variation across CSOs (e.g., we do not know whether completed name data on a referral are accurate). The final impact analysis, by analyzing changes in aggregate outcomes, may be able to identify improvements in child support outcomes fostered by the e-referral demonstration even with imperfect measures of data quality.

Figure 3: Time from e-referral date to IVD case creation by DCS field office, 2008



Note: The figure excludes three percent of referrals for which the data do not contain case creation dates.

Source: ECONorthwest analysis of Washington DCS data

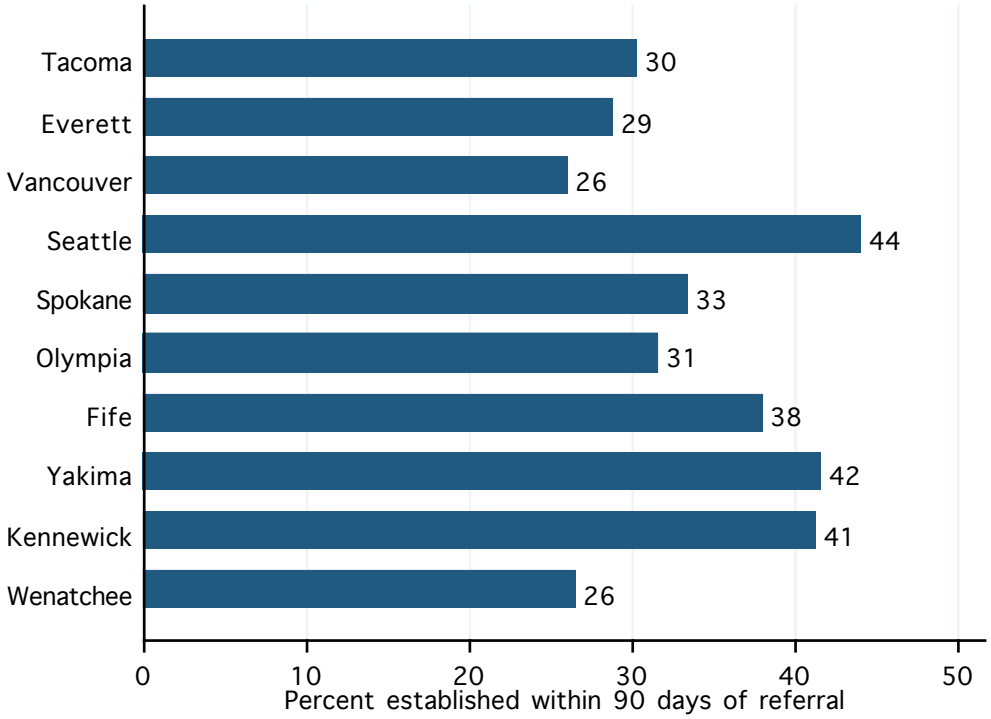
ELAPSED TIME FROM E-REFERRAL TO DCS-RECOGNIZED PATERNITY ESTABLISHMENT

A child's paternity was at issue in 14,562 (46 percent) of the first referrals submitted during 2008. Of these, paternity had not been established as of the referral date for only 3,676 (12 percent of all first referrals) The e-referral demonstration can only expect to influence paternity establishment for this latter

group of cases. Paternity had not been established for 1,420 of these (39 percent of referrals where paternity was at issue) by the end of 2008.

Our data are limited because we have information only about paternities established during 2008 or earlier. Thus, the share of paternities established and the average time from referral to establishment appear artificially low. For the purposes of this report, we address this issue by examining the share of the 3,249 referrals created on or before September 30, 2008 where paternity was established within 90 days of the referral. Figure 4 displays this "90-day paternity establishment rate" by DCS field office. Here, too, we find great variation across field offices, with the highest establishment rate (Seattle) about 70 percent higher than the lowest rate (Vancouver). For comparison, the statewide establishment rate in 2008 was 32 percent. However, offices that, on average, create cases relatively quickly do not necessarily have higher establishment rates, based on our admittedly imperfect 90-day definition. We describe below how the short analysis time period affects the type of the paternity establishments (administrative or judicial) that we analyze.

Figure 4: Ninety-day paternity establishment rate for referrals where paternity is at issue, by DCS field office, January 2008-September 2008



Source: ECONorthwest analysis of Washington DCS data

The correlation between data quality and paternity establishment within 90 days is statistically significant, but very small in magnitude. Although the data are censored (i.e., we do not know the final paternity outcome for cases where no paternity was established during 2008), the average time to establishment is

instructive. Specifically, among referrals through June 30, 2008 associated with IVD cases that have paternity established, establishment occurs after an average of 117 days, compared to an average of 130 days for those with no NCP name or SSN.

SHARE OF E-REFERRAL CASES WITH PATERNITY ESTABLISHED THROUGH AN ADMINISTRATIVE PROCESS

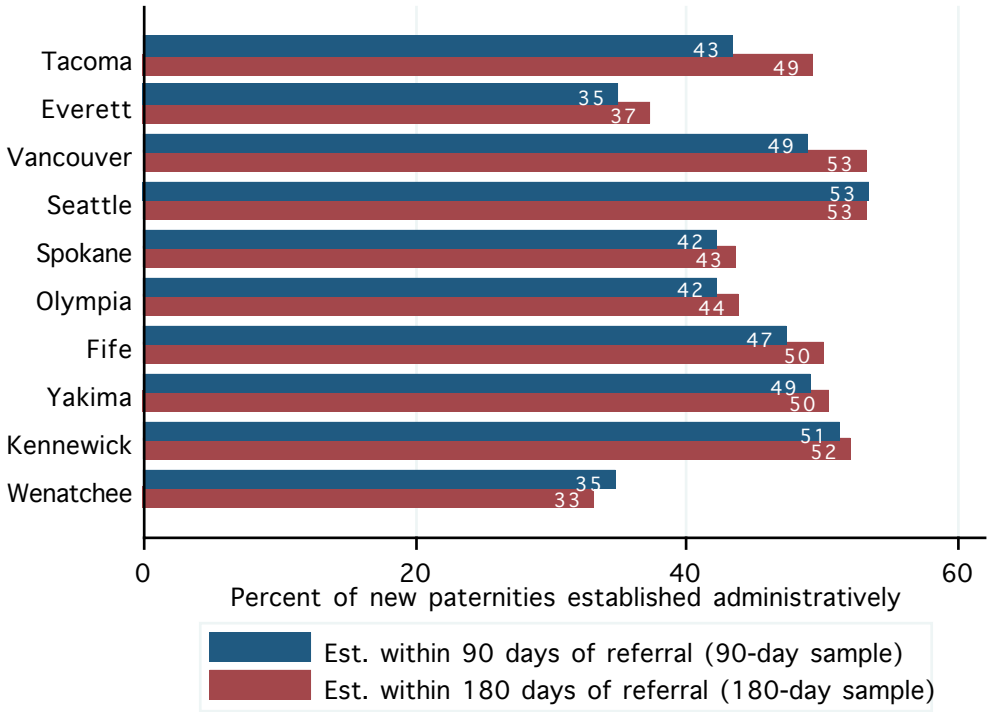
One goal of the e-referral demonstration is encouraging administrative paternity establishment over the more costly and time-consuming judicial processes for establishment. As with time to establishment, improving e-referral processes can only impact the type of establishment for those cases where paternity had not been established at the time of first referral—the 3,676 referrals identified above. From this sub-sample, 969 cases (26 percent) had had an administrative paternity establishment and 1,287 (35 percent) had had a judicial establishment. Paternity was not established during 2008 for the remaining 39 percent of the sub-sample. As above, however, the data are skewed by the short analysis period, particularly given that judicial establishments typically take far longer than do administrative establishments.

To provide some context for understanding how establishments occur over time, Figure 5 displays administrative paternity establishments as a share of all establishments that occurred post-referral for two samples of referrals. The first sample accounts for all establishments within 90 days of referral for all first referrals generated on or before September 30, 2008 (2,087 establishments). This allows a full 90 days post-referral for all included observations. The second sample accounts for all establishments within 180 days of referral for first referrals generated on or before June 30, 2008. The 180-day sample includes 1,637 establishments.

Statewide, 44 percent of new establishments occur within 180 days of referral for the 180-day sample, compared to 46 percent within 90 days for the 90-day sample. That the 180-day share is lower makes sense because the judicial process takes longer, on average. That the difference between the two measures is small reassures that the truncated data may not seriously distort our final analysis. Note, however, that the difference is larger for Tacoma and Vancouver. The different metrics may create greater disparities within individual CSOs as well.

We find no statistically significant correlation between data quality and administrative establishment. We do, however, find a modest, statistically significant negative correlation between administrative establishment and referrals for children associated with two NCPs, and a positive correlation between administrative establishment and having an HOH that is the child's natural or adoptive parent. Again, the finding about data quality does not necessarily imply that CSD training will not measurably improve this outcome measure.

Figure 5: Share of new paternities established administratively, by DCS field office and referral date, 2008



Source: ECONorthwest analysis of Washington DCS data

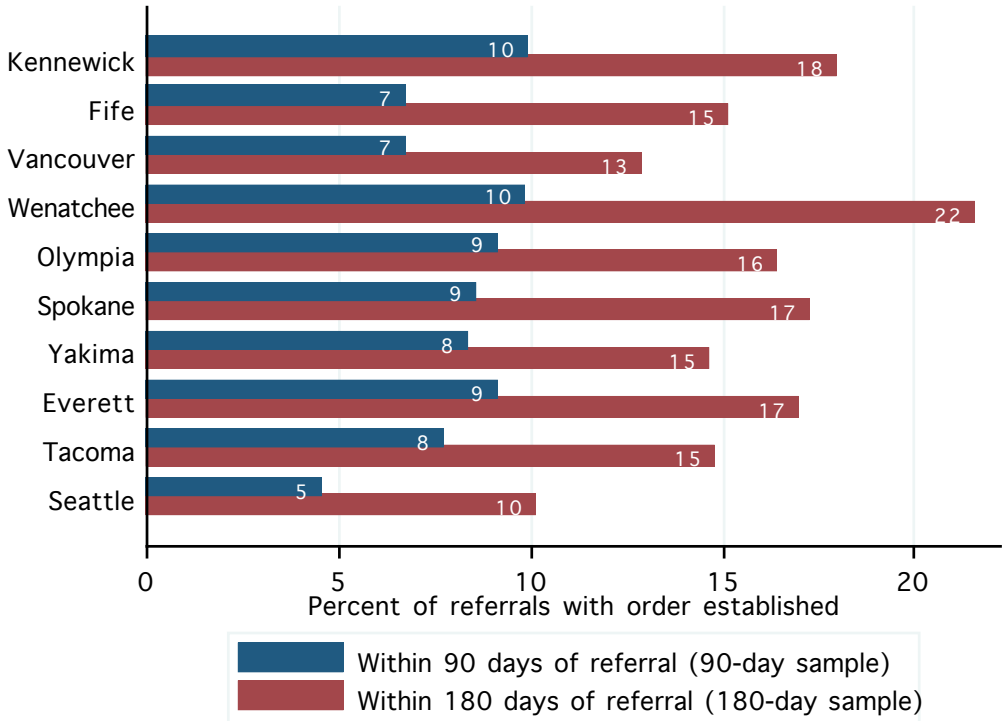
ELAPSED TIME FROM E-REFERRAL TO ESTABLISHMENT OF AN ORDER FOR CURRENT SUPPORT

The time from referral to order establishment, and all subsequent outcomes, can typically only be measured with a greater lag than is common for post-referral paternity establishment. In all, 3,748 (twelve percent) of the 31,723 first referrals had an order established during 2008. The median time between referral and order establishment was 84 days—a number that is likely to be artificially low because of the short sample period. Thus, we describe order establishment using a method similar to that used above to describe paternity establishment. We look at both a 90-day sample (25,772 referrals) and a 180-day sample (16,174 referrals) to provide a brief overview of how order establishment varies over time and across field offices (see Figure 6).

Statewide, nearly eight percent of first-referrals in the 90-day sample had an order established within 90 days, compared to fifteen percent of the 180-day sample referrals that had an order established within 180 days. As illustrated in Figure 6, the relative position of field offices in terms of order establishment does not change greatly across the samples, but the large share of order establishments expected beyond 90 days suggests that a short analysis period could seriously bias analytic results. In addition, judicial order establishment typically takes longer than the administrative process, creating another potential source of bias.

Given these caveats, however, our preliminary analysis suggests that more and better NCP data on the e-referral correlates with moderately shorter time to establishment. For cases with established orders and referrals prior to June 30, 2008, the average time to order establishment is about 27 days longer for referrals with no NCP name or SSN data than it is for those with one or both identifiers (135 days and 107 days, respectively).

Figure 6: Share of referrals with an established order, by DCS field office, 2008



Source: ECONorthwest analysis of Washington DCS data

SHARE OF E-REFERRAL CASES WITH AN ORDER FOR CURRENT SUPPORT ESTABLISHED THROUGH AN ADMINISTRATIVE PROCESS

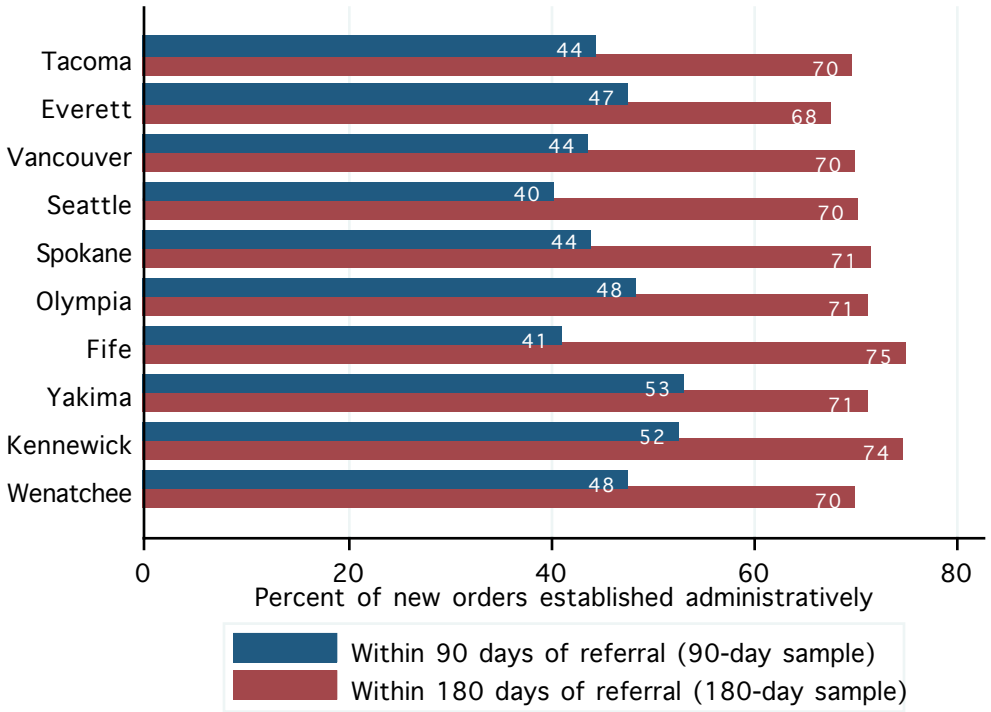
A large majority of all orders are established administratively.[3] Of the 3,748 associated with first referrals, 82 percent were established administratively, although this figure, based strictly on 2008 data, is not a completely reliable indicator of the administrative establishment rate over a longer period of time. Considering referrals from the first six months of 2008, 52 percent of administrative orders had been established within 90 days of referral, compared to only 25 percent of all other orders. These percentages can only fall with a longer

[3] Based on discussion with DCS staff, we define an order as administratively established if the order is coded as an Administrative Order, a Consent Order, an Agreed Settlement, an administrative Default Order, or a 9-710 administrative order (uncommon).

follow-up time. As illustrated in Figure 7, the share of established orders determined administratively rises with a longer follow-up period, and the relative ranking of field offices changes considerably between the 90-day and 180-day samples as well.

The 2008 data suggest that referrals with less NCP data are also relatively less likely to have an administratively established order, and this correlation is statistically significant. Among referrals between January 1 and June 30, 2008 associated with cases with an established order and containing NCP name or SSN, 79 percent were established administratively. This compares to 65 percent for those referrals without the NCP identifiers.

Figure 7: Share of orders established administratively, by DCS field office, 2008



Source: ECONorthwest analysis of Washington DCS data

AVERAGE ARREARAGE AT ORDER ESTABLISHMENT

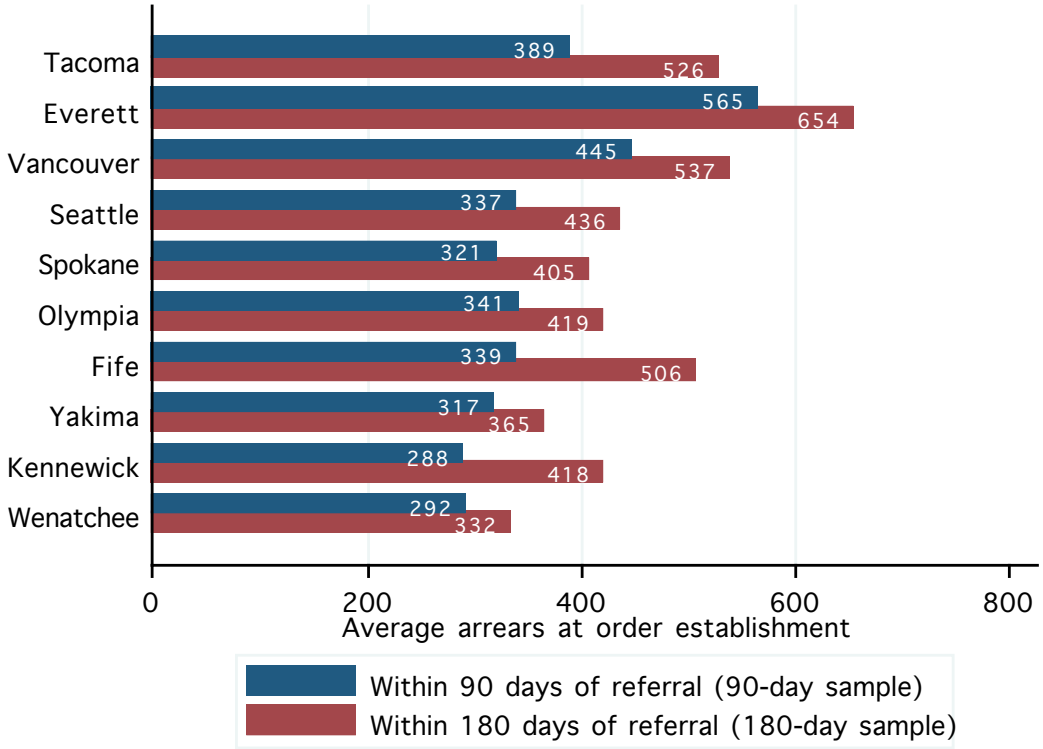
Part of the motivation for improving e-referral quality is the notion that better data will lead to faster NCP identification, location, and order establishment. A beneficial side effect of speeding these processes could be that NCPs owe less in arrears at order establishment, which may in turn correlate with better payment outcomes. This outcome measure implicitly incorporates information about the time to order establishment—the longer the order establishment process, the more arrears owed by the NCP. Thus, average arrearage provides an alternative perspective from which to view the impacts of e-referral quality. As with time to

order establishment, the lag between referral and order establishment will bias impact estimates.

To the extent that referral quality improves order establishment time, the observed difference in average arrears between high and low-quality referrals likely understates the true difference when using data from a short analysis period as we do here. Figure 8 illustrates the potential bias of using short time periods by displaying the average arrears for orders in the 90-day and 180-day order establishment samples. Not surprisingly, arrears are higher for the 180-day sample, and we again find significant variation across DCS field offices.

The 2008 dataset suggests very little correlation between missing NCP identifiers and average arrearage, although this conclusion could change with additional data or alternative measures of arrearage (e.g., ratio of arrears to current support) because factors other than time, such as income, affect the magnitude of order amounts.

Figure 8: Average arrearage at order establishment, by DCS field office, 2008



Source: ECONorthwest analysis of Washington DCS data

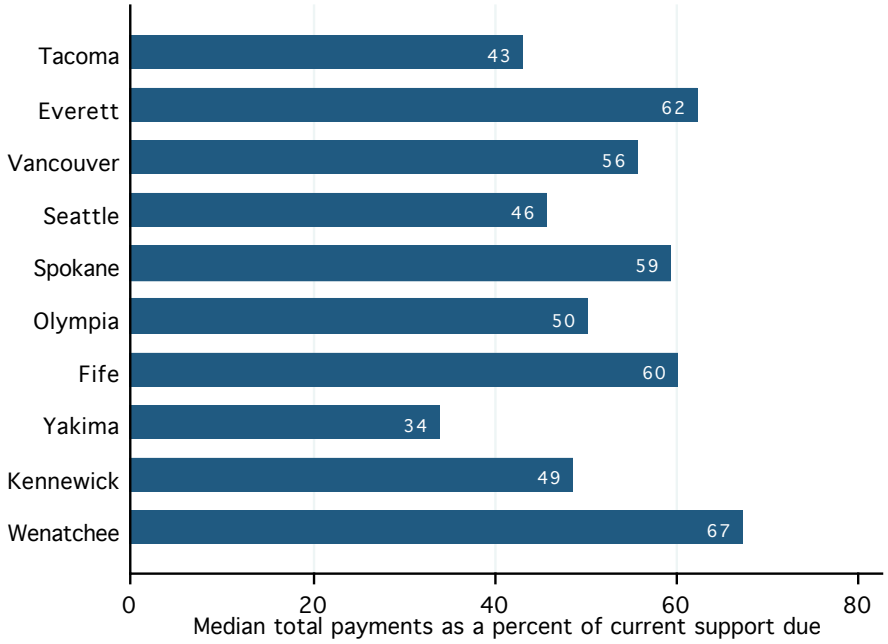
SHARE OF CURRENT SUPPORT PAID AS DUE WITHIN SIX MONTHS OF ORDER ESTABLISHMENT

The final outcome, share of current support paid as due is, by definition, only measurable a minimum of six months after order establishment and, as noted above, order establishment typically takes several months after the e-referral date for a case. The payment data provided by DCS included payments through February 2009, allowing us to examine outcomes for all orders established during or before August 2008 (2,034 orders). As for other outcomes, this preliminary analysis may be skewed because the data contain a relatively large share of quickly established orders, and outcomes for these orders may differ in important ways from those orders that take longer to establish.

Figure 9 displays variation across DCS field offices in total payments in the six months after order establishment expressed as a percent of current support due during this period. The figure shows the median percentage by office, rather than the mean, to reduce the influence of outliers (e.g., cases with low current support payments but relatively high total payments associated arrearage).

Unfortunately, the late implementation of the demonstration interventions will likely preclude a detailed analysis of this child support outcome before the end of the original three-year demonstration period. The final evaluation report will again consider this outcome if we conclude that available data are sufficient to evaluate demonstration impacts.

Figure 9: Total payments within six months of order establishment as a percent of current support due, by DCS field office, 2008



Source: ECONorthwest analysis of Washington DCS data

CONCLUSIONS

Consistent with expectations, we find wide variation in the quality of NCP data on e-referrals across CSOs. These differences appear driven by CSO-specific practices rather than case type, although we do not have data to identify what these practices might be. The theory of action behind the demonstration's training intervention is that highlighting the importance of accurate NCP data to DCS and to their clients will encourage CSD intake staff to improve the quality of data submitted on the e-referral. Better information should, in turn, lead to better child support outcomes. With some exceptions, we observe modest correlations between better quality referral data and better child support outcomes, although the short time period covered by the data likely creates serious biases in the specific numbers.

The delays in demonstration implementations will likely result in too little data by the end of the original three-year demonstration period to fully evaluate the impact of the demonstration on many of the child support outcomes. But an expanded set of data from the DCS data warehouse should at least allow us to create CSO performance benchmarks that create average outcome expectations (data quality or child support) that have been adjusted for observable caseload characteristics. The correlations between IVD case information and outcomes noted in previous sections support the feasibility of such an approach. At a minimum, the benchmarks would help DCS staff better target outreach efforts towards CSOs where the biggest improvements are likely.

We conclude this chapter with Table 9, below. The table summarizes the observed relationships between referral data quality (whether or not the referral had NCP name or SSN) and the child support outcomes. To minimize biases caused by the short time period, we restrict the sample for Table 9 to referrals created on or before June 30, 2008. Smaller samples are used as appropriate for specific outcomes (e.g., share of administratively established orders is only relevant to referrals associated with an established order). The final report for this project will include detailed data from CSOs to the extent that it is available.

Table 9: Child support outcomes and referral data quality for referrals created January through June, 2008

Outcome	Number of first referrals	Referral includes NCP name or SSN	Referral does not include NCP name or SSN	Difference is statistcally significant (p<0.05)
Elapsed time from referral to case opening (ave. days)	14,535	2.6	2.3	Yes
Elapsed time from referral to paternity establishment (ave. days)	1,637	117	130	Yes
Share administratively established paternity	1,637	48.6%	50.4%	No
Elapsed time from referral to order establishment (ave. days)	2,789	107	135	Yes
Share administratively established order	2,789	79.2%	65.0%	Yes
Average arrearage at order establishment	2,789	$610	$618	No
Share current support paid as due (median)	2,789	40.9%	40.0%	No

Source: ECONorthwest analysis of Washington DCS data

Table 9 shows interesting results for several key indicators. First, the average elapsed time from the date of referral to DCS and the establishment of paternity was 13 days, or almost two weeks, shorter for cases that were referred with an NCP name and social security number. Similarly, the elapsed time from referral to the date of order establishment was 28 days shorter for cases with name and social security number. Referrals that included this key information also were 14 percent more likely to be handled through an administrative rather than a judicial order, saving families and the state from entering the court system.

These indicators add weight to the theory that better information about non-custodial parents will lead to better child support outcomes for families and the state. The analysis of pre- and post-intervention data will help us to draw stronger and more detailed conclusions about if and how the intervention works.

Two other important outcome measures, the average arrearage at the time of order establishment and the share of current support paid as due, are similar in this baseline data set. We will continue to examine these indicators, and expect to see differences over time as the training intervention is implemented and evaluated.

Chapter 3 Training Implementation Study

INTRODUCTION

The second of the two components of this 1115 demonstration grant called for the Division of Child Support (DCS) to develop a training module for Community Services Department staff on the process of collecting critical information during the TANF interview that would expedite the process of collecting child support from non-custodial parents. For purposes of evaluating the outcomes of the training intervention, the implementation plan calls for the training to be rolled out in phases, with the third and final phase being statewide implementation.

The training project started with identifying critical data needs for the e-referral process. During 2004, a DCS/TANF workgroup identified staff training on e-referrals as a critical need throughout the state. The group, which was convened through OCSE's *Better Outcomes Through Collaboration* seminars, found DCS and TANF/Medicaid have different interpretations of the data fields on the non-custodial parent (NCP) screen in the Community Services Division (CSD) computer system, and that no systematic training was available. Through the demonstration project, DCS has documented the existing referral processes, identified strengths and weaknesses across the state, and built a joint TANF/Medicaid/DCS training curriculum with the goal of sharply improving the quality of information transferred by TANF/Medicaid.

This chapter describes the process of developing and implementing the training, and reports on some early feedback from trainees about their experience. Because the training implementation has been significantly delayed by workload increases and staffing shortages in CSOs, we do not yet have data about the effectiveness of the training module with respect to the eight outcome measures identified in the evaluation design. However, the development and implementation processes offer some important lessons for organizations that may consider replicating such a training program. These are discussed throughout the chapter, but are summarized here.

- **Experience and expertise are important resources for developing online training.**
- **Training time for CSD staff is a critical constraint.**
- **In order to be most effective, the training must be mandatory.**
- **The collaboration between CSD and DCS staff was critical to developing a useful and credible training module.**
- **DCS and CSD can improve their communication in areas beyond those targeted by this grant.**

SUMMARY OF THE E-REFERRAL PROCESS STUDY

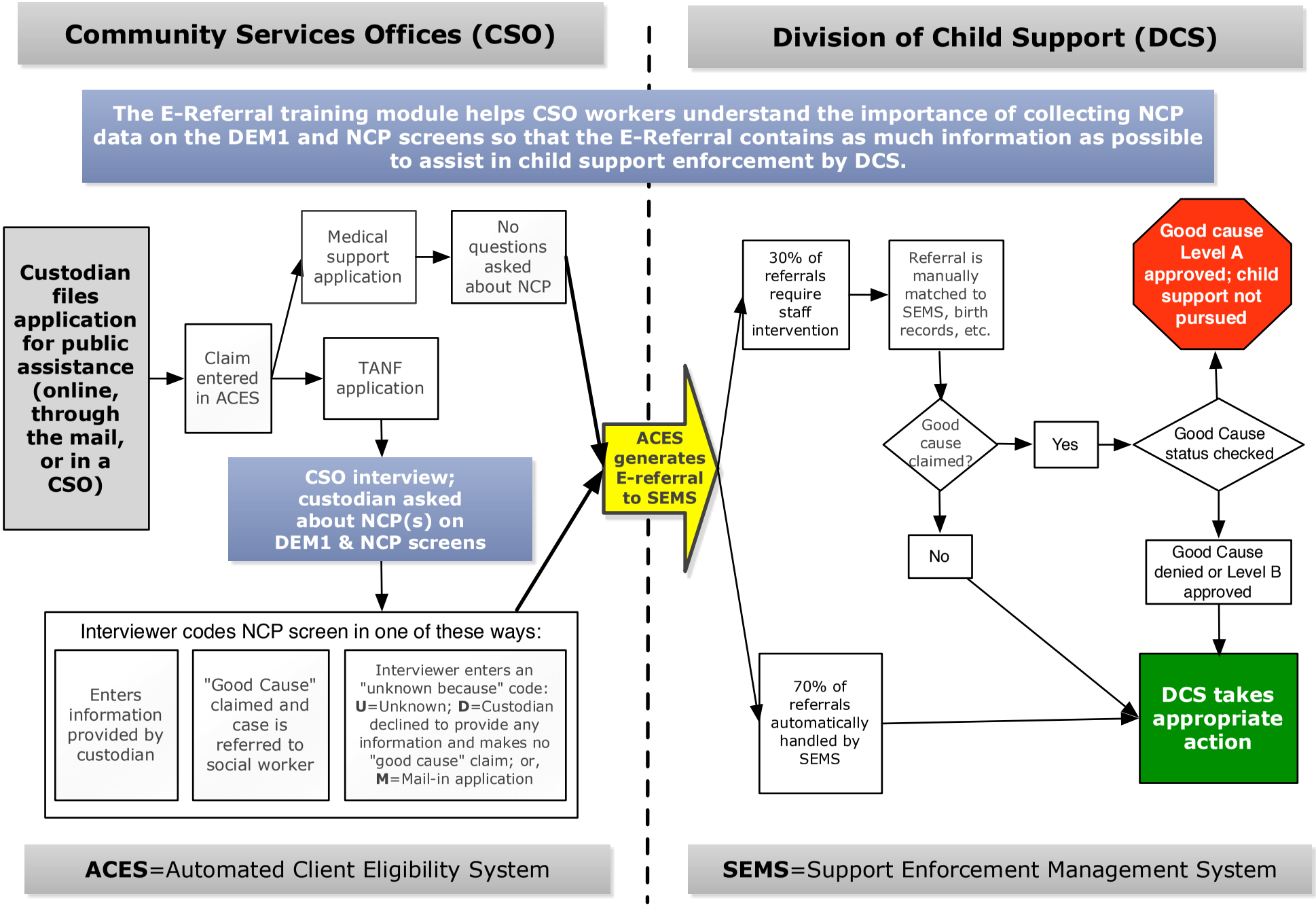
The first step in the demonstration project was to undertake a process study of the e-referral system. For the training intervention, the goal of the process study was to identify specific areas of weakness in the CSO's data collection processes that could be addressed by an on-line training session for CSD staff. The evaluation project team conducted interviews with an array of CSD workers to understand the e-referral process from the CSD perspective. Typically, the project team met with the office administrator, one or more supervisors, and several line workers. The conversations sought to explore the typical client flow as it relates to the interaction between TANF and DCS, as well as the impressions CSD staff had about child support and the e-referral process. The process study resulted in a handful of specific recommendations that guided the development of the training module. These recommendations will be discussed below, but first it may be useful to review the CSDs' TANF intake process and how it relates to DCS's processes.

A BRIEF SUMMARY OF E-REFERRAL PROCESS

Figure 10 on the following page shows a diagram of the process involved in generating an e-referral. Families may apply for public assistance, including TANF, medical support and food stamps, either in person, on-line or by mail. For a TANF application, which necessarily involves dependent custodial children, the applicant must be the child's legal custodian: the mother, the father or another adult with legal custody, such as a grandparent. When a custodian applies for a TANF grant, he or she is required to have an in-person interview with a CSD intake staff person.

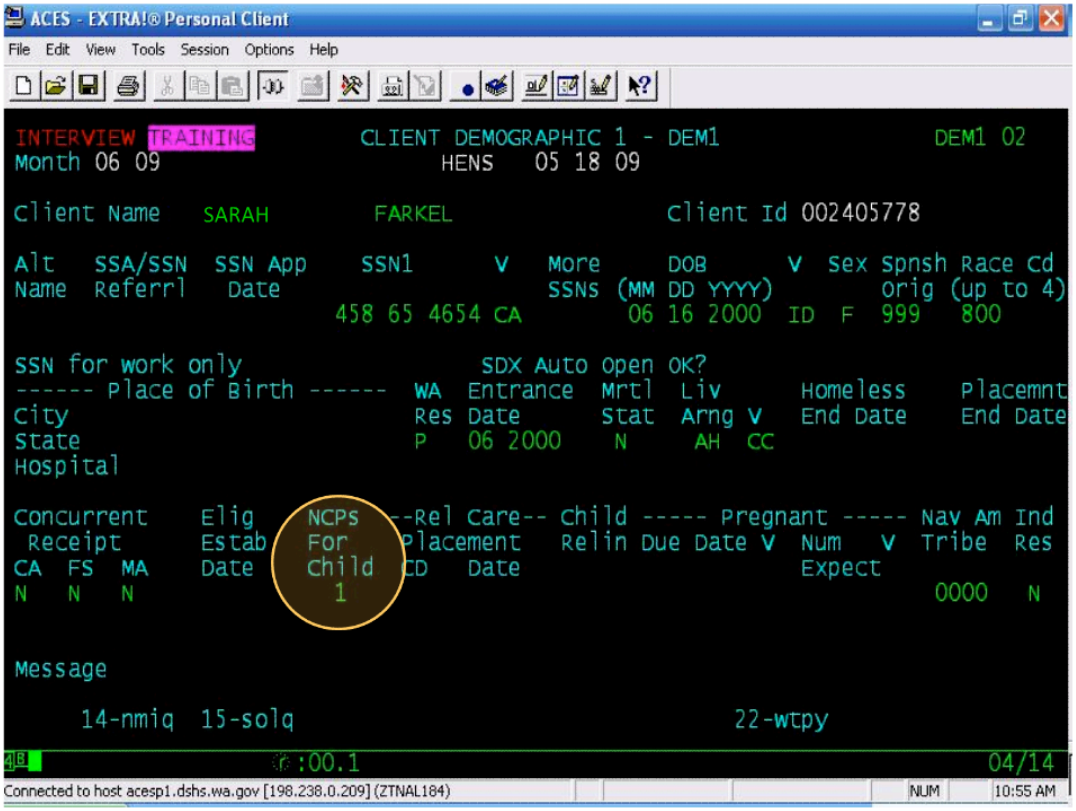
During the intake interview for in-person applications, the CSD intake worker proceeds through a series of data collection screens in the Community Services Division's Automated Client Eligibility System (ACES). Two of these screens, the "DEM 1" (the child's basic demographic information) screen and the subsequent "NCPS" (non-custodial parent screen), ask for data that are critical to DCS for processing child support enforcement actions against non-custodial parents. These two screens are the focus of the training intervention designed by DCS for CSD staff.

Figure 10: The E-Referral Process



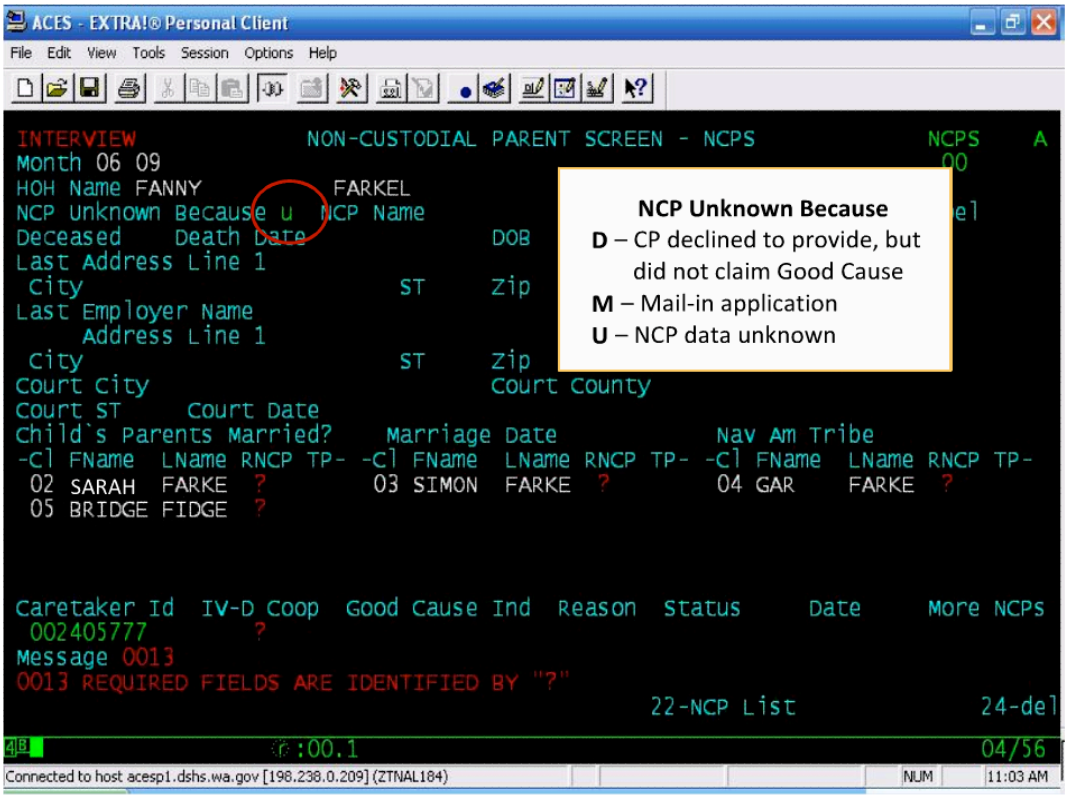
The DEM1 screen asks for basic demographic information about the child for whom the application is made, including the number of non-custodial parents for the child with the application. This field is called "NCPS for Child" on the DEM1 screen. The TANF applicant may be in a two-parent household, may be a single parent, or may be the custodian of child with neither parent in the household. In a two-parent household, the NCPS field is coded as zero, meaning there are no non-custodial parents for that child; in a single-parent household it is coded as one; and for a non-parent custodian the field is coded as two, meaning both parents are non-custodial.

DEM1 Screen in ACES



In any case involving a non-custodial parent (single parent or non-parent custodian), in order to receive full benefits the applicant generally must agree to cooperate in identifying and locating the non-custodial parent(s). The CSD interviewer must complete a "non-custodial parent screen" (NCPS) for each non-custodial parent related to the children in that household. The NCPS asks for the following information that may be useful in locating the non-custodial parent.

Non-Custodial Screen (NCPS) in ACES



Data Elements in ACES NCP Screen

Head of household
- Name
- Client ID

Non-custodial parent
- Name
- Date of birth
- Sex
- Social Security Number
- Last address
- Phone number
- Last employer name and address
- Court order (divorce, paternity)
- Court location
- Marital status/marriage date
- Native American Tribal code

Non-custodial parent (continued)
- Deceased (Y/N)
- Date of death
- Reason if NCP is unknown (*e.g.*, mail in application, CP declined to answer, CP does not know)

Child(ren)
- Name
- Relationship to NCP (*e.g.*, father, mother, paternity affidavit, alleged father)

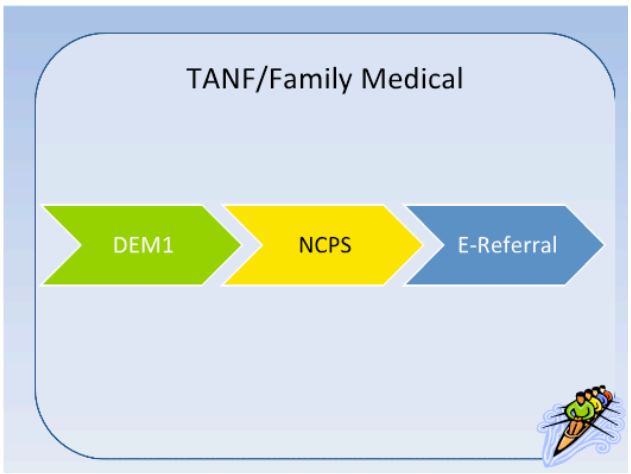
Other
- Caretaker ID
- IV-D cooperation status

If the applicant can provide at least some information about the NCP, the intake worker enters the applicable data into the fields on the NCPS. However, there are cases in which the applicant does not provide such information. A field called "Unknown Because" allows the intake worker to provide a reason why the applicant did not provide information using one of two codes:

- **U=Unknown**: the custodian has no information about the NCP; or
- **D=Declined**: the custodian may have information but declines to provide it and makes no "good cause" claim;

Applicants also may claim that there is "good cause" not to pursue child support, for example, when the threat of domestic violence exists. Such cases are automatically referred to a social worker for investigation. The application still generates an e-referral to DCS, but DCS is alerted to check the status of the good cause claim with the social worker before proceeding with the child support claim.

Training Slide Explaining Process from ACES Screens to E-Referral



ACES compiles the DEM1 and NCP information gathered during the TANF intake interview and automatically generates an "e-referral" to SEMS, which begins the process of child support enforcement. DCS estimates that 70 percent of the e-referrals they receive have enough information to allow the Division of Child Support's Support Enforcement Management System (SEMS) to automatically identify the NCP through other databases and to automatically take appropriate action. However, 30 percent of e-referrals require DCS staff intervention to identify the NCP and to ensure that DCS is taking the appropriate action. The quantity, and most importantly the quality, of the information gathered by the CSD interviewer during the interview have a direct and significant impact on DCS's workflow and outcomes.

RECOMMENDATIONS FROM THE PROCESS STUDY

During the initial process study, CSD and DCS staff identified four areas of weakness that likely could be improved through a focused training session for CSD staff. These recommendations formed the basis of the curriculum for the online training sessions developed by DCS staff. Specifically, the process study recommended that the training curriculum address the following topics:

- **Identify the critical NCPS fields**. CSD workers indicated that it would be useful to know which data fields on the NCPS were most important to DCS. By having a better sense of the key data items and how those are used, CSD intake workers felt they might be able to probe more effectively and obtain higher quality information.

- **Promote consistent use of ACES "notes" screens**. Although many CSD staff indicated that they collect potentially relevant information about the absent parent that is not captured on the NCP screen, there is no standard practice for where this information is entered. Support Enforcement Technicians, who match e-referrals with other data sources to identify NCPs, do not search for notes on a regular basis, in part because use of the multiple ACES notes screens is not standardized among CSOs.

- **Emphasize that no information may be better than information known to be wrong**. Support Enforcement Technicians typically double-check all information provided on the e-referral. Although DCS wants as much information as possible about the absent parent, incorrect information ultimately makes paternity establishment more difficult. This is particularly true in cases where there are multiple children on the grant with different fathers. In these cases, DCS would rather that intake workers simply enter "unknown" instead of entering partial information about one of the NCPs associated with the case.

- **Refresh CSD understanding of the relationship between TANF and child support enforcement**. Although most CSD staff indicated that they had some understanding of the relationship between TANF and child support, there was often confusion about how exactly DCS used the NCP information. CSD financial workers and case managers may benefit from occasional refreshers that reiterate the importance of the data collection effort. Aside from helping them fill in the appropriate fields, the refreshers would leave staff better equipped to answer questions from clients about how child support will affect the grant amount, and the implications of assigning rights and responsibilities to the state. In addition, if child support is presented to clients as a means of self-sufficiency, it may result in greater cooperation from previously hesitant applicants.

- **Improve communications to TANF applicants about non-cooperation sanctions**. A common refrain during interviews with CSD staff was that clients who are sanctioned for non-cooperation with DCS are typically unaware of the requirement to provide information about the absent parent, and about the fact that such non-cooperation results in a reduction of their TANF grant. Although CSD staff indicated that they always discuss this with new applicants, and clients receive several letters informing them

of this responsibility before sanctions are initiated, the sanction process still surprises many clients. Some of these situations might be avoided with more succinct explanations of the sanction process to new TANF applicants. For clients already inclined to provide information about the absent parent, it may be possible to better ensure that they have ample opportunity and incentive to provide the relevant details.

TRAINING DEVELOPMENT

Under this 1115 demonstration grant, DCS was responsible for developing the training module for CSD staff. At the beginning of the grant project, DCS had an expert on e-learning who took the lead on developing the training. However, this person left early in the project, and the training development was left to Lorna Linden, the Training Program Manager for DCS. Aside from some routine tasks, Ms. Linden devoted most of her time to this project. However, Ms. Linden had no technical experience developing online trainings, so she learned the process as she went with help from the DCS and CSD information technology staff. In particular she received considerable technical support for the Articulate program over the phone from a CSD information technology staff person in Spokane.

While the Community Services Department has a Staff Development & Training Manager with online training development experience, severe staff reductions and workload increases meant that he was too busy to be a key contributor to the project. However, he did provide some technical support throughout the project, and was responsible for rolling out the training to CSD staff, and for administering the post-training survey.

SOFTWARE

The Training Program Manager built the training module primarily in Microsoft PowerPoint. She used this in combination with an add-on program called Articulate that allows the addition of attachments, quizzes, narration and animation. A character named “Becky,” who was created in a program called Character Builder, guides the training module. Character Builder creates a Flash file for the animated character that is integrated into the PowerPoint slide show.

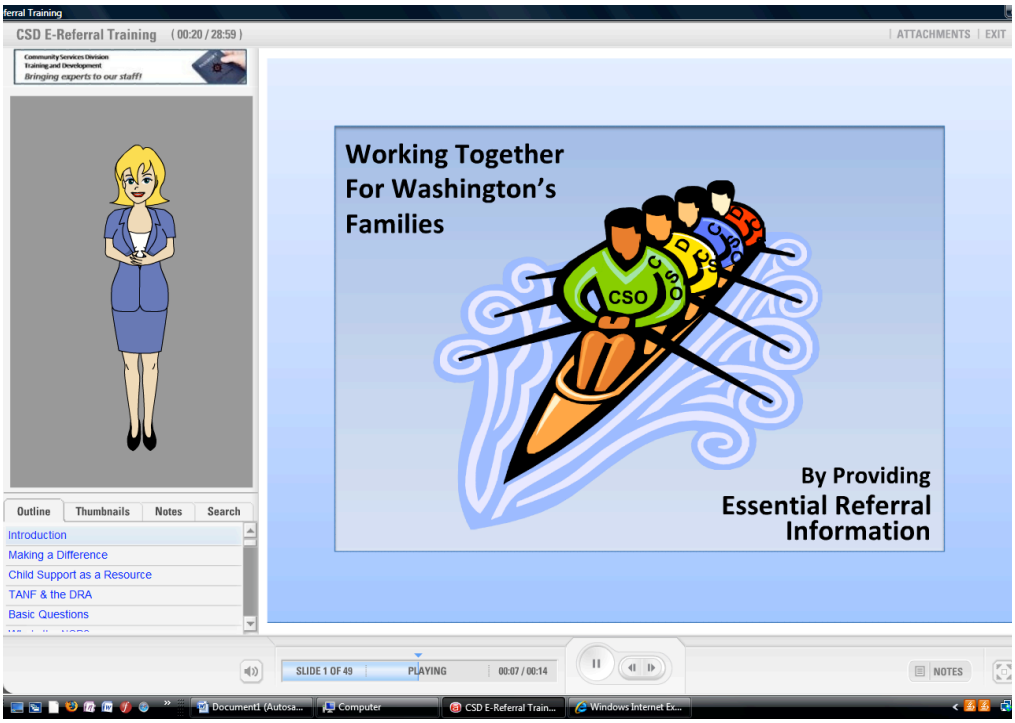
The DCS Training Program Manager learned to use Articulate and Character Builder as she was developing the training, which consumed a large proportion of her time on the project. Based on her experience, she recommended that an inexperienced training developer find a resource person with expertise in these programs. She also said that it would have been useful to learn more about the program’s capabilities before she began working on the project.

Washington’s Department of Social and Health Services has an internal online training system, which serves as the portal for online trainings

uploaded by individual departments. Managers can specify certain training programs as mandatory for certain employees, while others remain optional. The system tracks each employee's progress and completion. Both employees and managers have access to the employee's training records.

Below is a screen shot of the introductory slide showing how the PowerPoint slides, the Articulate add-ons and the narrator character are incorporated into the training program platform.

Screen Shot of the Training Introduction



CONSTRAINTS ON THE DEVELOPMENT PROCESS

The major constraint on the development process for the CSD training was the lack of available expertise in developing online trainings. As described earlier, the person at DCS with the most experience in this area left the organization, leaving the work to the DCS Training Manager who had no experience in this area. Budget constraints played a role to the extent that the CSD training manager did not have much time to help because of staffing shortages and increased workloads in that department resulting from budget cuts. The 1115 grant provided adequate funding to allow the DCS training manager time to learn the necessary software programs, but the lack of expertise delayed the completion and rollout of the training.

TRAINING CURRICULUM

The curriculum for the training was based in large part on the recommendations from the process study. In addition, two departments made specific requests to add information about coding for tribal members and dealing with domestic violence issues. Both of these requests were incorporated into the training.

The box to the right shows topics covered in the training module. The training consists of 49 slides with a narrated soundtrack. Three simple quizzes provide review during the training. The program also includes five attachments that provide more information. These include a detailed explanation of who is considered a non-custodial parent, how to complete the NCPS in ACES, SEMS Web Payment Codes, and two commonly used DSHS forms related to non-custodial parents. The attachments are hyper-linked web pages and documents that can be viewed during the training and also downloaded for future reference.

CSD E-Referral Training Outline

- Introduction
- Child support as a resource
- Who is the NCP?
- What is E-Referral?
- NCPS fields
- Coding the DEM1
- IV-D coop, family violence and good cause
- Critical fields for DCS
- Tribal coding on the NCPS
- Quality vs. Quantity
- Available Tools
- Communicating with DCS

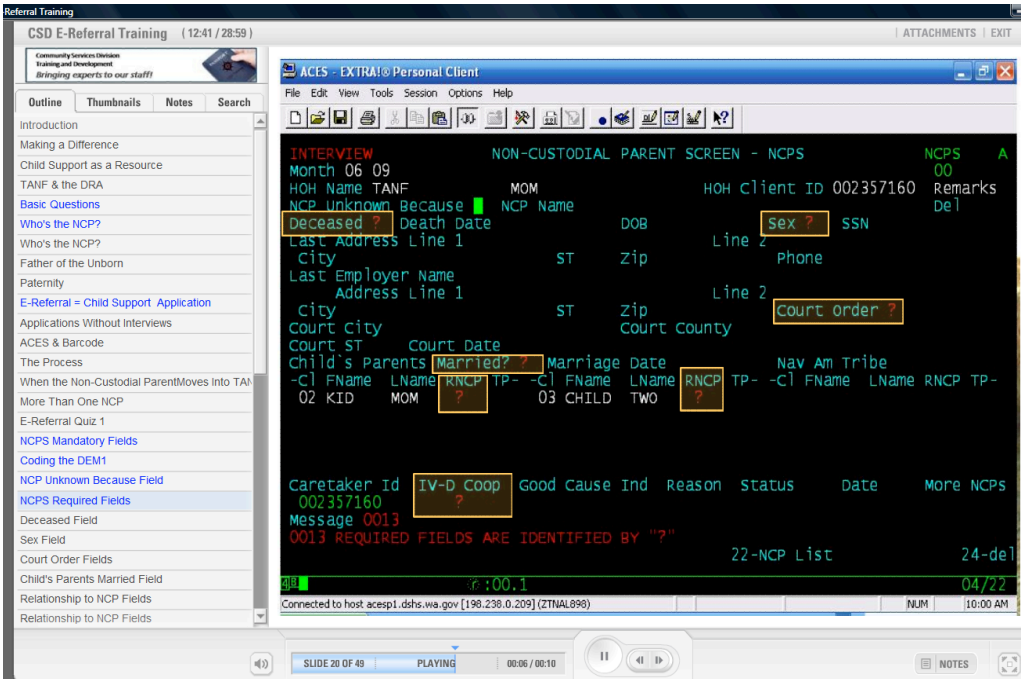
The training session covers a wide range of general information about how the ACES system is related to DCS and SEMS. Below, we demonstrate how the training addresses the specific recommendations from the process study and the two additional topic areas that were added upon request.

Objective #1: Identify the critical NCP fields

Below are two slides in the training module that address the fields on the NCPS that are critical for DCS to effectively process child support e-referrals. The first screen shot shows the required fields on the NCPS. These include whether or not the NCP is deceased, the sex of the NCP, whether or not there is a court order for child support, and whether or not the child's parents are married. The NCPS also includes required fields for the name of each child in the household and their relationship to the NCP. Common relationships and their ACES codes are: presumed father (FA); alleged father (AF); mother (M); and no relationship (NO). These codes are particularly important when, for example, there are several children in the household who have different fathers.

Finally, the "IV-D Coop" field asks whether or not the applicant has made a good cause claim for not referring the unknown NCP to the child support system. This field is critical to ensuring the safety of families in cases where domestic violence may be involved.

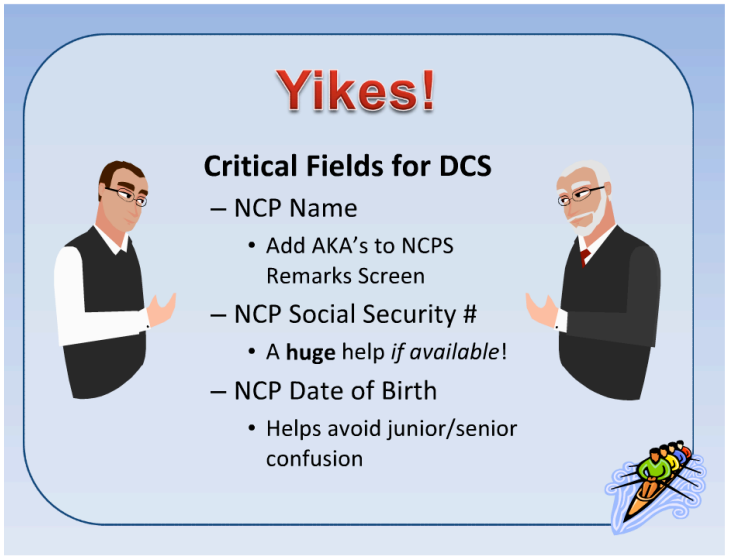
Required Fields on the NCPS



The narration describes the codes associated with each of these fields, and the importance of each field in the child support enforcement process. It also stresses the importance of including other relevant information gathered during the interview, such as partial information about the parents' marriage date or other names by which the NCP is known, in the "Remarks" field.

The slide below shows the fields that, while not required, are nevertheless of critical importance to DCS in correctly identifying and locating the correct non-custodial parent for each child in the household. The slide makes particular note of NCPs with alternate names (AKAs), which should be entered in the remarks screen.

NCPS Fields Identified by DCS as Critical but Not Required



Objective #2: Promote consistent use of ACES "notes" screens; and, Objective # 3: Emphasize that no information may be better than information known to be wrong

These two objectives are addressed throughout the training session when appropriate, and toward the end in the discussion about the quality of information. The narration states,

Documenting Notes and Ensuring Quality

"Please remember to document. If you have information that doesn't have its own field on the non-custodial parent screen but might be important, such as a partial marriage date or other names that the NCP uses, document that information on the NPCS remarks.

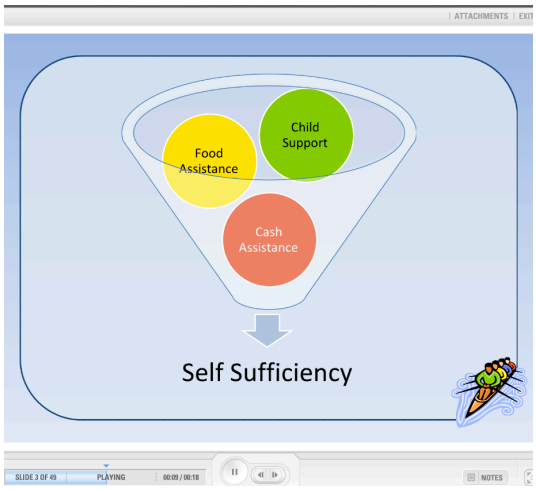
"And remember, quality is more important than quantity when it comes to e-referrals. At a minimum, wrong information on referrals can cause confusion, and delay support to families who need it. On the other end of the spectrum, the potential to endanger our clients if we move forward with the wrong information is too great to leave to chance. If you have doubts about the information that you are entering on the non-custodial parent screen, or NCPS, simply leave it off. The Division of Child Support would prefer receiving less information on the non-custodial parent screen that is correct than a NCPS that is full of information that could be incorrect."

Objective #4: Refresh CSD staff's understanding of the relationship between TANF and child support enforcement

Another issue identified in the process study was a general lack of understanding among CSD workers about how TANF relates to child support enforcement. The training explains that cash assistance from the TANF program is one of three types of financial support that helps families in need; the others are food assistance and child support. If a family is not receiving the child support to which they are entitled, the family may receive TANF in lieu of child support, but the non-custodial parent becomes liable for repaying

those child support payments to the state. This is why it is so important that CSD staff participate to the greatest extent possible in collecting information that helps to identify and locate the non-custodial parent.

Types of Family Assistance



The process study concluded that a better understanding of the nature and importance of this relationship will help CSD workers strive to collect the most complete and accurate information possible. Also, training on this subject should make it easier for CSD staff to answer questions from clients about how child support affects the amount of a TANF grant, and the implications of assigning child support rights and responsibilities to the state. In addition, if child support is presented to clients as a means of self-sufficiency, it may result in greater cooperation from previously hesitant applicants.

Objective #5: Improve communications to TANF applicants about non-cooperation sanctions

The process study identified a knowledge gap among clients who are sanctioned for non-cooperation with DCS. Typically, these clients claim to be unaware of the requirement to provide information about the non-custodial parent, and about the fact that being coded as non-cooperative results in a reduction of their TANF grant. Although CSD staff indicated that they always discuss this with new applicants, and clients receive several letters informing them of this responsibility before sanctions are initiated, the sanction process still appears to surprise many clients. The process study found that some of these situations might be avoided if the training session refreshed CSD staff's understanding of the sanction process, encouraged them to explain the process to new TANF applicants, check for understanding, and provide applicants with ample opportunity and incentive to provide the relevant details.

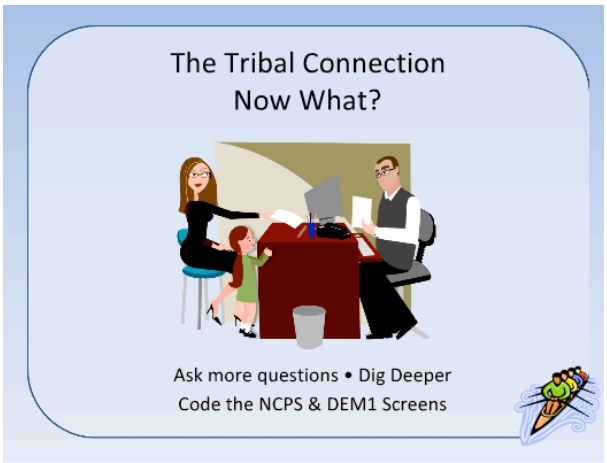
Checking with the Client for Understanding about Cooperation and Good Cause

The narration related to the "Unknown because" field, where the custodial parent might decline to provide information about non-custodial parent, states:

> *"If the custodial parent refuses to provide info about the non-custodial parent but does not claim good cause, this field should be coded with a "D".* ***Please remind the custodial parent of his or her responsibility to cooperate with the Division of Child Support and the consequences of refusing to cooperate. If the custodial parent still refuses to cooperate, coding this field with a "D" provides valuable information about how they might proceed with this custodian.*** *If you are processing a mail-in application or adding a child based on a change of circumstance form, remember to code this field with an "M" so the custodian will be notified of his or her right to claim good cause. If you code this field with a "U" for unknown, ACES will not require additional information on our unknown non-custodial parent, but will still ask you to provide information about this non-custodial parent's relationship to the children."*

Objective #6: Clarify tribal coding

As mentioned above, when the DCS Training Manager was developing the curriculum for the training program, DCS staff asked her to include a section about coding for tribal affiliation. Tribal coding apparently is not well understood by CSD staff, but it is critical to DCS because it determines the proper jurisdiction for the child support case.



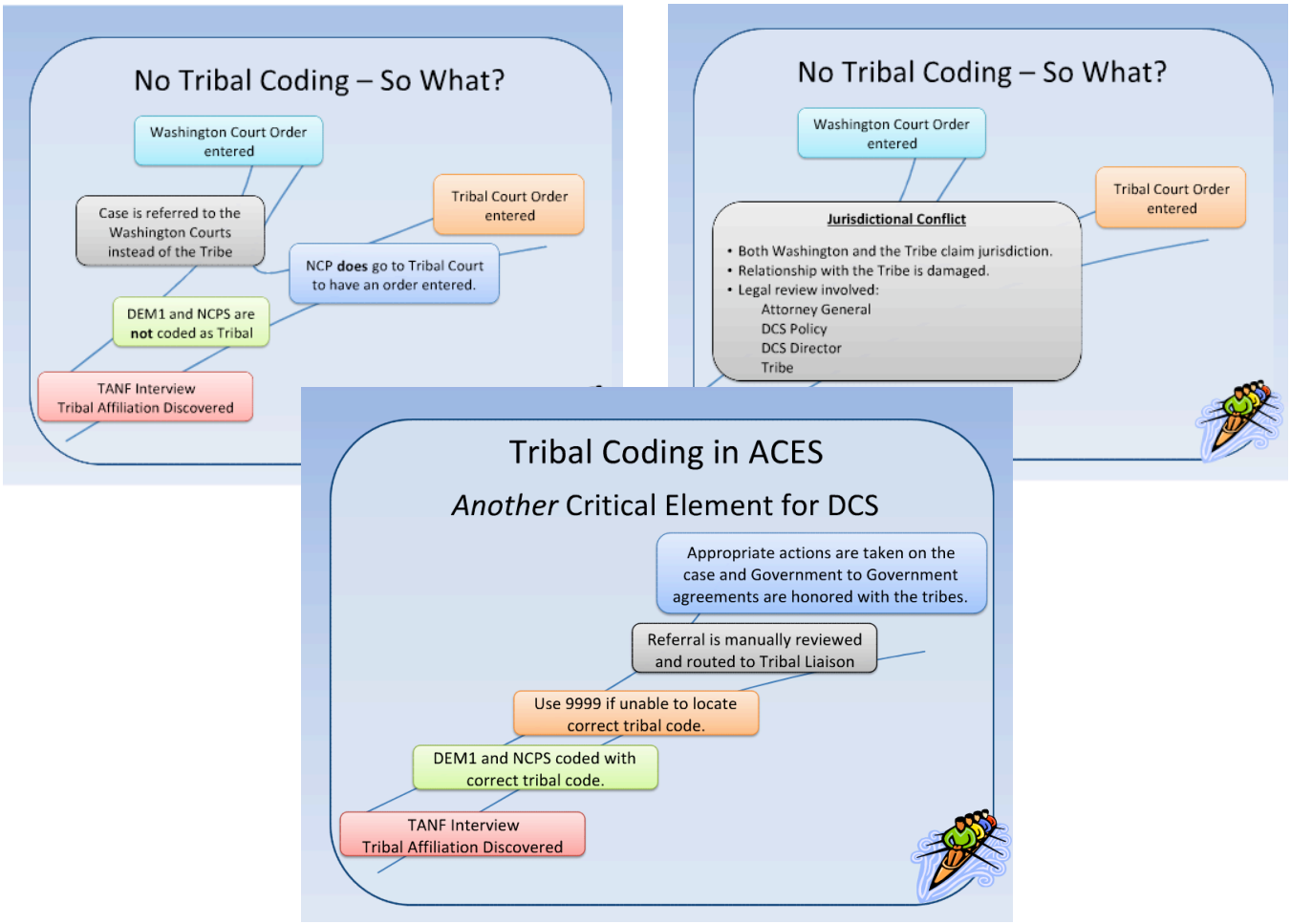
Based on the State of Washington's government-to-government agreements with tribes, some tribes are responsible for child support enforcement among their enrolled members.[4] Significant legal complications can arise when the state improperly pursues a child support case against a tribal member. E-referrals that involve a tribal affiliation are manually reviewed by DCS staff and referred to the appropriate Tribal Liaison.

The tribal code is most commonly left blank, indicating no known affiliation. However, if the intake interviewer knows of or has reason to believe there may be a tribal affiliation, DCS strongly urges CSD workers to choose the proper code from a drop down list associated with that field, or to

[4] Seven of the 29 federally recognized tribes in Washington State have IV-D programs. Several others, but not all, have either formal or informal child support enforcement agreements with DCS.

enter 9999 if they are unable to locate the correct code or do not know which tribe the NCP may be affiliated with. The training module explains both the proper procedures and coding for tribal affiliation, and also the potential consequences of improper coding, which can lead to jurisdictional conflict.

Training Screens for Tribal Coding in ACES




```
INTERVIEW              NON-CUSTODIAL PARENT SCREEN - NCPS              NCPS    A
Month 06 09                                                             00
HOH Name TANF          MOM                  HOH Client ID 002357160    Remarks
NCP unknown Because    NCP Name                                        Del
Deceased ?  Death Date              DOB            Sex ?   SSN
Last Address Line 1                          Line 2
 City                       ST     Zip              Phone
Last Employer Name
     Address Line 1                          Line 2
 City                       ST     Zip              Court Order ?
Court City                         Court County
Court ST      Court Date
Child`s Parents Married? ?  Marriage Date              Nav Am Tribe
-Cl FName  LName RNCP TP-  -Cl FName  LName RNCP TP-  -Cl FName  LName RNCP TP-
 02 KID    MOM    ?         03 CHILD  TWO    ?


Caretaker Id  IV-D Coop  Good Cause Ind  Reason  Status     Date     More NCPs
 002357160      ?
Message 0013
0013 REQUIRED FIELDS ARE IDENTIFIED BY "?"
                                                 22-NCP List            24-del
```

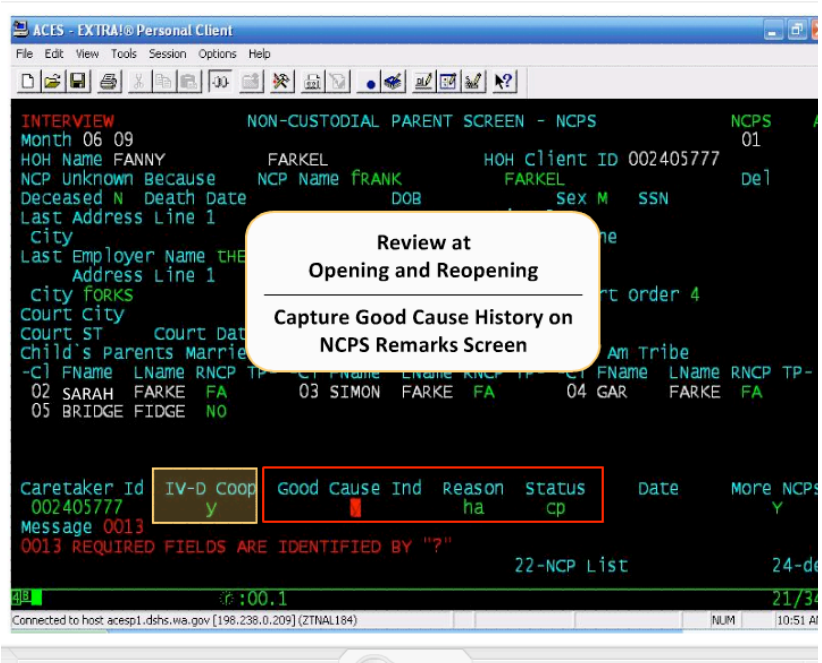
Objective #7: Review domestic violence issues in child support enforcement

Another topic that the DCS Training Manager was asked to address was domestic violence issues, and specifically how they relate to the good cause coding in ACES. In this section of the training, the narrator starts by saying, *"The next required section on the non-custodial parent screen is so important that we need to stop and refocus before proceeding. Completing the "IV-D Coop" field correctly could keep the family from harm."* The training goes on to explain the importance of the intake interviewer filling in the appropriate coding and checking for the applicants understanding of their right to claim good cause. If there is good cause, but this is not indicated in the "IV-D Coop" field, a letter will automatically be sent to the NCP. This may put the family at risk.

IV-D Coop and Good Cause

The training advises CSD workers,

"You will also be required to fill in the 'IV-D coop' field, since the custodial parent may claim good cause and not to refer this unknown non-custodial parent to the division of child support. Please do not code this field as unknown without reason. If the Support Enforcement Management System, or SEMS, does find a case with the same custodian and child, the case may be reopened and establishment or enforcement action started. This could be a problem if there is a family violence issue."



TRAINING ROLL-OUT AT PILOT SITES

When the draft for the training module was complete, DCS sent the draft to CSD policy and field staff for review. These staff members reviewed and approved the training, and it was then sent out to the managers at the pilot CSOs on June 15 to begin the first round of training.

While the DCS training manager felt that she had a sufficient number and diversity of reviewers, this turned out not to be the case. CSD managers at the pilot sites had several specific complaints that caused DCS to remove the training from the website and revise it. The main concerns included:

- The original soundtrack for the training fluctuated widely during the session, and at some points was inaudible on CSD computers. The training manager rerecorded the soundtrack, which solved the problem.
- CSD managers indicated that most of their computers do not have adequate speakers to allow them to listen to the soundtrack, so DCS used grant funds to buy 600 pairs of ear buds for CSD staff to further alleviate any sound issues that may surface with this or any other online training.
- Managers were concerned about the appropriateness of some of the fictional names used in the program, and with some of the graphics. These names and graphics were changed in response.
- Two managers felt that nine attachments were excessive, and that if all attachments were opened and viewed during the training, the length of the training would double.
- Some felt the training had a condescending tone toward CSD workers, and that it focused on the benefits to DCS of collecting more complete information without emphasizing the need for teamwork between the two departments.

The training manager changed the training to address nearly all of these issues. The revised training was supposed to be uploaded to the server on July 13th, and targeted employees were given 30 days in which to complete it. According to the CSD training and development manager, about 10 percent of employees usually take the training by the deadline, and another 80 percent take it within a few days after the deadline. Generally, CSD's goal is to have 90 percent of employees complete the required training within 60 days.

TRAINING EVALUATION

At this point in the evaluation implementation, only 134 CSD staff members had taken the training (including 132 in phase 1 and two in phase 2). While we have no empirical data at this time about the effectiveness of the training module in achieving the demonstrations outcome goals, we do have a small set of responses to an online survey of participants and comments from two focus groups attended by CSD staff that completed the training.

SURVEY RESULTS FOR TRAINING PARTICIPANTS

On October 19, the CSD Training and Development office sent a request asking the training participants from the four pilot sites to take an online survey about their experience. To date, 22 training recipients have responded to the on-line survey out of 132 total recipients, for a response rate of 17 percent. Although this is a relatively small response rate, CSD staff reported greatly increased workloads at CSD during this period, so project staff decided not to push for a greater response.

Questions one through eight ask respondents to what degree they agree with the statement. Question nine is open ended, and about half the respondents provided comments. A wide majority of respondents were positive about the training. The survey questions and responses are presented below.

Table 10: Survey Results for the Training Module Implemented at Pilot CSOs (number of respondents: 22 out of 132)

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. This training was useful in improving my knowledge on how to complete the NCPS screen.	36%	45%	14%	0%	5%
2. I think this (or a similar training module) would be useful for RECENTLY HIRED staff.	68%	27%	0%	5%	0%
3. I believe reviewing this training periodically (e.g., once every 2 or 3 years) would help me to continue to accurately complete the NCPS screen.	41%	36%	23%	0%	0%
4. I think this training will ultimately benefit TANF clients.	41%	11%	9%	0%	0%
5. This training gave me a better understanding about the relationship between TANF and Child Support.	41%	41%	14%	5%	0%
6. This training gave me a better understanding about the importance of NCP data related to Child Support.	50%	45%	5%	0%	0%
7. This training gave me a better understanding about the role of the e-referral process.	41%	45%	9%	5%	0%
8. This training gave me a better understanding about the NCP data of most value to child support.	50%	36%	14%	0%	0%

9. How will you apply what you learned about the e-referral process and NCP data to your work? Other comments?

- I will try to gather what I can. But on medical only application there is no interview. In my office these days, we are so busy trying to get help to needy people, I don't know where we are going to find time to do all this work for DCS too.
- Maybe DCS needs to go back to doing their own intake so they get the info they need, how they want it and we can focus on providing the benefits our customers are applying for. It would also help customers understand the DCS Cooperation requirements.
- Hopefully I will complete the NCP correctly. I think the refresher should be done yearly.
- This training or something similar needs to be given to all EW FSSs.
- I have been in Financial for over 12 years and never really understood the reason for some of the questions on the NCP screen but, with this training I now have an understanding on why we need to really focus our attention to the NCP screen and also help me to ask the correct questions to update/complete the NCP screen correctly.
- Thank you, the training was outstanding :)
- I now know what information DCS is looking for, and why we need to be careful about updating the NCPS screen. It was explained very well in your presentation.
- I will be able to help staff understand how this information assists DCS and customers.
- The training appears to be weighted as to what can financial workers do for DCS. There is no buy-in for financial staff to do the best job possible in completing the NCPS screens. Until there is some sort of reward/incentive to entice financial staff to do a better job in completing the NCPS screens, no amount of training will ever accomplish the goal of making the NCPS screen and e-referral process become a more valuable tool for DCS workers.
- The one thing I found most valuable was the Native American part.
- I have worked as a Financial worker for 25+ years and I learned from this training.

INTERVIEWS WITH DCS AND CSD STAFF

ECONorthwest conducted interviews with both the DCS and CSD staff members who developed the training, and a small group of training recipients at Pierce North CSO, which was one of the pilot sites for the training implementation. Both groups had useful insights to share about their experiences with the demonstration project.

TRAINING DEVELOPMENT STAFF

Our interviews with the training developers for the online training module included the DCS Training Program Manager, Lorna Linden, who primary responsibility for developing the training; the grant manager, Sarah Kollin; and the CSD Training and Development Manager, Bill Callahan, who advised DCS on the training development, helped implement the training in the CSOs, and administered the survey.

About the development process, Ms. Linden said that it was a "bumpy ride." The DOH automation component of the grant was supposed to happen first, and waiting for that implementation caused a delay in the training project. Finally, DCS decided to go ahead with the training development without waiting for the data-matching component.

During the training development period, DCS staff made specific requests for two topics to be added to the training that were not included in the original recommendations from the process study: tribal issues and domestic violence issues. The tribal piece is important because every tribe has a separate agreement with the State of Washington regarding child support enforcement. According to project staff, the complexity of and lack of awareness about tribal coding tends to shut down normal processes. These additions added time to the training development process.

The DCS training manager said that, as a result of this project, she has learned a lot about the technical and organizational side of creating an online training. For example, she thought she had a large and diverse enough group of reviewers for the initial draft of the training, but as it turned out she needed more. This likely would have avoided some of the negative responses that came from the first phase of the training rollout, which caused additional implementation delays while the training was revised.

The training manager also recommended a DCS liaison visit each CSO after staff have completed the training in order to build the relationship between the two divisions, reinforce the content of the training, and meet the needs of workers with different learning styles. She suggested a 45-minute session for feedback and questions and answers about the training, or more general questions about the relationship between DCS and CSD.

While project staff members acknowledge that there has been some tension between the CSD and DCS divisions in the past, the divisions have worked together on this project. Part of the purpose of the training is for DCS

to raise awareness among CSD staff of the longer-term benefits of improved child support enforcement as part of the whole CSD process, and to highlight the importance of key information to collecting child support. Ms. Linden thinks the partnership is better between CSD and DCS because of their collaboration on this project.

So far the level of progress on the grant project has been less than what the project team had hoped. The team acknowledged that additional training requirements in general are more challenging to fulfill right now. Due to the budget crisis, CSD has had to reduce its staff, and average staff caseloads have risen sharply. While training is important, CSD staff pointed out that clients' immediate needs must come before training.

Especially in light of severe time constraints, the project team agreed that e-training is an excellent model, and for their purposes, better than a classroom setting. Online training is more flexible for scheduling and people can take the courses multiple times to refresh their knowledge.

FOCUS GROUP RESULTS

ECONorthwest held two focus groups with four CSD staff members who had recently taken the online training. These staff members shared their feedback about the training, which was generally positive.

- All interviewees found the training to be user friendly and informative. One said the tribal section was particularly informative, but the rest of it s/he already knew, and that she already tries to gather as much info as possible on NCPS.

- All agreed that the training is ideal for someone who is just starting. They have quite a few trainees now. One person said that it is easy to pick up bad habits when you are starting out, so this training will help new workers develop good habits for collecting NCPS information. One person said s/he doesn't remember getting much training on NCPS when ACES first came in, so it was good to get more details.

- All felt that this training is a good refresher, at least for some people, because no one can keep track of all the changes in the system over time. One person noted that people respond to training based on their level of investment in it; if a person is resistant to the training, they aren't likely to get much out of it.

- All commented particularly on the tribal information, saying that they didn't know any of it before. One person said some clients think that if they don't get money from the tribe, then their tribal affiliation doesn't matter. All interviewees said they didn't know there was a child support liaison for tribes.

- The group agreed that the ultimate benefit of this training would be that if it caused them to collect more information that DCS could use to collect support payments, the families and the state would benefit. However, they also agreed that if they do ask more questions and the client refuses to answer them, then they are more likely to end up with a "non-coop," and that can hurt the client.

The focus group members were asked about how the training changed their understanding about the following specific topics:

- **The relationship between TANF and child support.** Most said they still had some confusion about the good cause process, but noted that it is probably a procedural problem, perhaps due to inconsistency between offices. Some offices have one social worker dedicated to investigating good cause claims, and others have all their social workers do it. One person in the group said that s/he determines good cause and enters it in the system, but others stressed that this is the responsibility of the social worker.

- **The importance of NCP data to child support.** One person said the training helped reinforce the importance of NCP data and provided some useful tips on coding. This person said the training would be a useful reference in the future. Another person said s/he is hoping that workers will realize the importance of the NCPS screen and pay more attention to it. S/he thinks some workers don't care because it doesn't directly help their work—they assume DCS will get the information they need from the custodial parent.

- **The role of the e-referral process.** Several group members agreed that there is confusion about the best way to communicate with DCS, and that the training specifically addressed that issue. One person added that s/he had never used the "quick cash" screen before, but after the training s/he found that it works better than the social security cross-match in SEMS, allowing CSD staff to find out which non-custodial parents are paying child support and who the DCS contact person is for each case.

- **The NCP data of most value to child support.** Everyone in the group said they felt they understood this subject better. One person said, "Last employer, year of birth, last known address—anything is useful to locate NCP." Another person specifically remembered the "quality over quantity" slide and discussion.

Focus group members were asked how they will apply what they learned about the e-referral process and NCP data to their work, and if they had any other comments to share. Several people commented that they understand better how to communicate with DCS. One person especially liked references to ACES, saying that the screen shots are helpful, especially for new people.

One person said s/he doesn't think the NCPS screen is a good change. Previously, the parent had to fill out and sign a form with this information, so the client was responsible for the information they reported. The client couldn't claim later that they didn't report that information.

LESSONS LEARNED FROM THE TRAINING DEVELOPMENT PROCESS

Training development staff at both DCS and CSD met with some obstacles and frustrations, as well as successes, while developing this online training module. What they have learned from this process may prove useful for others undertaking similar projects.

- **Experience and expertise are important resources.** As the DCS training manager told us, the development process could have been more efficient if she'd had more experience with online training development or had greater access to expertise. As mentioned earlier, the expert at DCS left early in the project, and the training and development manager at CSD was too busy to provide much support, so the DCS training developer spent a significant amount of time learning the necessary software and techniques for developing this type of training. While she can now apply that knowledge to future projects, it increased the amount of resources used for this project.

- **Training time for CSD staff is a critical constraint.** This grant paid for the time necessary to develop the training module, but it did not fund additional staff time for training in the CSOs. The demand on CSD staff time came during a period of reduced staffing levels and increased workloads, reducing the time available to serve clients and meet immediate needs. The implementation may have proceeded more smoothly, with less stress on CSD staff, if the grant had included funding for training time in the CSOs.

- **In order to be most effective, the training must be mandatory.** When CSD made the first attempt to implement Phase 2 in November it was not mandatory, and only two staff members took the training by the end of December. By contrast, Phase 1 was mandatory and reached a completion rate of 96 percent within two months.

- **The collaboration between CSD and DCS staff was critical to developing a useful and credible training module.** The process study that occurred early in this project gathered feedback from both CSD and DCS field staff, and began a dialog that helped frame the project as mutually beneficial. It may also give the training more credibility among CSD field staff, because it directly addressed a variety of the concerns they expressed. Another example of the importance of dialog between the two departments occurred when managers in the pilot CSOs expressed serious concerns about some of the content in the original training, and the DCS responded quickly by revising the training to address these concerns.

- **DCS and CSD can improve their communication in areas beyond those targeted by this grant.** As mentioned earlier, DCS was asked to include a section in the training about coding for tribal affiliation. As a result, the training explains in some detail the potential consequences of incorrect coding, some of which are political and legal, and explains the procedures for proper coding. All of the focus group members expressed surprise about this information, and indicated that they had little or no knowledge about tribal issues. This knowledge gap may indicate a broader need for communication and cooperation between DCS and CSD on a variety of policy and procedural issues that can affect both departments.

GOING FORWARD

Although the training implementation schedule has been significantly delayed, DCS and CSD staff recently agreed on a new schedule for implementing Phases 2 and 3 in the spring of 2010. Under this revised plan, in Phase 2 staff in regions 1, 2, 3 and 5 will be required to take the training between March 1 and April 30, 2010. Phase 3 will follow immediately, with staff in regions 4 and 6 required to take the training between May 1 and June 30, 2010. Following the completion of each phase, participants will be asked to complete the evaluation survey.

The evaluation of the training intervention will continue according to the original design as the implementation schedule allows. ECONorthwest will compile survey results as they become available, and will collect and analyze data regarding the outcome measures to the extent that the grant and implementation schedules allow.