Program Manuals for Child Welfare Interventions

An Overview of the Development Process

A program manual provides detailed instructions for implementing a program or practice in a particular organizational setting, and in the case of child welfare services, with a specific population of children, caregivers, or families. Use of a manual helps ensure a program is implemented with fidelity—or as intended—to produce desired outcomes. Program manuals are a valuable resource to direct service staff, supervisors, contracted providers, and other child welfare professionals who are implementing a new intervention or adopting an existing one, particularly in the following situations.

Preparing a program for long-term sustainability. An organization that has designed, piloted, and successfully implemented a program may be ready to sustain it as part of the organization's long-term operations. A manual is essential to ensuring that the program continues to be implemented as intended by new employees or contracted service providers.

Preparing a program for expansion or adaptation in new practice or organizational settings. An organization may be planning to implement an existing program differently—for example, with a new target population or in a new cultural setting, in a new geographic area, or with an expanded array of service providers. The COVID-19 pandemic has led to additional changes to facilitate virtual implementation. A manual will help ensure that the intervention is implemented appropriately for the new setting while maintaining fidelity to the original design, activities, and protocols.

Meeting the funding eligibility requirements of the Family First Prevention Services Act (FFPSA) of 2018. The FFPSA authorized new optional title IV-E funding for time-limited (one year) prevention services for mental health/substance abuse, in-home parenting

Purpose of This Brief

- This brief provides an overview of the recommended process for developing, piloting, and deploying a manual for a child welfare program or practice.

- It does not recommend specific content, designs, or formats for manuals.

Target Audience

- Children's Bureau discretionary grantees and other child welfare organizations that have implemented a new intervention or are planning to do so

programs, and kinship navigator programs. Programs that are eligible for title IV-E funding must be rated as promising, supported, or well supported based on criteria established by the Title IV-E Prevention Services Clearinghouse[1] created under the FFPSA and as described in the Clearinghouse's *Handbook of Standards and Procedures.*[2] The Handbook specifies that to be eligible for review, rating, and inclusion in the Clearinghouse, programs and services "must have available written protocols, manuals, or other documentation that describes how to implement or administer the practice…[they] must be available to the public to download, request, or purchase" (p. 5). Along with meeting other criteria, the development of a program manual prepares an intervention for review by the Clearinghouse and potential eligibility for title IV-E funding under the FFPSA.

Steps in the Manual Development Process

This section provides an overview of recommended steps in the manual development process, including process mapping, creating a workplan, collecting information to guide manual development, drafting and piloting the manual, and deploying it for program or agency-wide use.
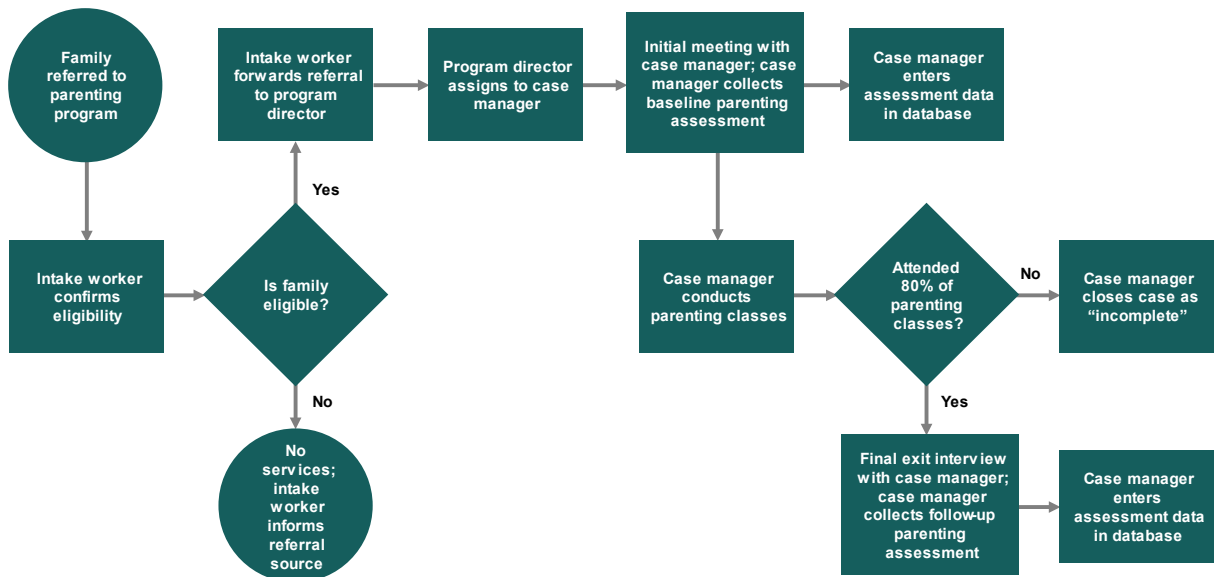
1. Process Mapping

A process map outlines the individual steps through which a program is implemented; it depicts the flow of activity throughout the intervention, often in the form of a visual diagram. Process mapping helps service providers, managers, and other program partners articulate the key elements of an intervention. It involves determining how, when, and in what order each element will be implemented and by whom. Process mapping can also identify gaps in information regarding key elements and/or the implementation process. A sample basic process map is shown in exhibit 1.

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[1] See https://www.acf.hhs.gov/sites/default/files/documents/cb/pi1809.pdf for more information on State Requirements for Electing Title IV-E Prevention and Family Services and Programs (ACYF-CB-PI-18-09).
[2] Wilson, S. J., Price, C. S., Kerns, S. E. U., Dastrup, S. D., & Brown, S. R. (2019). *Title IV-E Prevention Services Clearinghouse handbook of standards and procedures*, Version 1.0, OPRE Report # 2019-56. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Exhibit 1. Sample Process Map for a Parenting Program

Steps in Process Mapping

The first step in effective process mapping is to identify and engage partners who should participate. This effort should be led or cofacilitated by the developers of the intervention and should include agencies and providers that refer participants to your program, other agencies and providers with whom participants have ongoing contact (i.e., concurrent services), and current or past service recipients or others from the program's target population.

The next step is to convene the partners to—

- Map out the flow of activity and information during implementation of the program.

- Determine the core components or essential functions of the program that must be implemented as designed to achieve positive outcomes, while also identifying elements in which there is flexibility to deviate from the original design without compromising program fidelity.

- Identify key decision points during the implementation process (e.g., determining program eligibility and service completion).

- Determine what data are to be collected as part of the implementation process (e.g., demographic, clinical, and other case-related information) as well as data collection methods (e.g., screening and assessment instruments, intake forms). Also consider who will collect the data, when it will be collected, where it will be stored (e.g., in an administrative database), with whom it will be shared, and how it will be used.

While developing the process map, it may also be helpful to consult other planning and background materials that have already been developed for the program (e.g., theories of change, logic models, implementation plans).[3]

2. Create a Workplan

Once the partners have completed process mapping and have a clear understanding of the program's key elements and how it is implemented, a detailed workplan will help guide the development of the manual's content and its eventual deployment with intended users. Suggested elements of the workplan include—

- Key work tasks/activities in the manual development process

- Activity/task assignments

- Timelines for completion of key tasks

- Designated check-ins with manual authors and other partners to assess progress and make adjustments as needed.

Exhibit 2 shows an example of a simple manual development workplan.

Know Your Audience

As you develop the process map, consider the target audience or end users of the manual. Is the manual primarily intended for—

- Direct service staff who will provide the intervention or engage in the practice with service recipients?

- Supervisors or managers who will oversee and provide feedback and coaching to direct service staff?

- Outside service providers or organizations that may be interested in implementing or adapting the intervention or practice?

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[3] See the Related Resources at the end of this brief for more information on theories of change and logic models.

Exhibit 2. Sample Manual Development Workplan

Activity	Person(s) responsible	Start date	End date	Status	Notes
Identify and contact key informants to provide input on the manual's content	Mary K. and John P.	6/1/2023	6/15/2023	Complete	
Develop discussion guides	Crystal A.	6/10/2023	6/20/2023		
Schedule and conduct interviews with key informants	John P.	6/21/2023	7/15/2023		
Present findings from interviews to manual development team	John P. and Crystal A.	8/1/2023			
Draft manual content	John P. and Mary K.	8/2/2023	9/1/2023		
Pilot manual	Crystal A. and John P.	9/5/2023	11/1/2023		
Revise manual based on findings from pilot	John P. and Mary K.	11/2/2023	11/30/2023		
Deploy manual	Crystal A.	12/1/2023	12/31/2023		
Communicate progress to manual development team	Mary K.	Ongoing in weekly team meeting			

3. Collect Information to Guide Manual Development

Collecting input from informants will help ensure the manual is clear, comprehensive, relevant, and useful. Individuals who can provide valuable input on the content and format of the manual include direct service providers, service partners/contractors, service recipients, and program supervisors/managers. Once informants are identified and engaged, determine the most useful and feasible methods to collect input from each informant group, such as individual or group interviews, focus groups, or surveys. Topics to address with key informants include the following:

- Critical content
  - What information must the manual contain for service providers to understand the program and know how to implement it?

- What information will help service providers explain the program to service recipients?

- Anticipated challenges in engaging service recipients

    o What strategies can help service providers contact, engage, and interest eligible persons in the program?

- Elements of the program that service providers may need flexibility implementing without compromising overall fidelity to the program model

- Design and format

    o What designs and formats make it easiest to understand, navigate, and apply the manual? (Consider developing and sharing different design templates with respondents.)

While information collection to guide development of the manual may be more informal and less structured than with a formal research or evaluation project, protocols and procedures should still be established and followed to protect the privacy of key informants and maintain the confidentiality of any sensitive information (e.g., only sharing information with the manual development team, storing information in secure facilities or password-protected databases).

4. Draft and Pilot the Manual

Once input from key informants has been collected, synthesized, and reviewed, it can be used to complete an initial draft of the manual. A process map (see above) may also be used to create a manual outline. The manual's content and format will vary depending on the intervention, but common elements include the following:

- The program's key goals and objectives

- Essential/core elements of the program

- Explicit instructions and guidelines for implementing the program

- Anticipated implementation challenges and strategies for addressing them

- Guidelines and parameters for maintaining fidelity to the program as well as for any allowable flexibility in implementation

- Resources and contacts for seeking assistance with implementation (e.g., help desk or program "champion," frequently asked questions [FAQs])

A sample outline for a fictional program manual is shown in exhibit 3. Links to examples of child welfare program manuals are included in the Related Resources section at the end of this brief.

Exhibit 3. Sample Program Manual Outline

1. Introduction
   a. Overview of the manual
2. Background
   a. Need for and goals of program
   b. Overview of program
      i. Theory of change
      ii. Eligibility criteria/target population
      iii. Summary of program services
      iv. Implementation settings (e.g., in-home, office, virtual) and modalities (i.e., individual or group administration)
3. Core components of program
   a. Recruitment of clients
   b. Screening and intake processes
   c. Program services
      i. Activities/tasks completed by the service provider
      ii. Activities/tasks completed by the program director
      iii. Frequency, duration and intensity of services
      iv. Assessment tools
      v. Aftercare/follow-up
4. Staffing descriptions, duties, and responsibilities
   a. Program director
   b. Program service provider
5. Fidelity monitoring
   a. Fidelity assessment tools and methods
6. Data collection and management protocols
   a. Program database
   b. Data entry
   c. Data sharing agreements
   d. Protection of sensitive and/or confidential information
   e. Program evaluation, continuous quality improvement, and performance management
7. Provider training and coaching
8. Resources and contacts for implementation support

Once drafted, the manual is ready to be piloted, ideally in an actual practice setting with direct service providers and current program participants.[4] The pilot can usually be completed with a subset or sample of providers and participants. To reduce time burden, different providers may pilot different sections of the manual. The pilot phase may also provide an opportunity to test versions of the manual developed using different designs or formats. The pilot process typically involves the following steps:

- Collect feedback from direct service staff or other volunteers who are piloting the manual. Feedback may be collected through follow-up interviews, focus groups, surveys, or more informal discussions/check-ins. (See sidebar for the types of feedback to collect.)

- Review and synthesize feedback gathered across service staff.

- Revise the draft manual based on feedback collected during the pilot.

- Consider a second pilot (completed by a different group of direct service providers) if significant questions or concerns remain regarding the manual's content or format.

- If unanticipated implementation challenges arise during the pilot, adaptation of the intervention may be necessary.[5]

- Ask other key partners (e.g., agency managers, service partners, clinical experts/researchers, program participants) to review and provide feedback on the draft manual before it is finalized.

- Develop a final version of the manual, bearing in mind that updates will likely be required over time. Consider creating a process for determining how and how often the manual will be updated.

Pilot Questions

✓ What worked and did not work in the draft manual in terms of content, format, and design?

✓ What information is missing or needs to be expanded or clarified?

✓ What information is redundant, irrelevant, or otherwise not useful?

✓ What type of training would be most effective and most practical to conduct for users of the manual (e.g., in-person, online)?

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[4] Alternatively, the pilot could involve role playing in which volunteers play the roles of service providers and recipients. This approach may be appropriate if development and piloting of a program manual occurs in tandem with the design and piloting of a new intervention.
[5] For additional information about making program adaptations, see: Capacity Building Center for States. (2018). *Change and implementation in practice: Intervention selection and design/adaptation*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

5. Deploy the Manual

Once the pilot phase is completed and assuming no major implementation challenges or issues with the manual's content or format were identified, it should be ready for program-wide or agency-wide use. Feedback obtained during the pilot may inform the deployment process and strategies, including—

- The best method for disseminating the manual, e.g., a traditional printed manual or an online/interactive version. A decision regarding the manual's format may also depend on organizational resources and the time available for deployment.

- A process for manual users to ask questions, request assistance, and provide feedback. For example, an individual may be designated to respond to questions, provide technical assistance, and compile feedback. Other tools for assisting users and collecting feedback include an FAQs document or landing page on your organization's website, and online questionnaires or feedback forms to obtain ongoing input and suggestions for improvement.

Training

Information gathered during the pilot phase may help inform whether a training program is needed to enhance understanding and use of the manual. Feedback from the pilot may also inform the selection of the most effective training modality (e.g., in-person or online), along with other variables such as cost, technology requirements, and time requirements. While developing and implementing a training program is beyond the scope of this brief, the Related Resources section includes several helpful items.

Conclusion

This brief provides an overview of the recommended process for developing a manual for a child welfare program or practice. Steps include process mapping, creating a workplan, collecting information to guide the manual's development, drafting and piloting the manual, and deploying it for program or agency-wide use. The manual development process can be tailored to meet specific program needs and the contexts in which Children's Bureau discretionary grantees and other child welfare organizations operate. See the Related Resources section below for additional information and tools to facilitate the creation of a program manual.

Related Resources

Refer to the resources in this section to assist you in the design, testing, and deployment of a manual for your program.

Title IV-E Prevention Services Clearinghouse

- Website: Title IV-E Prevention Services Clearinghouse

- Wilson, S. J., Price, C. S., Kerns, S. E. U., Dastrup, S. D., & Brown, S. R. (2019). *Title IV-E Prevention Services Clearinghouse handbook of standards and procedures*, Version 1.0, OPRE Report # 2019-56. Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. https://preventionservices.acf.hhs.gov/themes/ffc_theme/pdf/psc_handbook_v1_final_508_compliant.pdf

Process Mapping

- National Institutes of Health, Office of Research Services. (2016). *Introduction to process mapping*. https://ors.od.nih.gov/OD/OQM/Pages/Process-Mapping.aspx

- UNC School of Medicine, Institute for Health Care Quality Improvement. (n.d.). *Process mapping.* https://www.med.unc.edu/ihqi/resources/process-mapping/

Training Programs

- Child Welfare Information Gateway. (2019). *Virtual reality–The next step of caseworker training.* https://www.childwelfare.gov/more-tools-resources/podcast/episode-43/

- Capacity Building Center for States. (2018). *Child Welfare Virtual Expo 2018: Simulation innovations: It's not just role play anymore.* https://www.youtube.com/watch?v=XK7HwJt00vs

- Child Welfare Information Gateway. (2018). *Prevention: Connections matter.* https://www.childwelfare.gov/more-tools-resources/podcast/episode-22/

- University of Minnesota, Human Resource Management. (n.d.) *Designing a training program.* https://open.lib.umn.edu/humanresourcemanagement/chapter/8-4-designing-a-training-program/

Program Design and Adaptation

- Capacity Building Center for States. (2018). *Change and implementation in practice: Intervention selection and design/adaptation*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. https://capacity.childwelfare.gov/sites/default/files/media_pdf/ci-briefs-f-cp-00021.pdf

- Blase, K., & Fixsen, D. (2013). *Core intervention components: Identifying and operationalizing what makes programs work* [ASPE research brief]. Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.

https://aspe.hhs.gov/report/core-intervention-components-identifying-and-operationalizing-what-makes-programs-work

- Framework Workgroup. (2014). *A framework to design, test, spread, and sustain effective practice in child welfare.* Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/cb/training-technical-assistance/framework-design-test-spread-and-sustain-effective-practice-0

Theories of Change and Logic Models

- James Bell Associates. (2018). *Formative evaluation toolkit: A step-by-step guide and resources for evaluating program implementation and early outcomes*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.acf.hhs.gov/cb/training-technical-assistance/formative-evaluation-toolkit

- Ingoldsby, E., Morrison, C., Ruben, J., Melz, H., & Cairone, K. (2020). *Using logic models grounded in theory of change to support trauma-informed initiatives.* Submitted to the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. https://aspe.hhs.gov/sites/default/files/private/pdf/262051/trauma-informed-logic-models.pdf

- Resources on theories of change available through the Child Welfare Capacity Building Collaborative: https://capacity.childwelfare.gov/states/topics/cqi/change-implementation/theory-of-change

Implementation Fidelity

- James Bell Associates (2009). *Measuring implementation fidelity*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. https://www.jbassoc.com/resource/measuring-implementation-fidelity-2/

Examples of Child Welfare Program/Practice Manuals

- Schmidt, M. C., & Treinen, J. (2017). *Program implementation manual for Arizona Kinship Support Services: Kinship Navigator Program*. https://www.arizonaschildren.org/wp-content/uploads/2022/11/KinshipProgramImplementationManual.pdf

- Washoe County Department of Social Services (2016). *Family search and engagement program manual*. https://www.acf.hhs.gov/sites/default/files/documents/cb/pii_fse_program_manual.pdf

- University of Kansas School of Social Welfare, Kansas Department of Children and Families, KVC Kansas, & Saint Francis Community Services. (2016). *Kansas Intensive Permanency Project (KIPP) program manual* https://www.acf.hhs.gov/cb/report/kansas-intensive-permanency-project-kipp-program-manual

- Minnesota Department of Human Services. (2022). *Child welfare targeted case management.* https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_008999#case

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