

Findings of the Evaluation of the QIC-Childrep Best Practices Model Training for Attorneys¹

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Abstract

Our research shows that the QIC attorneys in both Washington State and Georgia applied the Six Core Skills:

- They *changed the way they represented children* and were significantly more likely to engage in behaviors considered best practice.
- These best practice *behaviors resulted in measurable improvement* in case outcomes for children.
- The model resulted in *greater contact with the child* and increased communications with the other players.
- The QIC lawyers in both states were also *more actively involved in conflict resolution and negotiation* activities and showed a commitment to moving the case forward.
- Children represented by the trained QIC attorneys tended to *exit care sooner* than the controls.

1. Excerpted from the Chapin Hall Evaluation Report: Orlebeke, B., Zhou, X., Skyles, A., & Zinn, A. (2016) *Evaluation of the QIC-ChildRep Training and Coaching Intervention for Child Representatives*. Chicago, IL: Chapin Hall at the University of Chicago. For the unabridged Chapin Hall QIC Evaluation report, go to the Chapin Hall website at: www.chapinhall.org.

- Children represented by QIC attorneys in Washington State were 40% more likely to experience permanency within six months of placement than children represented by control attorneys.

10.1 Introduction

Chapters 5 and 6 describe the Best Practice Model and the specific manifestation of the model that took place in Georgia and Washington State. This chapter presents the experimental evidence addressing the impact of those efforts to improve attorney practice. It addresses two primary questions: Did treatment attorneys change the way they handled their dependency cases, compared to attorneys who continued to practice as usual? Did children served by treatment attorneys experience different outcomes than children served by control attorneys?

The questions about attorney behavior were examined using responses to child-specific attorney surveys. Questions about outcomes were examined with links to state administrative data systems. The evaluation had sufficient statistical power to detect moderate effects. Chapter 7 provides the methodological basis for the research findings, and Section 7.4 briefly explains the randomized-controlled design, power analysis and analytic methods. The unabridged Chapin Hall evaluation report presents the full methods explanation.

With respect to child outcomes, the evaluation does not address the question of whether representation by an attorney (versus a lay *guardian ad litem* only) is associated with a different distribution of outcomes. All children in the evaluation were represented by an attorney.

The scope of the evaluation of the QIC intervention—37 local judicial districts, 263 attorneys and 4,274 children—was both its strength and its weakness. This large sample, with randomization of attorneys within jurisdiction to account for jurisdiction-level influences, provided a more rigorous test of impact. For impact to show through, the intervention had to generate a detectable difference in many places. But the scope limited the data that could be collected and analyzed. In order to answer the question posed (would the pilots in Georgia and Washington State yield a general, detectable difference), data had to be collected from a large number of attorneys about a large number of cases.

These data were limited to those which could be asked on a survey and those in administrative data. So for example, the evaluation does not speak to comparisons of children's perception of representation or to differences in specific services received by children or their caregivers.

With respect to child outcomes, only experiences that applied to most children (the timing of exit from care, placement type, and placement stability) could be rigorously analyzed. Experiences of subsets of children would yield samples too small to fairly judge impact. This was the case for sibling placements (only some children had siblings

coming into care) and the likelihood of placement in the first place (only some children had attorneys assigned prior to placement).

This would also have been the case for evaluating preparedness for independent living (only a few children would have left care to live independently). However, the outcomes that were evaluated—the likelihood of early reunification, rates of kinship placement, and rates of movement within one year of assignment—are among the foundational outcomes of any child welfare system.

Finally, even for the outcomes that could be measured, the evaluation was designed to detect moderate average effects on attorney and child outcomes. Detecting small average impacts would have required a greater number of attorneys and cases. For the outcomes where no statistically significant results were found, there may have been small average impacts that the evaluation did not have enough power to detect.

10.2 Implementation of Intervention

Almost all Georgia and Washington State attorneys attended the initial two-day training. Only 7 out of the 131 attorneys assigned to the treatment group missed the initial training.

Attorney participation in pod meetings and coaching sessions following the two-day training differed in the two states. In Georgia, fewer sessions were offered and participation rates ranged from 10 percent to 60 percent of treatment attorneys; on average around 45 percent of treatment attorneys attended each offered session. In Washington State, participation was consistent and usually ranged from between 70 and 80 percent of treatment attorneys for the majority of offered sessions. The median number of pod meetings attended by Georgia attorneys was three (out of seven offered) and the median number of coaching sessions among Georgia attorneys was also three (out of eight offered). In Washington State, treatment attorneys attended a median of seven pod meetings (out of ten offered) and participated in a median of nine coaching sessions (out of ten offered).

Pod meetings and coaching sessions were implemented with greater fidelity to the intervention plan in Washington State than in Georgia. Five out of seven Georgia pod meetings were conducted as online meetings, whereas all Washington State pod meetings were done in person. Coaching sessions in Washington State followed a consistent format, whereas Georgia coaching sessions did not.

Evaluators also collected data from attorneys about which core skill or skills were discussed in each pod meeting or coaching session. From these data, participation is characterized by how many attorneys covered each core skill at least three times over the course of the post-training period. Georgia's treatment attorneys were exposed to the core skills less due to fewer post-training offerings and lower participation.

Still, about two-thirds of attorneys had covered the core skill “enter the child’s world” at least three times. About half had covered the core skills “evaluate needs,”

Table 10.1 Six Core Skills—Frequency of Discussion Post Initial Two-Day Training

Core Skill	Percent of All Treatment Attorneys Discussing Skill at Least 3 Times	
	Georgia	Washington
Enter Child's World	68%	92%
Evaluate Needs	52%	89%
Advocate Effectively	56%	89%
Assess Safety	47%	78%
Advance Case Planning	27%	89%
Develop Case Theory	14%	79%

“advocate effectively,” and “assess safety” at least three times and half had not reached this threshold. Most attorneys had not had at least three discussions with state team staff about “advance case planning” and “develop case theory.” Washington’s treatment attorneys were exposed to all Six Core Skills more widely and consistently. The percentage of all treatment attorneys discussing a particular core skill at least 3 times ranged from 78 percent to 92 percent.

10.3 Measuring Attorney Behavior

Whether and how attorney behavior changed because of the intervention was measured with the child-specific surveys of attorneys described in Chapter 7 and used for the analyses in Chapter 9. The surveys contained questions addressing the hypothesized links in attorney behavior to child outcomes that could be reasonably measured through surveys. Surveys were triggered based on the attorneys’ appointment as legal counsel and continued at approximately six-month intervals thereafter. In Washington State, attorneys were asked to complete additional milestone surveys when children experienced certain legal or service milestones, such as dispositional order, termination of parental rights order, and exit from substitute care.

The evaluation of attorney behavior change was based on attorney self-reports. Because attorneys report on their own activities, these data may have been subject to recall or social desirability bias. While problems relating to recall are probably equally distributed among treatment and control attorneys, it is possible that treatment attorneys may have overstated their activities on measures they knew were expectations of the Best Practice Model.

A total of 3,787 survey records of the randomly selected cases associated with 198 attorneys were used in the analysis. Survey data collection operated for more than a

Table 10.2 Attorneys by Number of Surveys Completed

		# of Attorneys			% of Attorneys		
		Treat.	Control	Total	Treat.	Control	Total
GA	1-3 surveys	8	14	22	18%	30%	24%
	4-10 surveys	16	18	34	36%	38%	37%
	11-25 surveys	17	11	28	39%	23%	31%
	26+ surveys	3	4	7	7%	9%	8%
GA Total		44	47	91	100%	100%	100%
		Treat.	Control	Total	Treat.	Control	Total
WA	1-3 surveys	2	6	8	4%	13%	8%
	4-10 surveys	15	4	19	26%	9%	18%
	11-25 surveys	11	10	21	19%	22%	20%
	26+ surveys	29	26	55	51%	57%	53%
WA Total		57	46	103	100%	100%	100%

year longer in Washington State than in Georgia, so more surveys were completed by Washington attorneys (2,840) than by Georgia attorneys (947).

Because of variation in the number of cases that these child representatives served during this period, the number of surveys completed by each attorney also varied (Table 10.2). Fewer Washington State attorneys completed only a small number of surveys because survey data collection started a year earlier.

Forty-nine attorney opinions and behaviors were analyzed with child-specific surveys. Each question was analyzed over all survey types and separately for assignment surveys and review surveys. In addition, similar composites of common response types used in the analyses for Chapter 9 were created and analyzed. To reduce the burdens on some attorneys, not every assignment generated a survey. For these attorneys, the models contained adjustments to reflect the total number of these attorneys’ cases.²

Each distribution of survey responses was analyzed for three types of survey groups:

- All surveys regardless of type
- Assignment survey only
- Review surveys only

2. Selected cases were weighted based on the inverse of the probability of being selected for a survey within each attorney.

Table 10.3 Odds Ratio (OR): Treatment effect on times attorney met in person, spoke on the phone, e-mailed, or texted with...

Type of Individual	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	OR	OR	OR	OR	OR	OR
Biological parent or original caregiver				1.48 [†]	1.16	1.84 [†]
Mother	1.45	1.18	2.16 [†]			
Father	1.62 [*]	1.89 ^{**}	1.06			
Siblings				0.90	0.97	0.67
Other individuals related to this child (e.g., grandparent)	1.36	1.40	1.20	1.27	1.13	1.61
Foster parent or substitute caregiver	1.69 [*]	1.92 [*]	1.64	1.59 [*]	1.62 ^{**}	1.92 [*]
Caseworker(s)	1.80 [*]	1.64	1.97	1.34	1.18	1.51
Attorneys	1.25	0.98	2.32 [*]			
Attorney for this child's parent's				1.16	0.89	1.70
Other attorneys or legal professionals				1.64 [†]	1.19	3.22 [*]
CASA	1.46	1.82	1.95 [†]	1.40 [†]	1.09	1.43
Teacher or other education professional	1.47 [*]	Δ	2.36	1.23	1.41	1.05

^{**} *p*-value < 0.01, ^{*} *p*-value < 0.05, [†] *p*-value < 0.1, Δ *Not estimable*.

Attorney behavior results are grouped in four domains: questions relating to the frequency of contact with individuals related to the case (see Tables 10.3 and 10.4), time spent on selected activities (see Tables 10.5 and 10.6), frequency of occurrence of certain events (see Table 10.7), and relationship and advocacy activities (see Table 10.8). The analysis of the surveys showed some differences between treatment and control attorneys across all of these domains. Not every question was asked in each state, and some questions were asked differently. In these cases, the associated boxes are blank.

Table 10.4 Average Scales: Treatment effect (Beta or B) on times attorney met in person, spoken on the phone, e-mailed, or texted with...

Average Scales	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	B	B	B	B	B	B
Family Members	0.12*	0.09	0.12	0.04	0.00	0.05
Proximate Collaterals ^a	0.22*	0.19 [†]	0.28*	0.17 [†]	0.05	0.31
Distal Collaterals ^b	0.06	0.10	0.08	0.06	0.02	0.08

** *p-value* < 0.01, * *p-value* < 0.05, † *p-value* < 0.1, Δ Not estimable.

^a Includes caseworkers, other attorneys, and foster parents.

^b Includes teachers, CASA, and health professionals, and other service providers.

10.4 Treatment Attorneys Changed Their Behavior

The following tables and summaries demonstrate that lawyers receiving the Six Core Skills Intervention changed their approach to child representation in the hypothesized direction.

Georgia treatment attorneys were more likely to communicate with fathers near the time of assignment and were more likely to communicate with mothers at the time of review. More communication occurred with proximate collaterals at all survey points. Differences were also observed for contact with CASA at review. Across all surveys, the differences observed between the treatment and control attorneys were communication with fathers, foster parents, and caseworkers, and teacher or other education professional.

Washington treatment attorneys were more likely to communicate with a biological parent or original caregiver, foster parent or substitute caregiver, other legal professionals and CASA across all surveys. More communication occurred with proximate collaterals at all survey points. In addition, differences were also observed for contact with other legal professionals at review. The largest differences observed between the treatment and control attorneys were for communication with foster parent or substitute caregiver at the time of assignment.

Georgia treatment attorneys responded in the hypothesized direction in most of the activity measures. The QIC intervention seems to have had the strongest impact on consulting or negotiating with other parties to the case and conducting interviews or reviewing interview notes across all surveys. Differences were also observed for developing the theory of the case and assessing child’s safety with respect to current placement. In addition, treatment attorneys were more likely to review the child’s case plan and third-party records; perform more drafting and filing pleadings, motions, and

Table 10.5 Odds Ratio (OR): Treatment effect on time spent involved in the following activities.

Activity	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	OR	OR	OR	OR	OR	OR
Developing the theory of the case	2.34*	2.64 [†]	2.28	1.90**	2.1**	2.81*
Legal research	2.38	2.35	2.89	0.98	1.08	1.28
Consulting or negotiating with other parties to the case	2.72**	2.85*	2.14 [†]	1.19	0.85	1.76
Obtaining / reviewing this child's court file	1.13	0.93	1.21	0.79	0.80	0.85
Obtaining / reviewing third-party records	1.72 [†]	1.40	2.09			
Reviewing this child's school records				0.88	1.00	0.97
Reviewing this child's medical records or assessments				1.07	1.17	1.18
Reviewing other evaluations and assessments				0.96	0.86	1.22
Conducting interviews or reviewing interview notes	2.55**	2.54**	2.64 [†]	0.91	0.83	1.20
Drafting and filing pleadings, motions, and court orders	2.18	1.99	3.24*			
Assessing this child's safety with respect to removal or return to their home of origin	1.43	1.49*	1.56	1.35	1.20	1.70
Reassessing child's safety with respect to home of the original care taker				1.19	0.96	1.92
Assessing this child's safety with respect to current placement	1.69*	1.46 [†]	3.14**	1.01	0.92	1.41
Reassessing this child's safety with respect to current placement				1.33	0.90	1.87 [†]
Reviewing, assessing or seeking to influence this child's case plan	1.87 [†]	2.11*	1.58	1.14	0.94	1.69

** *p*-value < 0.01, * *p*-value < 0.05, [†] *p*-value < 0.1, Δ Not estimable

Table 10.6 Average Scales: Treatment effect on time spent involved in the following activities in furtherance of this child’s case

Average Scales	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	B	B	B	B	B	B
Legal Case Preparation ^a	0.25*	0.24 [†]	0.21	0.03	0.00	0.14
Investigation & Document Review ^b	0.25*	0.21*	0.29 [†]	-0.04	-0.06	0.05

** *p-value* < 0.01, * *p-value* < 0.05, † *p-value* < 0.1, Δ *Not estimable*.

^a Includes developing strategy of the case, consultation and negotiation, drafting pleadings and other court documents, reviewing court file, and seeking to influence child’s case plan.

^b Includes third-party record review, witness interviews, and assessing safety.

Table 10.7 Odds Ratio (OR): Treatment effect on whether attorney participated in the following events since the last survey

Event	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	OR	OR	OR	OR	OR	OR
Mediation	0.70	1.10	3.19	1.81	1.48	Δ
Family team or treatment team meeting	2.83*	Δ	1.32	1.27	0.81	2.08**
Other judicial, administrative, or educational proceedings	1.35	2.00	0.90	0.81	0.81	0.87
Hearing on placement change				0.91	0.89	1.14
Pre-trial hearing/ settlement conference	1.85	2.88*	1.29			
Motion hearing (non-reunification, placement change, etc.)	0.98	Δ	1.11	1.17	0.90	1.78*

** *p-value* < 0.01, * *p-value* < 0.05, † *p-value* < 0.1, Δ *Not estimable*.

court orders for treatment attorneys at the time of review; and assessing the child’s safety with respect to removal or return to their home of origin right after the time of assignment.

In Washington State, although there were not many statistically significant findings in time spent on various activities, the robust difference in time spent developing a

Table 10.8 Odds Ratio (OR): Treatment effect on relationship and advocacy activities

Activity	Georgia			Washington		
	All Surveys	Assignment	Review	All Surveys	Assignment	Review
	OR	OR	OR	OR	OR	OR
Number of times spoken, emailed or text with child	2.47 [†]	2.19 [†]	3.13*	1.03	0.94	1.26
Number of times met in person with child	2.18*	2.69*	1.68	1.04	1.04	1.31
Met child in their home or placement	1.87	1.26	2.56 [†]	1.17	1.18	1.50
Have you made any efforts to initiate a non-adversarial case resolution process	1.84	2.24	2.06	2.09*	1.62	2.94*
Did you argue for, or make other concerted efforts to change, the array of services provided to this child	2.35*	2.32*	2.62 [†]	1.22	1.26	1.31
Did you argue for, or make other concerted efforts to change, the array of services to this child's family	2.15*	2.34*	2.57*	1.36	1.29	1.64
Quality of relationship with child	1.46	1.28	1.87	1.04	1.09	1.04
Your level of understanding of child's goals and objectives	1.61	1.61	2.65	0.79	0.75	0.81
Your advocacy agreed with child's wishes				0.60 [†]	0.70	0.73

** *p-value* < 0.01, * *p-value* < 0.05, [†] *p-value* < 0.1, Δ *Not estimable*.

theory of the case was notable. It showed that Washington treatment attorneys were more likely to spend time developing the case theory at different points of the surveys. At the time of review, treatment attorneys were also more likely to spend time reassessing their client's safety with respect to the placement.

Georgia treatment attorneys participated more in family team or treatment team meetings across all surveys, and attended more pretrial hearing/settlement conferences near the time of assignment.

Washington State treatment attorneys participated more in family team meetings at the time of review. Also at the time of review, a difference was observed in motion hearings in the hypothesized direction.

Georgia treatment attorneys were more likely to speak, e-mail or text the child client, and meet in person with the child at all survey points than control attorneys. Differences were also observed for arguing for or making other concerted efforts to change, the array of services provided to the child and the child's family in the hypothesized direction. It was also shown at the time of review that Georgia treatment attorneys were more likely to meet the child outside of the court.

In comparison to control attorneys, Washington treatment attorneys initiated non-adversarial case resolution process more frequently both across all surveys and at review. However, their advocacy was less likely to agree with the child's wishes.

There were no statistically significant differences in either state between treatment and control attorneys' assessment of the degree to which dispositional orders agreed with the goals of the child.

10.5 Child-Level Outcomes

10.5.1 *Each Child Had an Attorney*

To be included in the child outcome sample, a child must have had a treatment or control attorney assigned to represent them at some point prior to leaving out-of-home care. Every child in the out-of-home care sample was represented by an attorney at some point.

(Chapter 7 shows the distribution of the timing of an assignment to an attorney.) Using this sample, the evaluation addressed the question of whether children assigned to attorneys who received the intervention experienced differences in permanency outcomes, rates of kinship placement, and rates of movement within one year of assignment compared to children assigned to control attorneys.

As with the attorney surveys, the number of children represented by each attorney varied. The overall distributions of attorneys by the number of represented children from the two states were similar—more concentrated in the middle and lower at the two ends (Table 10.9). Approximately 61% of the Georgia attorneys represented fewer than 11 children during the study while a smaller percentage 54% of the Washington State attorneys were in the same category. When looking at the numbers by treatment and control status, the distributions in Washington State were more or less equivalent between the two groups, which was not the case in Georgia. In Georgia, a much lower percentage of treatment attorneys represented 11 or fewer children than control

Each child in the outcome analyses was represented by either a treatment or control attorney. All children had an attorney, so the results do NOT speak to the question of impact of having or not having an attorney.

Table 10.9 Attorneys by Count of Number of Children Represented with Associated Out-of-Home Care Placement

		# of Attorneys			% of Attorneys		
		Treat.	Control	Total	Treat.	Control	Total
GA	1–3 children	10	20	30	16%	27%	22%
	4–10 children	20	34	54	32%	45%	39%
	11–25 children	22	11	33	35%	15%	24%
	26+ children	10	10	20	16%	13%	15%
GA Total		62	75	137	100%	100%	100%
		Treat.	Control	Total	Treat.	Control	Total
WA	1–3 children	11	12	23	19%	22%	20%
	4–10 children	21	18	39	36%	33%	34%
	11–25 children	16	15	31	27%	27%	27%
	26+ Children	11	10	21	19%	18%	18%
WA Total		59	55	114	100%	100%	100%

attorneys over the course of the study, while a significantly higher percentage of attorneys represented 11 or more children.

10.5.2 Placement Moves and Placement with Kin

Among Georgia children studied, 17 percent of children were placed with kin at placement or as the next placement after assignment to a treatment or control attorney. Among Washington children studied, 17 percent of children were placed with kin at or as the next placement after assignment to a treatment or control attorney. Among Georgia children studied, 61 percent of children did not experience a placement move within a year after assignment to a treatment or control attorney (or prior to exiting care, whichever came first). Among Washington children studied, 69 percent of children did not experience a placement move within a year after assignment to a treatment or control attorney (or prior to exiting care, whichever came first).

Children represented by treatment and control attorneys did not appear to have different experiences of placement moves or placement with kin. Effects were in the expected, positive direction with the exception of the likelihood of placement with kin associated with treatment attorneys in Washington State. There, the model showed that treatment attorneys were associated with a lower likelihood of placement with kin, though the result was not statistically significant.

Table 10.10 Estimated Hazard Ratios of Placement with Kin and Movement

State	Outcome	H.R.	Sig.
Washington	Placement with kin	0.75	0.18
	No placement move within 1 year of assignment	1.21	0.19
Georgia	Placement with kin	1.05	0.84
	No placement move within 1 year of assignment	1.32	0.14

H.R. = Hazard ratio. For kinship analysis, hazard ratio of greater than 1 indicates greater likelihood of placement with kin. For movement analysis, hazard ratio of greater than 1 indicates greater likelihood of a stable placement (no movement).
 Sig = Statistical significance level.

10.5.3 Measuring Permanency Outcomes

A child’s experience of permanency after out-of-home care placement has two dimensions: whether the child leaves care to a permanent family and how long the child spends in out-of-home care placement before that happens. Two of the primary goals of the child welfare system are to *maximize* the frequency with which children leave out-of-home placement to a permanent family (as opposed to aging out or running away, for example) and *minimize* how long that takes. Once all children in the group being summarized have left care, the distribution of both of these dimensions can be summarized and compared for groups of children served. All else being equal, groups of children for whom permanent exits are more prevalent and whose time in substitute care is less are assumed to reflect “better” outcomes.

A common feature of this type of analysis is that the experiences of some subjects are still in progress at the time observation ends. That is, neither exit type (to a permanent family or not) nor the total time in care are known for all children. For example, at the end of the observation period covered by this evaluation (March 31, 2015), about half of the children represented were still in care as of March 31, 2015 (49% in Georgia and 52% in Washington State; See Table 10.8). Chapter 7, Section *Observation Period for Out-of-Home Placement Impacts*, explains that observation period for out-of-home care ranged from 5 months to 3 years. In order to properly address this issue, a class of statistical models known as hazard models were employed.³

Variations in the timing of attorney assignment also presented an additional analytic wrinkle. Groups of children who are early in their placement experience are more likely to exit to reunification and to do so relatively quickly. Groups of children who have been in care longer are more likely to exit to adoption than groups of children who

3. For the permanency outcomes, discrete time hazard models were used, with a binary dependent variable indicating whether the child had achieved permanency. The discrete time hazard model accommodated differences in the timing of assignment to an attorney.

Table 10.11 Exit Status from Out-of-Home Care by Permanent and Other Exit Types for All Assignments to Project Attorneys (Observed through March 31, 2015).

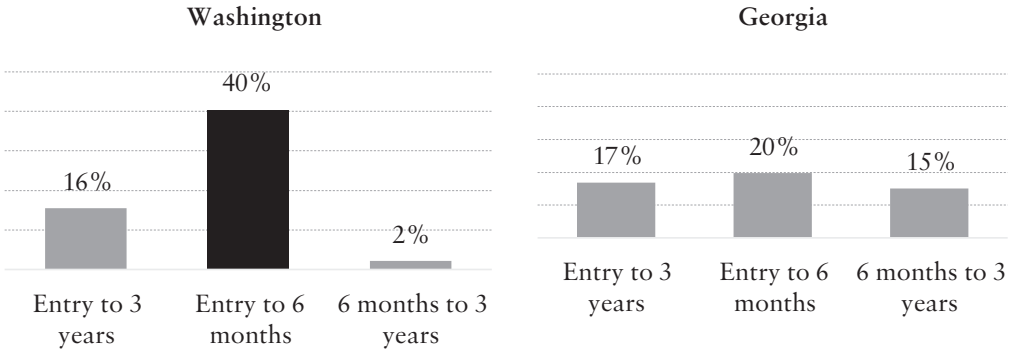
Exit Type	Georgia		Washington	
	#	%	#	%
Exit to family/relative	652	37%	451	25%
Guardianship guar	90	5%	51	3%
Adoption	64	4%	225	13%
All Permanency Exits	806	45%	727	41%
Other Exits	104	6%	134	8%
Still in care on 3/31/2015	867	49%	926	52%
Total	1,777	100%	1,787	100%

have recently entered care. This is apparent in the Washington State sample, where adoption exits represented 13 percent of observed exits. This reflects the fact that more children who had been in care longer were assigned attorneys in Washington State than in Georgia. As described in Chapter 7, almost three-quarters of appointments in Georgia were made before or within a month of placement (74%). Of children in the Washington sample, 42 percent were appointed before or within a month of placement. On the other end of the distribution, 14 percent of the Georgia and 35 percent of the Washington sample had an attorney appointed after at least a year in placement.

To fully address the challenges of incomplete observation and variation in attorney assignment, the permanency analysis was done using three different models. The first analysis evaluated the average treatment effect on permanency to date for the complete sample, including all assignment timings. This model represents a strong test of impact, as the differences between treatment and control attorneys on the timing of permanency would have to show up in a variety of situations, both early in the child's out-of-home placement and later on, where achieving permanency may be more complex for a variety of reasons, such as child characteristics, ongoing family issues, or the availability of adoptive homes. The results of this model are shown in Table 10.11 as Model 1 and in the first bar of Figure 10.1. In both states, no significant differences in permanency between treatment or control group attorneys were observed, even though the effects were positive and in the expected direction.

The second model introduced the distinctions of both assignment timing as well as early vs. later permanency. The second model evaluated the interaction between the treatment effect and the likelihood of permanency within six months and the interaction between the treatment effect and the likelihood of permanency after six months.

Figure 10.1 Percent Difference in Hazard of Exit to Permanence between QIC and Control Groups by State and Observation Period



Note: Black column represents statistically significant difference.

This approach serves two purposes. For children who were assigned an attorney within 6 months, almost all children’s outcomes could be observed within 6 months of placement. Thus, the permanency findings can speak to the impact of treatment or control attorney assignment observable within six months for almost all children. The second purpose is to allow a separate evaluation of the impact of the treatment on early vs. later permanency.

The distinction in the second model also had the effect of creating a sample in the Washington State site that reflected both early appointment (within six months) and older children coming into care. In the Washington sample, 78% of children who were appointed counsel within six months were *over* age 12. As shown in Figure 5 in Chapter 7, the opposite was true for the later appointment group in Washington and both the early and late appointment groups in Georgia: Between 73 and 83 percent of these children were *under* age 12. By virtue of Washington State’s law favoring the appointment of client-directed attorneys to children age 12 and over, the evaluation had a sample with which to evaluate the impact of the QIC intervention that was of special interest to the field: mostly older children, appointed an attorney early in their out-of-home placement experience, who received client-directed representation.

10.6 Improved Permanency Outcomes

The results of the two parts of the second model are shown in Table 10.11 as Model 2 and in the second and third bars of Figure 10.1. Note the statistically significant finding: *The group of children assigned a treatment attorney in Washington State were 40 percent more likely to experience permanency within six months of placement than the group of children represented by control group attorneys.* Although it did not rise to the level of statistical significance, the exit to permanency rate for *all* Washington children represented by a treatment attorney was 16% better than that of the control group.

Table 10.12 Estimated Hazard Ratios of Exit to Permanence for Children Represented by QIC vs. Control Group Attorneys

State	Observation Period	H.R.	Sig.
Washington	Model 1: First 3 years after entry to care	1.16	0.2994
	Model 2: First 6 months after entry to care	1.40	0.0318*
	Model 2: 6 months to 3 years after entry to care	1.02	0.8861
Georgia	Model 1: First 3 years after entry to care	1.17	0.2027
	Model 2: First 6 months after entry to care	1.20	0.1980
	Model 2: 6 months to 3 years after entry to care	1.15	0.2808

H.R. = Hazard ratio. Hazard ratio of greater than 1 indicates faster permanency during observation period.
Sig = Statistical significance level.

In Georgia, the likelihood of permanency was greater for the treatment group, +17% from entry to 3 years (+20% for the within 6 months of placement period.) Although the permanency effect was positive in Georgia, it did not reach statistical significance.

In both states, there were no significant differences in permanency between treatment or control group attorneys for when the attorney was assigned after six months, though the effects were positive and in the expected direction. For this group, the observation period is incomplete for many children, though for some children, the observation period was as long as three years.