



# EMPath

Economic Mobility Pathways

## ECONOMIC MOBILITY EXCHANGE CASE STUDY



Kids deserve the best.



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## PROGRAM OVERVIEW

Children's Wisconsin (CW) offers a wide variety of healthcare services, wraparound services, and casework support across Wisconsin. They are the only medical service provider in the state that focuses solely on the health and wellbeing of children. Their programs and services focus on children's health both in and outside of the hospital. Children's Wisconsin works with the state of Wisconsin, community partners, local clinics, and families around the state to holistically address child health concerns. While medical services are the backbone of their work, CW also supports Wisconsinites through community partnerships, local clinics, and direct support programs in tandem with the Wisconsin foster care system.

### Joining the Exchange

Children's Wisconsin saw Mobility Mentoring® as a perfect opportunity to provide participants in their programs with the tools they need to support their families' health and wellbeing. CW joined EMPATH's Economic Mobility Exchange ("Exchange") in 2017, with the hope that Mobility Mentoring would provide a common framework for the organization to discuss child welfare from a socioeconomic perspective. CW also hoped that a Mobility Mentoring-informed approach would increase participant buy-in and create a friendlier, more engaging experience for participating families.

"In our community, child welfare works in different time frames from what Mobility Mentoring was originally intended to work – we try to work a little bit faster, and we're also working with families in different situations. **That adaptability was highly influential.**"

- Gabriel McGaughey, Director of Child Wellbeing,  
Children's Hospital of Milwaukee Community Services



## IMPLEMENTING MOBILITY MENTORING

CW was particularly interested in using Mobility Mentoring in their Family Support Program, which consists of Family Support Specialists (FSSs) who provide safety and reunification-based services to child-welfare involved families to support family stability and child safety in the long-term. All participants in the program are referred to CW's case management team: 80% of participants are court-ordered, and the remainder come from early intervention programs. Families referred to this program by the courts are automatically assigned a Child Welfare Case Manager and are enrolled in Family Support's Mobility Mentoring-informed program. The Family Support Program's mission is to empower, support and advocate for families to achieve safety, stability and well-being, while striving to bring and keep families together. They meet with families 2-3 times a week to provide parenting services, parent-child interactions, safety services, and goal coaching sessions.

CW took great care in the planning period of implementation to discern what Mobility Mentoring would look like within the Family Support Program. They carefully considered how Mobility Mentoring would change daily activities and impact documents and procedures at every level. From October 2018 to June 2019, the implementation team worked to ensure that Mobility Mentoring would be implemented smoothly.



**“Staff really appreciate  
having some structure,**

not just being left off on their own in terms of engaging families...staff actually have been some of our biggest champions in our Mobility Mentoring work.”

- Gabriel McGaughey, Children's Wisconsin



CW began the implementation process by forming a **core team of highly motivated supervisory, practitioner, and support staff** that first

attended EMPath's foundational Mobility Mentoring Essentials training, now available online through EMPath's Mobility Mentoring Foundations course. The team met regularly to explore key Mobility Mentoring concepts, brainstorm how those elements would fit into current programs, and come up with potential challenges and solutions to implementing the new tools and coaching approach. They also used elements of Human Centered Design, a project management theory that focuses on creatively tackling problems, rapid cycle feedback, and frequent testing, to boost their design efforts and inform their choices throughout implementation.



This core team served as the engine for Children's Wisconsin's implementation process, but the fuel for that engine was the **extensive feedback they collected through small**

**focus groups.** The core team would regularly form small working groups to gather practical feedback on implementation plans from key stakeholders, whether they be direct staff, participants, or external partners. This process not only ensured that the core team collected meaningful and informed feedback but also ensured general buy-in to Mobility Mentoring long before rollout.



After the period of planning and staff feedback, the core team **held monthly in-house training sessions** for staff at large that focused on the essential elements of

Mobility Mentoring: coaching for economic mobility, the Bridge to Self-Sufficiency® ("Bridge"), goal setting, and recognition, and how they apply within their work at Children's Wisconsin. These in-depth sessions gave staff time to get comfortable with Mobility Mentoring's model and tools before having to use it in their day-to-day practice. Quarterly trainings continue to be held, ensuring that staff remain up-to-date on Mobility Mentoring at CW and giving them a space to share best practices with newer employees.



After this training and planning period, CW's core team **initiated a small pilot program** to see what worked and what still needed to be adjusted before full

rollout. Two Family Support Specialists (FSS) from the core team used the new Mobility Mentoring tools with four participant families over the course of a few months. The pilot reinforced how the Bridge and goal action plan were great engagement tools and how the tools provided structure to the work CW was already doing with families. After the pilot, the team made some minor adjustments to procedures, namely in introducing the Bridge to participants earlier, and shared successes with staff at large.

In July of 2019, Children's Wisconsin began using a Mobility Mentoring-informed approach with each new family in their program. Implementation was smooth due in large part to the extensive planning and feedback the implementation team gathered prior to rollout. The built-in training and feedback systems CW created through their monthly meetings and focus groups made continuous learning and innovation much easier and effective. Monthly planning and training meetings have evolved into monthly program meetings, quarterly training institutes, and bi-weekly office hour sessions. CW has added a monetary recognition program and adjusted the Goal Action Plan to include identifying a family support system based off of the recommendations of staff and participants at meetings. This new Goal Action Plan has a section dedicated to listing out family and community members that participants could rely on for help if needed; coaches found that writing down these supports strengthened participants' confidence that they could achieve these goals.

**“The goal worksheet is a helpful tool –**

it gives me something that breaks down huge goals into smaller goals, making things more manageable.”

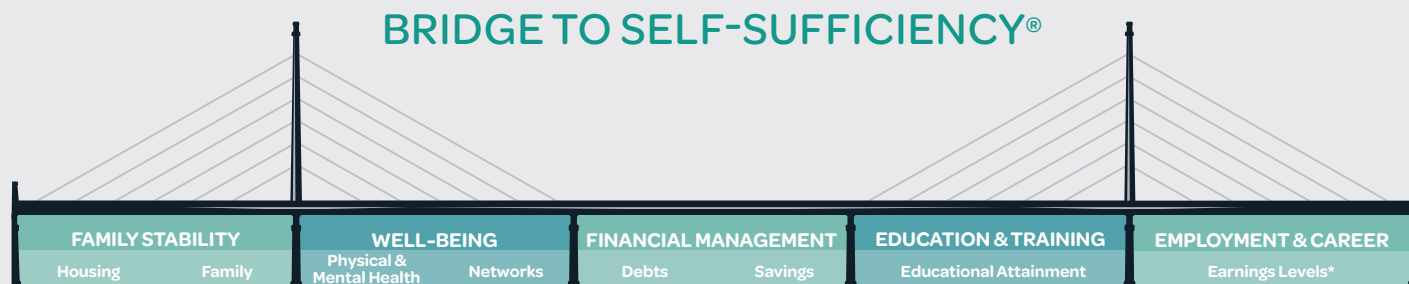
- a Family Support Participant

**“I really liked using the Bridge because I can see how far I have come in a few months – it was motivation to me.”**

- a Family Support Participant







## TAILORING MOBILITY MENTORING TO CHILDREN'S WISCONSIN'S PROGRAM

### The Bridge

Since the Family Support Program is focused on child welfare, core staff considered adding pillars to the Bridge to Self-Sufficiency around family security and wellbeing. They held multiple meetings diving into how Children's Wisconsin's goals align with the Bridge and what the Bridge might be missing in respect to CW's goals. They also reviewed other Exchange member organizations' Bridge adaptations, combed through them, and picked out elements that they wanted to potentially adopt.

After careful consideration with EMPath's Exchange staff, the Exchange Research and Evaluation team, and feedback collection from Family Support Specialists (FSS), CW added two new pillars to their newly adapted Bridge: the Parent-Child Interaction Pillar, which focuses on developing healthy family relationships, and the Safety Pillar, focusing on how parents can best create a safe environment for their children. To maintain the integrity of the Mobility Mentoring model, EMPath tries to keep member Bridges as close to the original as possible, and EMPath does not encourage significant changes to the Bridge. However, CW wanted to include these

program goals outside of economic mobility in their Bridge conversations to highlight their importance to children's health and wellbeing.

Children's Wisconsin wanted to use the Bridge as the first key interaction between participants and direct service staff, and they made sure that these essential elements to family success were represented in the five pillars of the Bridge. It soon became apparent to FSS's that the earlier they had that initial Bridge conversation with participants, the more likely they were to make real progress. Talking about the Bridge near the beginning of the interaction set a proactive, cooperative tone with participant families. Instead of feeling that goals were being dictated to them, participants could take action and connect their life goals to economic mobility from the start. Mentors and participants still discuss the court's service plan, but by relating the plan to participant families' own goals staff help participants stay intrinsically motivated throughout the program.

The Bridge has become an essential first step in setting the tone and purpose of a family's interaction with the program, and it serves as a perfect segue for staff to start establishing early goals with families on how to achieve stability and permanence.



## Goal Setting

Prior to implementing Mobility Mentoring, CW's programs received most of their goals from the courts, in the form of court-ordered conditions. CW's Child Welfare Case Managers, Family Support Specialists, and the participants themselves used these goals as the framework for their case plans and services. However, buy-in for these goals from participants was generally low, since the goals they were aiming to achieve weren't their own and weren't clearly connected to their lives.

Since implementing a Mobility Mentoring-informed approach, Family Support Specialists have changed the way they support participants in setting and achieving their goals. Following court-mandated goals is a legal requirement, so they are still taken into account; but FSS's and participants work together to create goals the participants themselves have for their families as well. Goal setting for themselves gives participants a chance to explore how their goals line up with their court-ordered conditions. Since shifting their focus from handing goals down to participants to creating goals with participants, FSS's have seen buy-in to the program increase significantly.

**“(Mobility Mentoring) helps connect the dots for everybody,**

especially if you think about families who are under a lot of stress. We've started to see mindset shifts in our staff in terms of the power of celebrating achievements and the use of incentives – both monetary and non-monetary – that has been a huge benefit for our program participants.”

- Gabriel McGaughey, Children's Wisconsin

“Mobility Mentoring was a source of therapy for me and also a check in so that I would make sure I was staying on track

**... I couldn't be more grateful that I had such great help...**

I am the happiest I have been in a very long time and the kids are also so happy to have their momma back in their lives.”

- a Family Support Participant

## IMPLEMENTATION TIMELINE

### 2018

- CW joins the Exchange as a Level 1 Member
- CW upgrades to Level 2 Membership
- Core staff trained in Mobility Mentoring Essentials by EMPATH
- Used human centered design techniques to adapt Mobility Mentoring tools for child welfare population and prepare for implementation

### 2019

- Introduced the Bridge to Staff focus groups, held focus groups on Goal Action Plan and other topics
- Lead small prototype of Mobility Mentoring with a few participants
- Staff Monthly Meetings on elements of Mobility Mentoring
- Full rollout of Mobility Mentoring with all new cases
- Started monthly communities of practice and quarterly training Institutes to support staff with implementation
- Started monetary recognition pilot
- Started family team meeting pilot using Mobility Mentoring tools

### 2020

### 2021

- Adjusted to working remotely due to the pandemic, continued to enhance practice through monthly All Program meetings, quarterly training institutes, bi-weekly office hours
- Shared learnings with Exchange Members at "Mobility Mentoring in Child Welfare Programs and Design Thinking" webinar
- Conducted participant focus groups to gain insights on how Mobility Mentoring has been received

### 2022

- Expanded monetary recognition to all incoming cases



## INITIAL OUTCOMES

After implementation in 2019, Children's Wisconsin saw program buy-in from both staff and participants rise significantly as those involved in the program started to see the benefits of Mobility Mentoring. CW has quickly become one of the Exchange's thought leaders in Mobility Mentoring in the context of early childhood development. They are also an active member of the Exchange's learning network, regularly sharing learnings, hosting workshops and webinars, and leading the conversation on early childhood services at the Exchange. Prior to implementation, staff collected data on service hours, staff capacity, and whether a family progressed to a less restrictive family program. Upon implementing a Mobility Mentoring model, CW expanded the data collected and aligned metrics with the Bridge and goal setting. Data from Bridge conversations and goal setting in particular have changed the nature of CW's data collection: now staff can assess a family's progress by tracking Bridge scores, the goals families are setting, and the timeframe within which they achieve those goals.

Perhaps most importantly, Family Support Specialists can use this new data to advocate for their families in court. At the end of their period with CW, many families' cases are reviewed by the judicial system. The data staff collect on families' progress is absolutely key in demonstrating to judges that families have made real strides. A significant jump in a Bridge score or a high number of goals met can be used as concrete evidence of a family's progress toward permanence, evidence that some cases lacked prior to implementation of Mobility Mentoring.



"Mobility Mentoring's parent-driven, goal setting and coaching approach

**is now the foundation of our in-home and reunification-based services within our Family Support Program.**

Mobility Mentoring has given us the platform to engage in meaningful conversations with our child welfare participants around safety, stability, family strengths, and supports."

- Jennifer Winkler, Children's Wisconsin

## DATA HIGHLIGHTS



Participants served

**2020: 112**  
**2021: 108**



Average initial Bridge score:

**60.44**

Average subsequent Bridge score:

**70.06**



Goals set

**2020: 130**  
**2021: 153**

## KEY TAKEAWAYS

### Planning Ahead

Extensive planning was critical to CW's success in implementation. The core team created smart systems that fit within CW's greater framework because they took the time to brainstorm and gather feedback from multiple perspectives. Each element of Mobility Mentoring was carefully considered and integrated into CW's program before implementation. When staff finally began implementing a Mobility Mentoring-informed approach, stakeholders knew what was coming and what to expect. It should be noted that staff members were able to take their time because there were no external constraints or deadlines imposed on them to implement the model by a certain date.

### Smart Design

Human Centered Design (HCD) was critical in helping staff implement a system with practical, realistic use. The core team used many HCD elements to frame, test, and scale out their work and learnings throughout the implementation process. For instance, they used "How Might We" questions to gather feedback on how they could implement a Mobility Mentoring-informed approach and provide better services to families. They also used journey mapping to strategize and plan

for key moments in their service delivery process, from both a staff and participant perspective. And to ensure that their program remained up-to-date with participant and mentor needs, they used rapid cycle feedback and regular trainings. Through this framework, the implementation team was able to quickly identify areas for improvement and implement strategies quickly. Some examples include their inclusion of the Bridge in the first 90 days of engagement, which they found increased participant goal setting and engagement, as well as a shift away from handing down goals to participants toward making goals with participants, which also increased engagement and buy-in to the program.

### **Lean on Supports**

CW staff also suggest that organizations lean heavily on EMPATH staff and resources to help speed up the implementation process. When CW began planning for implementation of Mobility Mentoring, the Exchange was a relatively new learning network with fewer members and resources. The wealth of knowledge member organizations can now gain from additional EMPATH training and support, as well as the invaluable knowledge of fellow member organizations, would have made CW's implementation of Mobility Mentoring much faster.



## **SUMMARY**

Through rigorous planning, involving stakeholders at all levels of the organization in the implementation process, and a commitment to both the procedures and mindset of Mobility Mentoring, Children's Wisconsin ensured that their implementation of the program was smooth and effective for participants from the beginning. They have been able to share their successful experience and support other members throughout the Exchange on a number of panels and webinars detailing their model. Currently, CW is looking to expand their use of Mobility Mentoring into more of their health and wellness programs, and the work that they have already done to create an implementation process with built-in processes for feedback and improvement will continue to serve the organization for years to come.





# EMPath

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