



## Research Article

# The Training is Over – Now What? Transfer of Learning and Situated Learning in Child Welfare Training

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### Abstract

**Background:** This article describes the development of a child welfare training evaluation for new caseworkers designed to measure competencies and capture the transfer of learning into the child welfare practice setting. **Methods:** Kirkpatrick's four level model of evaluation was utilized as a guide to measure training effectiveness. Survey methodology was used to obtain data from training participants at the completion of training and again six months later. The evaluation assessed participants' confidence in learning competencies and how the training content was transferred and supported in the office. **Results:** Results indicate that confidence in abilities increased as a result of the training but did not increase significantly six months post-training. Importantly, support of what was learned in training via transfer of learning once in the office actually decreased six months post-training. **Conclusion:** These results lead to the following question: How is knowledge learned in training translated into the field, and how is it supported? Recommendations for child welfare training evaluation efforts are also presented regarding how to capture the effectiveness of classroom learning as well as measuring the impact of situated learning as a component of transfer of learning

**Keywords:** Child welfare training; Training evaluation; Transfer of learning; Situated learning

## Introduction

Child welfare is a challenging and high-pressure area of social work practice. Child welfare professionals work with vulnerable children and families who suffer from multiple personal and social problems such as poverty, mental illness, substance abuse, and interfamilial violence. As such, a well-trained workforce is a critical factor to preparing child welfare practitioners to address the multiple problems that children and families encounter. A well-developed, competency-based training curriculum is essential to introduce concepts to child welfare workers [1,2].

Within the child welfare area of social work practice, training professionals also recognize the need to implement and evaluate training to capture transfer of learning that facilitates effective application of knowledge and skills [3,4]. Despite the acknowledged importance of the quality of training, child welfare training evaluation literature on such types of evaluations is scant. Additionally, although the literature agrees that support from colleagues and supervisors is a facilitating factor for transfer of learning, the impact of situated learning during the training process has rarely been considered by the literature. Using Kirkpatrick's model of evaluation and current literature on the factors impacting transfer of learning as a guide, this methodological paper focuses on including competency-based evaluation and transfer of learning in a child welfare training evaluation. This paper discusses a Level III evaluation of a child welfare basic training. We will discuss the development, design, components, and presents results from 10 training cohorts.

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## Background

### Importance of training evaluation

Alvarez et al. provided a conceptual distinction between training evaluation and training effectiveness [5]. Training evaluation is the methodological approach for measuring learning outcomes. Training effectiveness helps to explain what occurred as the result of the training curriculum.

Training evaluations are essential to determine the effectiveness of training. A measure of effectiveness of the training is whether or not the skills are being used by the participants [6]; however, the skills learned in the training are not always used, which significantly limits the impact of the training [7]. Evaluations help to determine whether the skills are being used, which can justify the cost of administering the training. Without formal evaluations, trial-and-error approaches to determining training effectiveness can be used, which reduce the actual knowledge of cost effectiveness [8,9]. Overall, evaluations increase the understanding of the importance of the training and provide evidence to show the value of the training content [10].

### Levels of evaluation

Collins found that Kirkpatrick's (1976; 1994; 2006) taxonomy four level approach to training evaluation is the most common evaluative model utilized across public child welfare agencies [11]. This approach to training evaluation provides clarity to the complex nature of measuring child

welfare training learning outcomes. Kirkpatrick's training evaluation model delineates four levels of training outcomes: reaction, learning, behavior, and results. Level I includes an assessment of training participants' reaction to the training program.

Level II provides quantifiable indicators of the learning that occurred during the course of the training. Some, but not all, evaluations focus on measuring knowledge and skill acquisition to assess the benefits of training to employees in the form of demonstrated learning and improved on the job performance. Level II provides quantifiable indicators of the learning that occurred during the course of the training. For example, Vonk et al. [12] used a pre and post-comparison group, quasi-experimental design to evaluate a Title IV-E funded training program for second year MSW students preparing for child welfare positions. Though the sample size was smaller, findings indicate significant differences regarding attitudes toward child welfare practice in favor of the program's trainees, but no differences regarding child welfare knowledge.

Level III evaluations measure transfers of training material to the workplace. This phenomenon is commonly referred to as transfer of learning [13]. Self-report pretest and posttest instruments are commonly utilized to evaluate perceived transfer of learning and training curriculums [6]. Earlier child welfare competency-based evaluations reported on Level III evaluations [14,15] used case vignettes to assess employee's transfer of learning. The results of the evaluations indicated employees were able to transfer case planning skills more readily than problem identification and assessment skills.

Finally, Level IV evaluation measures are intended to provide some measurement of the impact that training has on broader organizational goals and objectives. Level IV reports on organizational goals such as training return on investment and employee retention. Level IV evaluations are the most difficult evaluation to carry out in child welfare agencies that operate with very little infrastructure and which often cannot spare the cost associated with conducting sophisticated evaluations [16,17]. The Child and Family Services Review can be seen as the ultimate evaluation of child welfare work and practice.

### **Training evaluation in child welfare**

Child welfare professional training is a critical component of effective practice to deliver a quality service to families. A review of child welfare training evaluation literature reveals that the typical focus of training evaluation measures has been on Level II evaluations, often thought the use of pre/post surveys to measure employees' change during the course of training [11]. For example, using a pre and post comparison group, Owens-Kane et al. [18] evaluated a training program for 106 child welfare professionals that provided continuing education courses. The goal of the training was to disseminate research findings in the area of foster care and child welfare practice in the area of foster care, substance abuse and adoption. Data on 106 training participants (63 who completed the training and 43 who did not complete the training) examined whether participation

resulted in child welfare knowledge gain. Significant differences in knowledge gain were reported by participants who completed the training.

In many organizations, training evaluation is based solely on participants' reaction immediately after a training course [11,17]. Although employee training in public child welfare agencies is a critical component to prepare employees to address the high demands of serving families and children, little is known about the delivery and effectiveness of training curriculums. There is some evidence that child welfare training programs are not well evaluated [11,19]. As an example, in an effort to provide a national snapshot on child welfare training evaluation activity, Collins [11] collected training evaluation data from 48 public child welfare agencies. Of the 48 agencies, only three states reported their efforts to use training evaluations to assess employees' performance and the agency's quality of assurance. Of those three states, the states conducted evaluations through a partnership with a university where the university provided extensive evaluations for competency development and transfer of learning. Lack of reliable, effective evaluation makes it difficult for agencies to understand the impact of their employees' work with vulnerable families, as well as hinders attempts by the agency to improve their services and outcomes.

Training evaluation can also provide insight into how well child welfare organizations use training. Brinkerhoff [20] argued for evaluation of training as an organizational strategy to gain insight on areas where larger processes of training are integrated with performance management and results. Such evaluation can aid agencies with identifying additional factors, outside of the training setting, which nonetheless may impact how employees transfer skills learned in training to their practice; for example, where observation and participation with other employees may develop and reinforce processes which support – or work against – skills learned in the training environment. Public child welfare agencies, often working under limited resources, have increasingly recognized that training implementation is not limited to curriculum design and instruction, but also encompasses how the employee applies the skills to the work environment and develops further professional skills within the organization [21].

Training evaluation provides opportunity to assess the success of training activities in relation to the employee's ability to transfer skills and knowledge outlined in training. Child welfare training requires evaluation to measure the impact of training on the employee's ability to perform tasks presented in training. Training evaluation provides child welfare agencies the ability to measure the training results in relation to the training objectives such as providing the employee with the skills to build relationships with a family, conduct assessments, and perform essential tasks for case planning.

The importance of training evaluation is especially true in child welfare training where knowledge gained in training is essential to maintaining the safety and well-being of vulnerable children. Trainings are important for implementing best practices in child welfare [11]. Also important is clarifying the changing and complex policies in child welfare [22].

### **Competency based child welfare training evaluations**

Training evaluations have focused increasingly on competence. In the field of human services, competence is defined as the practitioners' ability to interact with the environment, which involves the application of knowledge and skills to effect changes in clients and their situations that meet the standards of best practices [23]. In child welfare competency-based training programs, the emphasis is skill acquisition and application of skills to the workplace. This particular training approach stresses the importance of systematically applying learned skills in the work setting which matches the post-training work activity. Competency based training approaches focus on the identification of key practice skills and the application of those skills to the work environment, which make them ideally suited for conducting training evaluations. Researchers and practitioners have identified competency-based training as an effective method for promoting best child welfare practices [1,2,24]. However, current evaluation practices may neglect to consider how additional factors within the workplace, such as situated learning, serve as facilitators or additional challenges to the effectiveness of training.

Competency based training systems are described as a "systematic, planful and well-organized approach to training development and administration" [2]. Hoge et al. [1] support competency-based models that utilize multiple approaches including job duty and tasks specification; identifying knowledge and skill level and other necessary skills to perform tasks. The competency-based training system allows employers to evaluate core competencies [2]. Core competencies can be defined as those competencies which are essential to all child welfare professionals regardless of their unique job responsibilities and require specialized knowledge. Hoge et al. [1] support competency-based models that utilize multiple approaches including job duty and tasks specification; identifying knowledge and skill level and other necessary skills to perform tasks. Hoge et al. [1] suggest routinely measuring worker's specific job performance behaviors and linking the behavior to validate the competencies which are essential to task performance. Competency based training programs alleviate the ambiguity surrounding the knowledge and skills that child welfare professionals need to perform their jobs proficiently. However, workplaces contain employees of varying level of competence and skill mastery, and these employees' support of trainees may also involve transferring some part of their own understanding of competence to the trainee, even when that understanding is at odds with competence as defined by the training program and wider agency.

### **Transfer of learning**

To measure the actual training benefits, it is important to go beyond initial training reactions to evaluate participants and agency long-term benefits as result of the training, such as the employee's ability to transfer knowledge to their everyday work setting [25]. Similar to the business sector, child welfare agencies spend billions of dollars each year on training; however, estimates show that only 10% of training content is

transferred to the workplace [26,27]. Since the recognition of the transfer of learning problem, researchers have extensively studied transfer of learning [28]. The preponderance of empirical reviews on transfer of learning suggest individual characteristics, training design and delivery, and organizational climate as being significant factors to transfer content and skills to the workplace [29,30]. Similarly, Liu et al. found that the concept of training transfer in child welfare settings is conceptualized as having two dimensions: individual and collective factors [21]. The authors found a significant correlation between an individual's motivation for training and their efforts to transfer learning. After controlling for educational level and supervisory support, a culture of continuous, coworker supported learning had a greater impact on the employee's motivation for training and transfer of learning [21]. Comparably, Chiaburu et al. examined an individual's self-efficacy and motivation to transfer knowledge from learning to practice [7]. The authors found that those individuals who had a motivation to learn also had a strong motivation to apply their learning in their work, which facilitated successful transfer of learning.

Research on organizational and work environment factors consistently found that supervisory support during and after training positively influence transfer of learning [31]. In a two experimental group post-only design study by Antle et al. child welfare professionals received training with their supervisors on key casework skills (i.e., engagement, assessment and case planning) [31]. The authors found that child welfare professionals who received classroom training and supervisor support were able to transfer essential casework assessment and case planning skills compared to employees who received classroom training only. These findings were consistent with Lim and Johnson [32] who identified that discussions with supervisors on using new learning, supervisor's involvement in training, and positive feedback from supervisors were the forms of support most recognized by trainees as positively influencing their transfer of learning. Conversely, the authors found that negative factors which influenced employee's transfer of learning to their jobs included negative feedback regarding training from coworkers and supervisors, as well as the lack of a role model in the work environment.

Transfer of skills from training to the workplace is one of the most important indicators of training success. In recent times, child welfare evaluations have focused greatly on the transfer of learning within child welfare systems to improve quality of service and ensure a better return on training investment. Child welfare evaluative studies have identified a range of factors that have influenced the transfer of training, including learning readiness [33], level of education [29], motivation to attend training [3], organizational learning culture [34,35] and supervisor support [29,31]. In a study conducted by [31], child welfare workers were assigned to one of three groups: classroom training only, classroom training plus reinforcement, and no training. The classroom training plus reinforcement were trained with their supervisors on key casework skills such as engagement, assessment, case planning and ongoing casework. The findings indicated that the group who received training and additional reinforcement performed significantly better at the application of key

casework skills than either the training-only group or the control group. Further, the training-only group scored lowest of all three groups, suggesting that classroom training alone, without the additional contextualization and support of supervisors, can inhibit successful transfer of learning.

Another study of child welfare workers examined transfer of learning immediately after training and six months later [35]. Participants were asked to assess their acquisition of clinical practice learning outcomes, and several individual, training, and organization-related variables as potential predictors. Of the 367 workers who attended training, 129 completed the six-month survey. The results of the multivariate regression analysis indicated that only two individual-level variables were significant positive predictors of transfer of learning: the opportunity to use skills gained in the training on the job, as well as the support of peers once they returned to the job. One factor had a significant negative relationship with transfer of learning; participants who felt that they already knew most of the content of the training reported lower learning and application outcomes.

Several studies have explored the predictors of transfer of learning among human service professionals [3,4]. Using the Transfer Potential Questionnaire (TPQ), Lawler and colleagues [4] explored transfer of learning from training among public welfare professionals and child protective service workers. The authors found that TPQ significantly correlated with perceived transfer of learning for both public welfare and child protective services workers after controlling for participant satisfaction and perceived learning [4]. Curry et al. [3] examined perceived transfer of learning and its relationship to staff retention among 598 new child welfare workers at 14 child welfare agencies participating in a child welfare competency-based training and certification program. Logistic regression analysis found a significant relationship between transfer, support, and retention.

### **Situated learning**

Another possible factor in the training of child welfare personnel and their ability to transfer classroom learning to the workplace is the concept of situated learning. Situated learning, as originally proposed by Lave and Wenger [36] examines the development of professional competence as a social, as well as intellectual, process; the process of joining a community of practice through interaction with more skilled peers and supervisors, and participating in that community in ways that begin in a restricted context, and expand as competence is demonstrated and acceptance is gained. This participation, in addition to building the skills required to demonstrate competence, also helps trainees to construct an identity for themselves of belonging to a wider professional community, one in which they are invested and contribute to, in turn. In a child welfare context, this method of learning begins from the moment a professional is accepted to the community through a job offer and continues throughout training as the new professional is mentored by more experienced personnel and supervisors, both formally and informally. The new professionals observe their peers conducting work tasks, learn to distinguish and contextualize processes, and develop ways to speaking, acting, and thinking,

which integrate them into the community of practice. Learning, and the transfer of learning, thus can be considered a collective, multimodal activity which extends past the classroom or training room [37]. Part of this learning trajectory, and what is intended to facilitate the transfer of learning within the experience, is the necessity for the student or trainee to manipulate and engage with aspects of the work which are beyond the ability of classroom simulation, including the chaos and uncertainty which are inherent factors of the occupational context, particularly in a complex field such as child welfare [38]. Engagement with and acceptance by legitimate members of the profession is a vital part of the situated learning framework; supervisors and more experienced peers scaffold experiences to allow students to contribute in legitimate ways to the performance of duties, but also in restricted ways – restrictions which are lifted over time as the ability to apply higher-order knowledge in a practical setting is demonstrated and affirmed [39]. From a situated learning perspective, then, support by colleagues and supervisors is not just necessary to support individual motivation for learning but is a key factor in the transfer of learning process itself.

In a child welfare and human services context, situated learning takes place through the placement of trainees under supervisors and mentors who demonstrate how policies and procedures learned abstractly are applied in chaotic, often ambiguous contexts. De Saint-Georges and Filliettaz [37] adapted the sociological concept of a trajectory model to visualize a trajectory model for transfer of learning. In this model, a series of successive, overlapping tasks become an “arc of work”, the shape of which is depending upon the emergent actions of the practitioners. As it is an emergent model, it is largely unpredictable, and thus relies on the actors within the trajectory to be able to resolve ambiguity, accurately access complex events, and choose from series of potential options in a social context where other actors – having a different understanding of the trajectory – are also advocating for their own, preferred options. The trajectories constructed in a training room setting, and those found within the placement setting, are often qualitatively different, with the trainer taking a role of “trajectory leader” to develop a structured learning experience, while a placement learning experience may not have a strongly designated leader, or may have multiple leaders who attempt to shape contradictory trajectories. Rather than facilitating transfer of learning by aiding students in applying higher order knowledge to a practical setting, this can create a barrier to transfer as trainees attempt to navigate a complex setting.

Situated learning, but its nature, may be a facilitator of transfer of learning within the social work context. It can also be a hinderance as child welfare training may be hindered when trainees are exposed to multiple or contradictory trajectories of learning. As such, situated learning involves an element of social and professional acceptance, and the construction of a professional identity based on the practice and interaction with other experienced peers in the field [39]. In cases where the best practices or evolving procedures taught within the training environment oppose the practices witnessed in the field transfer of learning could be negatively

impacted as new professional struggle to reconcile different standards of practice.

## Methods

This study aimed to assess the long-term effectiveness of child welfare training on casework practice in a group of 297 participants across 10 training cohorts. This was accomplished through the development and use of a Level III evaluation, which focused on examining learning, training transfer, and training satisfaction.

### Training delivery

The Child Welfare Basic Certification serves as a mandatory internal certification process for all newly hired case managers which allow them to practice casework in the field. It is delivered by a qualified lead trainer and co-trainer from the university and consists of two phases of instruction. The first phase allows new workers to gain a better understanding of their role in child welfare through online work and job shadowing. The second phase consists of formal instruction in a classroom setting. The cumulative course content was designed to prepare participants to conduct thorough child welfare casework, including receiving intake reports, assessment of children's homes for safety threats and risk of maltreatment, and achieving placement goals for children.

Participants were first given three weeks to complete a set of online pre-work assignments using an online Learning Management System (LMS). The LMS is an organizational software application that aids trainers and participants throughout the training as the primary means of delivering course materials. Later, during the in-class component to the training, the LMS is also used to administer and record performance on assessments, quizzes, and a final exam. Pre-work assignments had participants shadowing experienced caseworkers and filling out topical questionnaires as the caseworkers completed common job-tasks such as parent and child visitations, foster care review board hearings, and adoptive home visitations.

Following the online pre-work phase, there was an in-class component to the training, which consisted of 19 non-consecutive days over the course of five-and-a-half weeks. This format balanced classroom time and on-the-job training implementation. Each of the training weeks focused on a particular learning topic for child welfare best-practice casework. These topics included: maltreatment and intake, investigation and assessment, treatment and family preservation, foster care, and adoptions. During the training, participant learning in these topics were continuously measured by the trainers using six performance assessments, four quizzes, and a cumulative final exam. These measures allowed the trainers to ensure that participants were learning all components presented in the training.

Participants' supervisors also participated in the training in an advisory role. Supervisors received a webinar designed to share information regarding the child welfare training, the requirements for successful completion of the training, and the responsibilities of the supervisor. Supervisors were

required to conduct four scheduled meetings with their respective training participant in order to discuss their growth while in training.

### Training evaluation design

The training evaluation design consisted of a demographic survey, a retrospective evaluation, and a six-month follow-up (post-post) evaluation. The demographic survey was administered to the participants just prior to the first day of in-class training. Participants received the retrospective evaluation directly after completing the training. Additionally, they received a post-post evaluation that mirrored the content of the retrospective evaluation. Participants' supervisors also received a retrospective and post-post evaluation that asked them to rate their corresponding workers' abilities.

Previous evaluations for this training followed a traditional pre, post, post-post design. This was replaced for the current study by a retrospective, post-post design. The retrospective evaluation was administered directly after the completion of the training. It asked participants to reflect on their knowledge and skills prior to receiving the training and compare them with their current knowledge and skills after completing the training.

The design was revised to address concerns that participants were overestimating their abilities when evaluated at the onset of the training as with the traditional pre/post, post-post design. This overestimation has been identified in past studies as response shift bias [40-42]. Some of these studies have shown that when both the pre/post design and the retrospective design are used alongside one another, the retrospective does a better job of controlling for response shift bias than the traditional pre/post design. The retrospective evaluation design has already been successfully implemented in education [43,44], health [45,46], and a number of other fields [47]. Additionally, results of retrospective evaluations have been shown to align closely with more objective measures of knowledge such as tests or performance assessments [48]. This design also ensures more complete pre and post response datasets as participants rate their pre and post training abilities at the same time at the end of the training. This improves on the traditional pre/post design where participants who do not complete the training, are not given the post evaluation, resulting in an incomplete dataset [49].

### Training evaluation content

As previously mentioned, most evaluative literature in child welfare has focused on Level III evaluations measuring transfer of learning within child welfare systems. The current evaluative study also focuses on evaluating learning, and transfer of learning in a child welfare system through the use of a competency-based evaluation with additional items aimed at assessing factors that affect transfer of learning in trainees.

**Demographic Survey:** In order to control for other factors that may impact training performance and job performance, it was necessary to capture some crucial demographic information about the evaluation participants.

The demographic survey asked participants to provide information regarding their academic and professional background. As it is not necessary to have a degree in social work in order to be a caseworker, it is possible that other degrees may have a more positive or negative impact on training and job performance.

**Retrospective Evaluation:** The retrospective evaluation, administered directly after completion of the training, consisted of three core components: competencies, transfer of learning, and training/trainer satisfaction. Participants were asked to rate their confidence in their abilities for the 12 competencies covered in the child welfare training, using a 4-point Likert scale. No identifying information was requested of the participants as to elicit honest responses. The evaluation stated that completion of the survey indicated consent in participation.

The benefits of this retrospective evaluation format have been discussed above. The competencies were developed by curriculum development staff alongside the trainers during the training development process. Some of these competencies included topics such as “the ability to build relationships with families, the ability to interview a family when assessing the safety of a child, and the ability to function as a case manager.” These same competencies were used in the post-post evaluation to measure perceived confidence in their abilities while on the job.

The transfer of learning component of the evaluation had participants rate their level of agreement, using a 5-point Likert scale, with statements regarding their level of support and training reinforcement from their supervisor and coworkers while on the job. Participants were also asked to rate statements regarding their application of the training to their work using the same 5-point Likert agreement scale.

The evaluation also asked participants to rate their level of agreement with a series of trainer satisfaction statements. Participants used a 5-point Likert scale measuring their level of agreement to rate statements such as “the trainer was knowledgeable about the training topics, and “the trainer communicated clearly and effectively.” Overall training satisfaction was then measured by asking participants to rate different components of the child welfare training. Using a 7-point Likert scale measuring satisfaction, participants were asked to rate training components such as audio visuals, online readings and assignments, and overall quality of the training. It is important to evaluate participant satisfaction with the trainers and with the training as a whole as this can positively or negatively impact their learning experience

during the training. If participants feel that the trainers were knowledgeable and practical in relating the training material back to their work, then they are more likely to have paid closer attention to the training. If participants are dissatisfied with certain training components such as the audio visuals or the participant manual, then they may miss valuable information being delivered in these unsatisfactory formats.

**Post-Post Evaluation:** The post-post evaluation content was designed to mirror portions of the retrospective evaluation content for comparative purposes. The post-post evaluation asked participants to rate their confidence level in their abilities, using a 4-point Likert scale, for the same 12 competencies after working for six months on-the-job. Additionally, the evaluation asked participants to re-evaluate their support system and their application of the training through by rating their agreement level with the same set of transfer or learning questions, which were included on the retrospective evaluation.

**Training Evaluation Delivery Methods:** The retrospective training evaluations were administered to participants using an evaluation link given to participants in their Learning Management System after completion of the training course. The Learning Management System is an online organizational tool that aids participants throughout their training. The post-post evaluation is emailed by the evaluation staff to training participants’ work email addresses.

## Results

### Sample

This study focused on evaluation data collected from 10 training cohorts. The Child Welfare Basic training program trained a total of 297 new workers. Each training cohort had an average of 27 participants. Of this population, 267 participants’ retrospective evaluation responses and 95 participants’ post-post evaluation responses were used for further analysis.

### Demographic survey

The results of the demographic survey provided useful information on the level of education, undergraduate area of study, graduate area of study, and prior child welfare experience of the training participants.

Education Level		
Level of Degree	Response Count (n = 297)	Response Percent
Undergraduate	244	82.2%
Masters	52	17.5%
Doctorate	1	0.3%
<b>Total</b>	<b>297</b>	<b>100%</b>
Undergraduate Area of Study*		
Major	Response Count (n = 297)	Response Percent
Criminal Justice	22	7%
Human Services	26	8%
Psychology	77	26%

Social Work	63	21%
Sociology	63	21%
Other	53	17%
<b>Total</b>	<b>304<sup>t</sup></b>	<b>100%</b>
<sup>t</sup> Includes double majors.		
<b>Graduate Area of Study</b>		
<b>Area of Study</b>	<b>Response Count (n = 53)</b>	<b>Response Percent</b>
Counseling	14	26%
Human Services	9	17%
Psychology	5	9%
Social Work	13	25%
Other	12	23%
<b>Total</b>	<b>53</b>	<b>100%</b>
<b>Prior Child Welfare Experience</b>		
<b>Location of Experience</b>	<b>Response Count (n = 295)</b>	<b>Response Percent</b>
With child welfare agency	20	7%
With other agency	70	24%
With both	12	4%
None	193	65%
<b>Total</b>	<b>295</b>	<b>100%</b>

\*Note: Response count and Response Rate may not reflect n due to double majors

**Table 1:** Demographic data.

The demographic survey was completed by 297 participants. Of the 10 cohorts presented in these results, some participants who completed the demographic survey at the beginning of the training did not successfully finish the training. This is the reason for the discrepancy between the demographic survey participants and the total number who completed the training and subsequent evaluations. Over 25% of participants majored in psychology at the undergraduate level. Of the 53 participants who received graduate degrees, 26% had an area of focus in counseling. Only 31% of participants had experience either with the child welfare agency or another child welfare agency, with the majority (65%) having no previous child welfare experience.

**Evaluation data**

As explained above, one of the benefits for using the retrospective evaluation design is that it offers a more complete pre and post response dataset for the evaluation data collected upon completion of the training (need to obtain reference at the office). This can be seen in the nearly complete dataset collected from the retrospective evaluation [49].

<b>Evaluation</b>	<b>Completed Evaluations (N = 297)</b>	<b>Response Percent</b>
Retrospective Evaluation	267	91%
Post-post Evaluation	95	32%

**Table 2:** Evaluation response rate.

The evaluation team successfully evaluated 91% of training participants in the 10 cohorts at the retrospective evaluation. The response rate for the post-post evaluation decreased to 32%, however, some of this was due to 30 undeliverable emails sent to participants via their work email address. These work email addresses are deactivated upon termination or resignation of the employee. As such, when factoring in these undeliverable email addresses, we obtained an adjusted response rate of 36% to the 267 successfully delivered post-post evaluations.

**Competency Ratings Results:** Mean Likert scale ratings were calculated for each competency for both before and after measures on the retrospective evaluation, and for the post-post evaluation. The results are as follows.

<b>Competency</b>	<b>n = 267</b>		<b>n = 95</b>
	<b>Before Mean</b>	<b>After Mean</b>	<b>Post-post Mean</b>
1. The ability to build a relationship with a family.	2.78	3.73	3.79
2. The ability to assess a family’s readiness to change by identifying whether or not the parents/caretakers are applying the skills they have learned in their treatment plan.	2.18	3.46	3.44
3. The ability to take decisive and appropriate action when a child needs protection such as determining if DSS should intervene on behalf of the child.	2.29	3.61	3.67
4. The ability to engage the family in a strengths-based assessment process using interviewing and critical thinking skills.	2.33	3.54	3.53
5. The ability to identify indicators and dynamics of maltreatment.	2.18	3.62	3.55
6. The ability to monitor visits between children who have been	2.53	3.71	3.83

removed from the home and their families.			
7. The ability to interview a family when assessing the safety of the child.	2.28	3.57	3.70
8. The ability to differentiate between safety issues and risk factors.	1.98	3.54	3.54
9. The ability to identify what the needs of the family are and to connect them with the appropriate community resources.	2.30	3.52	3.57
10. The ability to work with birth families to create a permanent plan for a child in an out-of-home placement.	2.07	3.43	3.41
11. The ability to function as a case manager.	2.47	3.59	3.60

\*Note: 1 = No Confidence to 4 = Full Confidence

**Table 3:** Child welfare competency mean rating\*.

The mean confidence rating for each of the 11 competencies increased from the before training to after training rating. This suggests that, overall; participants felt more confident in their ability to perform the tasks associated with their job as child welfare caseworkers directly after completing the training. A comparison between the retrospective evaluation competency ratings and the post-post evaluation, however, yielded notably different results.

The post-post evaluation means confidence ratings decreased for four of the 11 competencies when compared with the retrospective evaluation results. It is worth noting that on the 4-point Likert scale, no competency was rated below a three (some confidence) on either evaluation.

Three competencies average ratings increased from the retrospective to post-post evaluation. Participants were most confident in their “ability to monitor visits between children who have been removed from the home and their families” at the retrospective evaluation. This rating improved even more at the post-post evaluation suggesting that more participants were “fully confident” in their abilities for this competency.

This may be an indication that the time spent interacting with families reinforced this competency.

Many of the training competencies are aimed at imparting applicable job skills as opposed to strictly conceptual knowledge of abstract concepts; therefore, it is likely that participants needed to reinforce these skills in real-world scenarios in order to feel more confident. Participants' confidence in their “ability to interview a family when assessing the safety of the child” also increased; likely as a result of time to implement their interviewing skills on the job.

**Transfer of Learning Data Results:** Mean Likert scale ratings were also calculated for transfer of learning statements that had corresponding statements on the post-post evaluation. Means were calculated for both before and after measures on the retrospective evaluation, and for the post-post evaluation. Additionally, mean Likert scale ratings were obtained for a set of “one-time” transfer of learning questions employed either on the retrospective evaluation or the post-post evaluation. The results for both data are as follows.

Support System	n = 267	n = 95
	After Training Mean	Post-post Training Mean
My co-workers will support my attempts to utilize the training on the job.	4.34	4.12
My supervisor will support my attempts to utilize the training on the job.	4.46	4.09
Training Application	After Training Mean	Post-post Training Mean
Prior to attending this training, I heard that this training was worthwhile/valuable. [ <i>After working for six months, I believe that Child Welfare Basic Training adequately prepared me for my position.</i> ]	3.71	3.44
I have been able to apply the knowledge I gained from the training to my work.	4.39	3.91
As a result of this training, I am a more effective worker.	4.47	3.96

\*Note: 1 = strongly disagree to 5 = strongly agree

**Table 4:** Child Welfare TOL Mean Ratings\*.

The support system questions were rated using a 5-point Likert agreement scale as a part of the transfer of learning component of the training. None of the support system questions' average ratings were below a four, or “agree,” rating for the retrospective evaluation data. These ratings did decrease from the retrospective evaluation to the post-post

evaluation indicating that fewer participants strongly agreed that their support system would support their attempts to utilize the training on the job.

The training application questions were also rated using a 5-point Likert agreement scale as a part of the transfer of learning component of the training evaluation. These



statements were designed to assess overall implementation of training concepts while on the job. It is evident from the results that participants remained more neutral in their

perceptions of the applicability of training concepts to actual casework practice.

Items	n = 267
	After Training Mean
My supervisor is familiar with the content of this training.	4.36
My supervisor helped to prepare me for this training by discussing my learning needs and potential applications.	4.08
As a result of this training, I substantially increased my knowledge on these topics.	4.46
	n = 95
	Post-post Training Mean (n = 95)
I am satisfied with quality of training I received.	3.67
I am confident in my ability to perform all tasks required for my position.	3.99

\*Note: 1 = strongly disagree to 5 = strongly agree

**Table 5:** Child welfare one-time transfer of learning ratings\*.

The TOL of learning section also contained five items that were only asked on one of the evaluations depending upon the relevance of the question to the training process. At the conclusion of the training, participants generally agreed that their supervisors were familiar with the content of the training, that their supervisors helped to prepare them for the training by discussing their learning needs and potential applications, and that they substantially increased their knowledge on the [training] topics as a result of the training. After working for six months, participants were generally in agreement that they were satisfied with the quality of the training and generally agreed that they were confident in their ability to perform all tasks required for their position.

## Discussion

Evaluations are designed to determine the effectiveness of training. In a skill-based profession, such as child welfare, how workers learn the skills required to do their jobs is of particular importance. What do workers take from the training to the field? Does training alone prepare a skill-based workforce? If not, what additional supports are needed? This evaluation was designed to assess perceived confidence on a series of competencies and how those abilities were able to be transferred to the field.

The results of the evaluation indicate that confidence in the competencies did increase when workers reflected on their abilities before the training compared to after the training; however, there was not a significant increase in confidence six-months after the training. Ideally, using the knowledge and skills addressed in these competencies for six-months would improve perceived confidence in those abilities; yet, results from this evaluation showed no real difference. This suggests that new case managers need real world experience to fully gain confidence in these critical areas. An additional factor in this lack of significant increase of perceived confidence in the post-post evaluation could be in a developing understanding of the complexity of child welfare tasks, as well as influence from peers and supervisors as the workers learn to apply classroom concepts to the field of

practice. This is supported by the results of the transfer of learning questions.

The important component to this evaluation centres on the transfer of learning questions. The level of agreement regarding these questions all decreased at the post-post evaluation. This was especially true regarding the worker’s ability to apply concepts from the training to their work and their perception of the impact of the training on their effectiveness as a worker. The overall responses to these questions at the post-post evaluation do not provide strong support that training content is fully transferred to the field. In fact, in the lowest rated question, workers further remained neutral regarding whether or not the training prepared them for their positions. This is critical when considering that child welfare training is designed to prepare these workers to make life changing decisions related to child safety.

This evaluation design is not without limitations. One limitation of the evaluation results is the decrease in responses to the post-post evaluation compared to the retrospective post evaluation. This impacts the ability to better capture transfer of learning in the workforce. Frequent worker turnover as well as non-participation contributed to the low response rate. Both worker turnover and non-participation and evaluation may conceal significant trends in how these non-participating subjects gained or lost confidence in their skills; a loss of confidence in either their personal skills or institutional factors may be associated particularly with worker turnover, although this evaluation did not seek to capture that data.

It is also possible that skills and processes learned in training may be contradicted by what is learned via the community of practice. This is something the new worker must reconcile over time. That reconciliation may take the form of internalizing one set of skills as belonging to training, while the other set belongs within the field, which would be consistent with transfer of learning gaps noted in the literature and within evaluations of child welfare training programs. It may also decrease post-post satisfaction ratings with training over time, particularly in the area of perceived training effectiveness.

## Conclusion

Child welfare is a skill-based profession where both classroom-type training and on-the-job learning are crucial elements in the development of such skills. As indicated in these results, most of the new hires had no previous child welfare experience, making their training process a very important aspect of learning the how to practice child welfare and successfully meet the needs of vulnerable children and families. One of the recurring questions asked by agencies and training programs remains: How do you effectively train such a skill-based workforce, particularly given restrictions on resources, time, and personnel? The current evaluation as designed does not capture the true impact of situated learning for child welfare case managers, although it does raise some questions about the potential impact of situated learning, both as a facilitator to traditional classroom methods, and as an inhibitor. It is possible that future training for child welfare workers should make an effort to understand the impact of situated learning, particularly on transfer of learning.

The very best child welfare training can be designed and delivered and participants will still need to practice these skills in real-world scenarios in order to feel more confident in their abilities. When the practice as defined by their peers and supervisors contradict practices as taught in the classroom, it may take longer for workers to feel confident in their skills, or they may fail to transfer skills and practices that they do not witness being valued and used by peers. This is consistent with literature on situated learning, particularly for the more practice-oriented competencies, which are difficult to gain in a conventional training environment. This creates an opportunity to observe other professionals and become opportunities to practice and refine techniques over time.

Finally, supervisors then need to be adequately trained and prepared to take on that role and impact situated learning. This would be a shift in how workers are trained both in the classroom and in the field and in the role of a supervisor. Future evaluations should distinguish between how skills and confidence in abilities are developed from transfer of learning from training to the field as compared to situated learning in the practice setting. Such information and analysis could also inform how training is delivered and supported within a child welfare agency culture to adequately prepare new workers.

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