

CWAC minutes February 18, 2011

Members present: Kathy McElroy, Heather Jones, Deborah Eves, Janine Tondrowski, BJ Zarris, Allison Lowery, Nanette Bowler, Virginia Powell, Lori Battin, Suzanne Fountain, Rita Katzman, John Freeman, Elizabeth Hutchens, Melissa O'Neill, JoAnn Wilson-Harfst, Tania White, Lisa Linthicum, Sharon Harris, Vernon Simmons, Gary Cullen, Phyllis Grooms Gordon, Celeste Williams, Cheryl Williams, Charlotte McNulty, Kathy Sauter, Phyl Parrish, William Shackelford, Ernest Cradock

BJ Zarris welcomed those in attendance and members provided introductions. After a review of the agenda, Phyl Parrish reviewed legislation. The Department has been tracking 87 bills (35 are Family Services bills) since the start of this General Assembly session. The majority of those bills have been killed in committee. If anyone is interested in tracking bills, the website for the Virginia General Assembly's Legislative Information System can be found on line at: <http://leg1.state.va.us/>. Ms. Parrish mentioned several bills that were discussed during last month's CWAC.

Senate Bill (SB) 1037 – seeks to eliminate the foster care goal of Independent Living. This passed the house and is in senate subcommittee.

SB 1038 – addresses the decision making process for determining which school a child in foster care attends. There was a question about who is supposed to cover the cost of transportation. It is unclear at this time if CSA funds will be used to cover the cost of transportation at this time.

SB 1040/House Bill (HB) 1767 – seeks to clean up the definition of foster care placement and changes wording around background checks for adults in the household from “may” conduct background checks to “shall”.

SB 1178/HB 1984 – promotes kinship care and lists placement and service options.

SB 1170 – addresses Dept. of Juvenile Justice (DJJ) transitional plans for children coming out of DJJ to DSS custody.

HB 1679 - Authorizes the State Executive Council (SEC) for Comprehensive Services for At-Risk Youth and Families (CSA) to deny funding to a locality if services are not provided in compliance with applicable state law or policy or federal law. This bill also establishes timelines for development of policies governing denial of funding by the State Executive Council, and provides that the provisions of this act shall apply to services provided on or after July 1, 2011.

HB 1868 - Requires the State Registrar of Vital Records to make an adult adopted person's original certificate of birth available to the adult adopted person upon order of the Commissioner of Social Services or order of a circuit court. This bill also provides that if a circuit court corrects or establishes a date of birth for a person born in a foreign country during an adoption proceeding or upon a petition to amend a certificate of foreign birth, the State Registrar shall issue a certificate of birth showing the date of birth established by the court.

HB 2157 – addresses foreign adoptions and eliminating the need for children to be readopted in VA.

HB 2037 – addresses the use of the term “social worker” and requires that individuals using that term in written documents attach the appropriate “letters” after their title.

HJ632 - Directs the Joint Commission on Health Care to study the costs of Shaken Baby Syndrome/abusive head trauma in Virginia and identify best practices in reducing incidences.

Gary Cullen presented the draft version of the VDSS prevention survey. Information from the survey will be used to help create guidance as well as inform development of screens in OASIS

to capture information about prevention activities. A prevention committee has representatives from local departments of social services, VDSS staff, and community partners. The prevention survey has been vetted through the committee and is currently being piloted by local departments with representatives on the committee. Mr. Cullen is working on contracting with a company to deploy the survey online, with an anticipated launch date in March. The Child and Family Services subcommittee of the League is partnering with this effort and will be sending a letter out to all local department directors a few weeks before the survey goes live. Local departments will be asked to submit only one survey and directors will be asked to designate someone to gather the information that is submitted. The estimated time to complete the survey is around thirty minutes.

Definition of Prevention Services: Prevention can be seen on a continuum with “helping all children thrive” at one end and “helping children heal from the long term impact of trauma,” including prevention of additional trauma, on the other end. Services focused on helping children thrive are targeted to all families. Services focused on helping children heal are targeted to families where abuse/neglect is present and/or when out of home care has been utilized. For the purpose of the survey, prevention services are defined as services that prevent child abuse/neglect from ever occurring with any caretaker and/or the recurrence of child abuse/neglect with any caretaker and/or out of home care (including prevention of foster care).

The survey looks at early prevention services, prevention services in child protective services, prevention services provided in foster care (including IL services), and prevention services in adoption. The early prevention services if focused in three areas: prevention in the community, services to groups of parents/families, and prevention to individual families. The survey asks about community based resources utilized for the above prevention services. There is a question about facilitation of alternative living arrangements for children at risk of entering foster care and services (if any) that are provided after the alternative arrangements are facilitated. There are several questions about funding for prevention services, including if these cases are taken to FAPT. For more information about the survey, please contact Gary Cullen at gary.cullen@dss.virginia.gov.

Deborah Eves walked the group through the newest version of the State Data Profile. That profile can be viewed at <http://www.dss.virginia.gov/geninfo/reports/children/cfsr.cgi> under the 2011 section heading. Ms. Eves called it the “Point in Time Permanency Profile” because it shows the great work that Virginia has accomplished over the last few years. For Federal Fiscal Year (FFY) 2008 there were 6,935 children in foster care on the first day of the year and 7,206 children in care on the last day of the year. In FFY 2010 there were 5,739 children in care on the first day of the year and 5,332 children in care on the last day of the year. This is clearly a result of the Virginia Children’s Services Systems Transformation and all the hard work local departments have done on behalf of children and families in Virginia.

Overall, Virginia has made slight improvements in most of the composites. The Safety scores (Absence of Maltreatment Recurrence and Absence of Child Abuse or Neglect in Foster Care) remain above the national standards. Virginia has improved its overall score for Permanency Composite 1: Timeliness and Permanency of Reunification; however, the score of 120.5 is still not up to the national standard of 122.6. Virginia has consistently exceeded the national standard for Component B of this composite (Permanency of Reunification).

The standard for Permanency Composite 2: Timeliness to Adoptions is 106.4. Virginia continues to be below this measure at 86.4, however this is an increase over the last several reporting submissions and there are noted improvements among the components of this composite. Virginia is very close to meeting the national standards for Component A: Timeliness of Adoptions of Children Discharged from Foster Care. The national median for Measure 1 (exits to Adoption within 24 months) is 26.8% and Virginia is up to 26.3%. The Median length of stay for exits to adoption (measure 2) is 32.4 months and Virginia is at 32.9. Component B: Progress Toward Adoption for Children in Foster Care for 17 Months or Longer is where Virginia continues to struggle. Component C: Progress toward Adoption of Children Who Are Legally Free for Adoption has improved enough to pass the national median of 45.8%. Virginia is currently at 49.5% for this component. Kudos to all who have worked hard on focusing on finding permanent homes for children and getting them adopted.

As with Composite 2, Virginia has not yet met the national standard of 121.7 for Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time. As with Composite 2, Virginia has made improvement and is currently at 109.8. Composite 3 is the composite that all states struggle with the most. Virginia is very close to the national medians for both measures for Component A: Achieving permanency for Children in Foster Care for Long Periods of Time. The national median for Measure 1 (Exits to permanency prior to 18th birthday for children in care for 24 + months) is 25% and Virginia is at 22%. The national median for Measure 2 (Exits to permanency for children with TPR) is 96.8% and Virginia is at 92.2%. Virginia has lowered it score on Component B: Growing up in foster care and has surpassed the national median of 47.8% with 44.2%.

Permanency Composite 4: Placement Stability [national standard: 101.5] is the one Composite where Virginia had previously met the national standard but is no longer meeting that standard. Virginia's current score is 100.8. For each measure of this Composite, however, Virginia is above the national medians. Placement Stability is one of the more controversial measures within the Child and Family Services Review (CFSR). There are many who argue that while it is good to try not to move children from home to home, there are certain placement changes that are beneficial to a child and should not be counted against the state.

Ms. Eves and Rita Katzman were given the opportunity to attend a conference hosted by Casey Family Programs (CFP) focusing on providing suggestions on how to revamp the CFSR. CFP is working in partnership with the American Public Services Association (APSA) and the National Association of Public Child Welfare Administrators (NAPCWA) to listen to states and other child welfare representatives on how the CFSR works and how it doesn't work and create recommendations for change to be submitted to the Administration on Children, Youth, and Families (ACYF) by April 2011. While the conference was seeking to find consensus, that objective was not achieved. There were three areas that most of the people who attended could agree on. First, the CFSR has pushed child welfare reform forward across the nation. Second, the third party oversight provided by the current review system is critically important and should be retained in some form. Third, the purpose of the CFSR should be to drive continuous improved performance and this goal could be achieved in a more cost-effective way.

While there was no consensus among the states represented at this meeting, the group was able to come up with several recommendations that are divided into four general areas. The first area is measurement. Most states find that safety, permanency, and well being are the most important areas to be addressed. Again, most states agree that while well being is important, it is more qualitative, susceptible to greater subjectivity and includes areas over which child welfare has not control. There is a suggestion to increase the scope around the measures by including prevention cases and differential response cases. This would require a change to AFCARS reporting. There are suggestions to change the composite scoring, use longitudinal data, and have clear and comprehensive measures. There is a need for risk adjustment, meaning there is a need to take into account differences in children and families as well as in states. Racial and ethnic disproportionality is glaringly absent from the current review measures. As mentioned in the state data profile discussion above, placement stability is one of the more controversial areas of measurement. There are two suggestions for placement rates. One is that rates should be examined in terms of the percentage of children in placement in relation to the total population of children. Annie E. Casey and Kids Count currently do this. The second recommendation is that placement stability should examine the reasons for moves.

The second area of recommendations is around the federal process. There was consensus from the states in attendance to remove Juvenile Justice children from the sample. The argument is these children are a different population than most children who come into contact with child welfare. Overall, the group did not like the sample size of 65 for the review, but was not comfortable settling on a specific number at this time. For most states, 65 cases are not representative enough and the amount of work required to prepare for the onsite review does not compare to the small amount of information gained. There was much discussion around better coordination of the CFSR with other required reviews, such as the Title IV-E or AFCARS reviews. Each state is required to have a five year Child and Family Services Plan (CFSP) that is reported on annually. There was a suggestion to find a way to incorporate the PIP into the activities we report with the CFSP. This would lengthen the amount of time a state will have to show improvement and cut some redundancy. There was also much discussion around allowing states to use their existing Quality Assurance systems to conduct the case reviews for the CFSR. Several issues arose around this topic. There is a question of standardization of the systems and national comparisons as well as a potential undue burden on states. Many states believe there is a need for an effective and timely quality assurance feedback loop. There are very few states that had their PIPs approved in a few months time. Without a quick turnaround, many states feel as if they lose the momentum the onsite review stirs up. Finally, there is a recommendation to place less emphasis on the stakeholder focus groups.

The third area of recommendations is around scoring. There was debate on removing the national standards. The quality of data being collected through AFCARS is not uniform across states and often reflects data quality issues. Because of these issues, some feel there is not an accurate baseline available to set national standards. Instead of using national standards, states could be measured against themselves. Additionally, there was a suggestion of using a pass/fail system instead of the 95% substantial conformity. From round 1 to round 2 the substantial conformity rose from 90% to 95%. It is unclear how much higher states would be required to move to show conformity.

The last area of recommendations concern is the Program Improvement Plans (PIP). For the most part, states have found PIPs very time consuming, no longer relevant by the time they are approved, and not meaningful to the achievement of outcomes. The PIP becomes an activity check off rather than a work guide toward improvement becoming a matter of changing scores not practices. The two year time period is not sufficient to see results of long term change. There is a suggestion to lengthen the PIP timeframe to five years. Most states do not like the financial penalties associated with the PIP. While states would like to recommend doing away with the penalties, federal regulation requires them. All the information gathered from this conference will be written up and shared with ACYF by April 2011.

Rita Katzman presented information about the Report on Child Deaths Due to Abuse or Neglect in Virginia: State Fiscal Year (SFY) 2010. The report can be found at http://www.dss.virginia.gov/files/about/reports/children/cps/all_other/2010/fatalityreport_sfy10.pdf. During SFY 2010, local departments of social services investigated 78 reports of child abuse or neglect that involved a child fatality. Reports were founded for 44 children with one report pending and another on appeal. The number and rate of children who died as the result of child maltreatment increased from SFY 2009 to SFY 2010. While the number of founded fatalities for SFY 2010 increased from the previous year, it should be noted that the total number of reports accepted by local departments for CPS response also increased from 33,405 in SFY 2009 to 35,853, in SFY 2010. Virginia's rate of child death mirrors the national rate, which is an increase over past years. In SFY 2010, there was an increase in founded child deaths in three regions: eastern with 16, northern with 10, and piedmont with 9. The central and western regions stayed the same as the previous year. Children who died from maltreatment ranged in age from birth through age 15. Twenty six (59.1%) of the child that died were less than one year of age. Twenty two children were African American. Nineteen children were white. Two children were multi-racial and one child was Asian. Prior to SFY 2009, more white children died as a result of abuse or neglect than African American children.

Local departments found 63 caretakers to be responsible for the deaths of 44 children. Some victims were abused by more than one caretaker. Most caretakers were related to the victim or resided with the victim. Forty of the caretakers (63.5%) were biological, adoptive parents or step parents. Eight (12.7%) were out of family child care providers. Three of those were babysitters in non-regulated settings. Five were caretakers in a regulated setting, three of which were involved in one incident. Eight caretakers (12.7%) are the parent's paramour. "Other" caretakers include a foster parent, friends of the family in the home, other adult or unknown.

The most prevalent type of neglect is lack of supervision with 14 incidents related to this type. There were 6 founded cases from unsafe sleeping practices or co-sleeping with substance using caretakers. When not supervised, one child ingested illegally obtained methadone and another child was left on a daycare van. One child was abandoned immediately after birth. One child asphyxiated on a piece of plastic bag while left unattended. Two infants died from improper supervision by daycare providers who had too many children in their care. Seven children drowned when improperly supervised around a pool, lake or tub. Sixteen children (69.6%) died from injuries caused by shaking.

Of the 44 victims in founded CPS fatality investigations, there were 14 families with prior child welfare involvement or current, open child welfare cases. Prior involvement may mean that the abuser, victim, or siblings was previously or currently subject of a family assessment, investigation, or ongoing services or foster care services. It may also mean that the caretaker had prior involvement as a victim. Of the 14 families known to the system, four of the victims were reported as substance exposed infants at birth. Six of the 14 families had caretakers substance use or abuse (alcohol or drugs) noted as a factor in the CPS fatality investigation. Four victims had foster care involvement.

There are several strategies for prevention of abuse/neglect that the Department is currently working on. There is an abusive head trauma/shaken baby syndrome website that includes a printable brochure, audiovisual clips, links to national and state resources and supports, advise on coping with frustration and triggers, tips to soothe a crying child, and where to get help in Virginia. That website is http://www.dss.virginia.gov/family/cps/shaken_baby.cgi. Additionally, Structured Decision Making (SDM) will be implemented statewide by July 2011. SDM is a process that uses a set of research and evidence based assessment tools to help caseworkers make appropriate decisions at key stages in the CPS process. The model complements clinical judgment by providing structure to consistently assess response time, immediate safety and risk factors for children. The Department has developed an intensive, two day training for local departments to address CPS intake and safety and risk assessments using SDM. The training will begin in the late spring 2011 and will be held statewide. Foster Care program staff will examine current safety assessment tools and develop guidance and training for foster care workers regarding safety and risk assessments prior to reunification. The State Child Fatality Review Team is focusing its work on deaths to infants that are related to unsafe sleeping arrangements. The Department of Behavioral Health and Developmental Services (DBHDS) is creating a website on substance abuse screening and is working on a curriculum for home visitors for the Home Visiting Consortium. Finally, VDSS is endeavoring to implement a Strengthening Families Initiative working to help support families at every contact.

The meeting was adjourned at 1:00 pm. The March meeting is scheduled for Friday, March 18th from 10:00 – 1:00 pm at the Tuckahoe Branch Library. If there are agenda topics you would like to see added, please contact Deborah Eves (Deborah.eves@dss.virginia.gov).