

[June 2015]



Georgia Division of Family & Children Services



DFCS
RESPONSE TO

GA CAPTA PANEL 2014 RECOMMENDATIONS



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GA CAPTA Panel

Recommendation

To enlist the services of a communications and/or media relations expert to facilitate the development and implementation of an effective communications plan to improve the awareness, understanding and effective utilization of the CICC.

For communities, public awareness and education should include:

- When to make a report
- Options for making a report
- How to be prepared when making a report
- What they can expect after a report is made
- Additional resources available to them, such as free online mandated reporter training and the Prevent Child Abuse Georgia Helpline

For partners, who are professionals or represent professional disciplines that are most frequent reporters of child abuse and neglect, early engagement during the development, implementation, and evaluation of any policy or practice change that has the potential to impact shared responsibilities, as did the centralized reporting system, is crucial to ensure the changes do not negatively impact performance, and expectations are realistic and have the intended results.

DFCS Response

In 2014, Governor Nathan Deal created the Child Welfare Reform Council to review the child welfare system and identify gaps or areas of improvements needed. The Council named three major areas that once strengthened would result in a top-performing child welfare agency. These three areas formed the basis for the DFCS Blueprint for Change, the goal being that Georgia will have the best child welfare system in the world within five years. The Blueprint has three pillars:

- **Robust workforce development**
 - Staffing in local offices for Family Independence
 - Moving toward acceptable casework ratios in child welfare (1 to 15)
 - Mentoring supervisors
 - Improving compensation (based on proven competency)
 - Development of a career path
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- **Practice model**
 - Adoption of a practice model that will serve as the foundation to keep kids safe and strengthen families
 - Inclusion of guiding principles, vision and mission statement

- **Constituent engagement**
 - Creation of advisory boards at state and local levels
 - Organized “roadshows” to engage the public, local stakeholders and media
 - Build consensus and collaboration among partners, staff and stakeholders

In order to be successful at implementing any of the pillars, the agency must engage in a dialogue with the community about partnering together to make Georgia a place where children and families thrive. One of the first points of contact with the agency is the Centralized Intake Call Center (CICC) and our responses to those calling in; lays the foundation for future engagement that can result in satisfaction or dissatisfaction

When CICC was first rolled out statewide, little to no funding was available for a public campaign. A formal communication plan was developed with input from DHS/DFCS leadership that included internal and external strategies to educate staff and stakeholders on the transition to a 24-hour call center. While many of these strategies were implemented, more is needed to explain the purpose, process and functionality of the 24-hour CPS Intake Call Center.

Since the rollout in May 2014, CICC has been a topic of conversation at many state leadership meetings. Systemic issues such as the need to improve response time are discussed. Additionally, case-specific issues are managed with a collective review of the actions or inactions taken by CICC. Quality Assurance staff, regional field staff and appropriate CICC leadership review the case to determine if additional action is needed and/or if additional training and review is needed with CICC staff. Externally, information has been added to the division’s web-page, this was in response to last year’s CAPTA recommendation for CICC. This information can be found at <https://dfcs.dhs.georgia.gov/child-abuse-neglect>.

Additionally, throughout the year, the CICC Director and other CICC staff have participated in meetings with multiple stakeholders including Georgia’s association of school social workers, the Office of the Child Advocate staff, members of statewide law enforcement, and multiple school systems and other stakeholders at the local level to review the CICC process and answer questions around intake reporting and what to expect. Implementation of the CICC call center and the impact on Georgia has also been included in multiple media reports.

Looking ahead, efforts to educate the public and stakeholders will continue, particularly to promote understanding and effective utilization of CICC. Additionally, if funding allows, DFCS will seek consultation from a professional branding and PR firm for suggestions and insight on additional methods of informing the public of CICC.

Child Fatality Review Panel (CFRP) & CAPTA Maltreatment Committee Recommendations

1. Explore viable options for improving the public disclosure of the circumstances surrounding child fatalities, as intended by CAPTA.

During 2013 and 2014, the review of specific cases and aggregate data collected from child death reviews, suggested that fatalities where maltreatment may have been a contributing factor may have been overlooked or not reported.

2. To ensure that no maltreatment-related death is overlooked and under-reported, provide additional training to child death review teams on child abuse and neglect, including:
 - Definitions and terminology
 - Indicators (red flags) and standards from comparison
 - Resources, including access to child welfare history

3. Review definitions and terminology in Child Death Review Case Reporting System to identify potential inconsistencies with state (Georgia) and local policy or practice that may impact the quality and consistency of report and the assessment of data.

The Maltreatment Committee has suggested that state level aggregate data on maltreatment-related deaths is not sufficiently illuminating and has suggested that other options be explored to improve its ability to study maltreatment-related deaths in fulfilling its role as a CAPTA panel.

4. Explore additional options for enhancing the review of maltreatment-related deaths that will provide insight into the mitigating factors surrounding the death and help to evaluate the effectiveness of relevant child welfare policy and/or practice.

Prevention recommendations remain fairly consistent from year to year. In the 2013 CAPTA Panel annual report, several recommendations were offered related to improving the effectiveness of prevention recommendations at both state and local levels. The Maltreatment Committee would like to reaffirm these for 2014.

5. To improve prevention efforts, provide additional training to child death review teams on developing measurable and actionable recommendations that include:
 - Specific tasks, timeframe and entity or individual responsible for taking action
 - Objectives and expected results that are measurable
 - Identification of additional resource needs or barriers to overcome
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DFCS Response

1. One of the best options for improving public disclosure of the circumstances surrounding child fatalities was the change in the law in 2014 that allows for the disclosure of information that had previously been protected. This transparency should help to provide a light to the public regarding the work of DFCS in cases where DFCS has had prior involvement. DFCS attorneys must still redact some information especially while there is an open police investigation which accompanies most maltreatment cases. However, this change in the law has allowed for DFCS to provide more information to the public.

The second statement goes to our continued effort to include OCA in our case staffing of child deaths. Each case is assessed for possible maltreatment by OCA as well as an assessment of DFCS' response.

Additionally, we continue to reach out to the Child Death Panels, Public Health, Law Enforcement, and other entities to capture all relevant information that exists. According to ACF's NCANDS report, in 2009, Georgia reported 60 child fatalities. In 2013, that had increased to 90, a 50% increase in 4 years. We continue to try to expand our data collection but also recognize that we also need to remain focused upon those cases that CAPTA envisioned.

2. In coordination with OCA, CHOA, and the DFCS Training section, "Bruises, Burns, Broken Bones, and Beyond" was created and mandated for all frontline staff. This training, with the guidance of Dr. Jordan Greenbaum, a nationally recognized authority on child abuse, provides staff with an in depth look at maltreatment and how to more fully recognize it when at first it is not readily identifiable. All of the bulleted factors were included in the training

In addition, The Department of Human Services (DHS) hired a Medical Director to provide oversight and consultation regarding the medical and psychological needs of children in foster care. Dr. Johnson in partnership with state and regional level DFCS staff, Georgia Child and Adolescent Psychiatrists, the Department of Behavioral Health and Developmental Disabilities and the Department of Community Health, has developed and implemented a statewide behavioral health oversight and monitoring protocol. This protocol includes:

- a. Comprehensive and coordinated behavioral health screening, assessment and treatment planning for youth identified as having behavioral health and trauma-related needs. This includes psychiatric evaluation and treatment through psycho-pharmacology;
- b. A uniform psychotropic medication informed consent process, to include decision-making by youth, caregivers and other key stakeholders; and Medication monitoring.

Additionally, policy has been enhanced to ensure that definitions and terminology are easier to comprehend by frontline staff. DFCS recognizes that it must ensure continuity across the state in all local offices whenever a child investigation occurs.

DFCS RESPONSE (cont'd)

3. As stated above, the revision of policy has attempted to make definitions and terminology more consistent both in understanding and in application. With the implementation of the practice model over the next few years as a part of the “Blueprint for Change,” we fully expect to see great improvement within all areas of the Division. Because all work will follow the same approach, the information received should be far more consistent and answer the same questions.

For the first time this year, an epidemiologist will be used to help better derive meaning from the child death data and its significance to a wide range of child welfare concerns. The intent is that this will help close the gap between the Division’s reports and those of other reporting agencies.

4. The implementation of the Practice Model will help to standardize assessment skills of DFCS first responders across Georgia. Outcomes of investigations will be stated in a shared nomenclature devoid of local parlance. This should greatly improve the ability to recognize mitigating factors that may presently be missed due to the current lack of a consistent statewide approach.
5. The Office of the Child Advocate’s participation in the staffing of child deaths has helped to develop measurable and actionable recommendations. Each staffing is followed up by a next steps email outlining what further information is still needed or actions that are required. This has ensured that all lingering questions are answered thus allowing for a far greater understanding of both the events as well as possible gaps in practice. At the county level, one the next steps have been identified, each Regional Director is responsible for tracking and ensuring 100% compliance on follow up activities on CDSI cases.

Additionally, each month the State Office of the Child Death Review Team meets with relevant Section Directors as well as Leadership to look at trends, identify systematic issues, practice concerns, barriers, and possible gaps in the implementation policy. From these meetings, new training has arisen, recommendations for policy enhancements, and the sharing with frontline staff indicators for identifying possible red flags. As this effort grows, the promise that no child will have died in vain will become more of a reality.

Children's Justice Act Task Force (CJATF) Recommendations

Funding:

The task force recommended CJA awards for the following proposals that addressed CJA objectives identified in the 2012 assessment, including the task force priority on cases involving children with special needs:

- ChildFirst Multidisciplinary Forensic Interview Training (Cherokee Child Advocacy Center)
- World Day Conference (Child Advocacy Centers of Georgia)
- Emory Summer Child Advocacy Program (Barton Child Law & Policy Center, Emory University School of Law)
- CASA Advocacy Training Project (Georgia CASA)
- Annual Youth Law Conference (Office of the Child Advocate & Georgia Association of Council for Children)
- Juvenile Code Re-Write Checklist for Judges (Office of the Child Advocate & Georgia Association of Council for Children)
- Child Abuse Protocol Review and Revision (Office of the Child Advocate)
- Local Multidisciplinary Team Training on Victims with Special Needs (The Cottage)

Legislative:

1. The task force recommends that Georgia code definitions related to child abuse in 19-7-5 (reporting of child abuse), 19-15-1 (child abuse definitions), 49-5-40 (child abuse definitions) be updated to consistent with and/or cross-referenced to the definitions in 15-11-2 (Juvenile Code child abuse definitions).
2. The task force recommends that the Georgia code 19-15-2 (protocol committee on child abuse) be updated to reference the appropriate definitions in 15-11-2, to mandate a multi-disciplinary response to child abuse allegations, to require consistent participation (particularly by DFCS and local prosecutors/district attorneys) on child abuse protocol committees (CAPCs) and related multi-disciplinary teams (MDTs), to require that CAPCs meet monthly, and to mandate adherence to local child abuse protocols.

Policy:

1. The task force recommends that DHS/DFCS request that DHS/OIG-RCC and other state agencies with any child-caring staff or contractors or oversight of same (DBHDD, DCH, DECAL, DJJ, DOE, DPH) update their policies/regulations to specifically incorporate and/or reference appropriate child abuse definitions in 15-11-2.
2. The task force recommends that DHS/DFCS request that state agencies with any child-caring staff or contractors update their policies/regulations to specifically incorporate/reference 19-7-5 (reporting of child abuse) if they do not already do so (DHS/OIG-RCC, DBHDD, DJJ, DPH).

Child Abuse Protocol Recommendations:

1. The task force recommends that DHS/DFCS request that the Office of the Child Advocate:
 - a. Update child abuse definitions in the state's model child abuse protocol to incorporate/reference 15-11-2.
 - b. Clarify and communicate its collaborative processes for updating the model protocol, communicating protocol updates, providing training to local child abuse protocol committees, collecting and reviewing local child abuse protocols and annual reports.
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DFCS Response

Legislative:

The agency recognizes that inconsistent child abuse definitions may impact the reporting and response to child maltreatment and supports efforts to reduce such inconsistencies in the law. The agency also appreciates the benefits to children from multi-disciplinary and collaborative efforts and supports strategies to improve such processes and efforts. The agency plans to explore these recommendations in further detail with legal counsel and discuss submitting these recommendations to the Child Welfare Reform Council for future legislation.

Policy:

The agency understands the importance of consistent definitions of child abuse and neglect across the various agencies that have oversight of children. To that end, the agency began preliminary plans to coordinate discussions with other agencies regarding the task force's recommendations, specifically incorporating and/or referencing these code sections in their policies and identifying/addressing any barriers to implementing these recommendations. Already steps have been taken to clarify the meaning of these terms in new policy being distributed to the field. Additionally, as appropriate and timely reporting of abuse and neglect is critical to ensuring child safety, DFCS plans to incorporate mandated reporting requirements/training into the discussions to facilitate adaptation of the requirement of O.C.F.A. 19-7-5, and the benefit of incorporating such requirements in agency policies. In the next few months, the agency also has plans to initiate the launching of an ongoing state level meeting with the various identified state agencies to discuss joint efforts to identify and address child abuse and neglect allegations.

Child Abuse Protocol Recommendations:

The agency is aware that the Office of the Child Advocate has been focusing on improving child abuse protocols and supports such efforts for further improvement. The agency intends to explore this recommendation with the Office of the Child Advocate and to offer assistance in implementing this recommendation.

Child Protective Services Advisory Committee (CPSAC) Recommendations

I. Workforce Retention

- A. Establish a budgetary plan to increase worker salaries and compensation ranges by minimum of 11% over three years through merit based system prior to the implementation of any modification to the existing system of employee evaluation.
- B. Develop and implement a five-year plan to improve DFCS employees and their work. The following stakeholder audiences should be engaged in this planning process:
 - i. Georgia Legislators: At the local level, insure each legislator has visited the DFCS office in their respective districts within two years. At the state level, insure legislators understand performance standards to which the state is held accountable.
 - ii. Website and social media outlets: Use outside experts to manage social media.
 - iii. Media outlets: Strategically engage the media directly and through organizations such as the Atlanta Press Club.
 - iv. Nontraditional media outlets.
 - v. Faith and other community organizations.
- C. Utilize regional and/or county focus groups, focusing on specific environmental topics from the workforce survey:
 - i. Personal safety – both at the office and in the field.
 - ii. Chaotic work environments
 - iii. The juxtaposition of performance expectations/outcomes and concerns over the wellbeing of children served through CPS or Foster Care.
- D. Commit sufficient resources to develop and implement a robust support system for front-line staff, focusing on secondary trauma, grief, and stress reduction. Consider partnerships with local level community stakeholders, organizations, and faith groups in the plan.

2. Evaluate Policy Development and Implementation

- A. Utilize worker feedback to insure content of policy is understood and implemented as planned.
- B. Insure that feedback from county directors leads to policy change or modification when needed.

3. Utilize Feedback from Local Staff in Strategy Planning

4. Services

- A. Development of regional stakeholder work groups to inventory and evaluate community and professional service availability and potential public and private funding sources.
 - B. Utilization of the 2012 service array recommendations as an outline or template for the evaluation.
 - C. Creation of a regional strategic plan to improve service availability.
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Child Protective Services Advisory Committee (CPSAC) Recommendations (cont'd)

5. Continuous Quality Improvement

- A. CQI Teams become an integral part of the development and implementation of any practice model for DFCS.
- B. CQI Teams include external community stakeholders (actual stakeholders in service provision and outcomes)
- C. CQI Teams are included in a systematic process for strategy development, critique and evaluation and that an avenue of communication for such participation facilitates the flow of information from the local teams to DFCS leadership.

DFCS RESPONSE

Workforce Retention:

Workforce development and retention is one of the critical pillars in the Blueprint for Change. In a desire to understand the strengths and areas that need additional focus, the agency conducted a Culture survey of both Office of Financial Independence (OFI) and Child Welfare (CW) staff. The response rate for CW was 19% and 55% for OFI out of a total 6,000 staff. The survey revealed that staff value the importance of delivering outstanding customer service, feel duty bound to provide consistent and dependable work and are passionate about the need for mentoring and developing relationships. Areas to focus on include employee morale, improved customer service as well as training and performance management. The results of the survey provide data which will be used to inform efforts to improve staff satisfaction and retention.

An additional component of recruitment and retention is compensation. DFCS plans to increase compensation for caseworkers and supervisors to bring it more in line with average salaries for similar jobs. To ensure that children are best served, any salary increases will be based on merit and qualifications, rather than across-the-board.

Specific advancement will be determined and salary-increase criteria for caseworkers and supervisors. There will be allowance for advancement within each position, such that caseworkers will not need to become supervisors in order to advance in their careers if they prefer being caseworkers. DFCS will consider offering salary increases to those who:

- Obtain additional credentials, or
- Obtain certification in a specific skill area, such as:
 - Intimate partner violence,
 - Substance abuse and addiction,
 - Commercial sexual exploitation of children, or
 - Mentoring and coaching.

DFCS RESPONSE (cont'd)

DFCS also plans to implement a system similar to the “Just Culture” model, which increases employees’ confidence in their work and reduces fear of retribution for innocent mistakes.

Panic button technology is being developed with Georgia Tech for caseworkers in order to improve their safety in the field and help them feel secure.

Safety training sessions will be conducted to teach caseworkers how to verbally deescalate tense crisis situations (such as verbal judo or crisis intervention training).

There will be the development and implementation of a statewide public relations campaign to raise awareness about DFCS success stories and encourage community support for DFCS’ work. Also, people from the community throughout the state who care about the child welfare system will be brought together to support its goals and staff, and to help educate others on the system.

Evaluate Policy Development and Implementation:

DFCS acknowledges the value of engaging internal and external stakeholders in the policy development process. Currently, workgroups and surveys are utilized to obtain feedback from internal and external stakeholders during policy development. We are actively involved in applying the Continuous Quality Improvement (CQI) process designed specifically to enhance the policy development and implementation. This process includes, but is not limited to, adopting the following:

1. Creation of a Child Welfare Policy Advisory Committee aimed at soliciting input on the development and administration of child welfare policies, programs and practices. Members shall include representatives of other state agencies, representatives of professional or civic or other public/private organizations, and recipients of service (foster parent, adoptive parents, etc.), youth, etc.;
2. Development of a feedback loop to provide comments back to stakeholders related to how their input was utilized; and
3. The implementation of a state-wide protocol on policy dissemination and transfer of learning to the field.

Utilize Feedback from Local Staff in Strategy Planning:

Implementation of major initiatives will be carried out using the principles of Implementation Science. One of the critical components of this structure is assessment and engaging staff in the field in planning for changes, especially those that impact service delivery, in recognition of this, as the agency prepares to implement the Blue Print for Change, a concerted effort has been made to gather input from the field and from external stakeholders and customers about their vision of a “state of the art child welfare system.”

DFCS RESPONSE (cont'd)

Continuous Quality Improvement:

Since the submission of the Child and Family Services Plan, the Child Welfare Continuous Quality Improvement (CWCQI) Unit has been evaluating the current status of statewide CQI efforts and refining its structures and processes for achieving continuous quality improvement at all levels of the agency. It was during this time that the 2015 CWCQI Unit Plan was developed. The plan has specific goals and outcome measures, as well as the development of specific protocols and processes in order to increase the capacity of the CWCQI Unit and all CQI teams (a total of 17) to support statewide continuous quality improvement efforts. In addition, the CWCQI Unit has developed an internal CQI Implementation Team to assist with the development and implementation of objectives and interventions included in the Unit Plan. This team even includes an external DFCS stakeholder representing both Georgia CASA and the Citizen Review Panels. The formation of the CQI Implementation Team has allowed the CQI Unit to model how to effectively utilize the CQI process to drive change and improvement. The purpose of the CWCQI Unit Plan is to improve both the health and function of all CQI teams so that they are prepared to implement drive continual practice improvement within the agency including the administration of the upcoming CFSR Program Improvement Plan.

The CQI unit is comprised of 15 Regional CQI teams well embedded into practice at the regional level. All members of the regional teams are made up regional staff involved in child welfare practice both on the frontline and leadership level. A majority of the 15 Regional CQI teams have experienced some achievements and accomplishments. Most of what has been achieved has related directly to establishing consistency and stability among team membership, as well as obtaining buy-in from regional staff and leadership regarding the utilization of the CQI process to solve complex problems that are region-specific. With many of the recent changes and improvements that have been implemented within the CWCQI Unit, there is anticipation that the Regional and State level teams will begin to experience achievements and accomplishments that are directly related to practice improvement.

Services:

Regions 1 and 3 have an organized group of regional stakeholders. It is called the NW GA SOC Council and is a diverse body of representatives comprised of judicial leadership, child serving agencies, parents, caregivers, youth, regional and community leaders. The Council is guided by an Advisory Council which meets monthly and is led by a Juvenile Court Judge and Regional State Agency head (Bartow Juvenile Court Judge and DFCS Region 3 Director). It is divided into nine sub-councils which meet monthly and lead by Juvenile Court Judges. The Council meets together with all members three times a year. Each sub-council has anywhere from 20-30 members and our regional tri-annual meetings have about 120-160 participant. The vision of the council is that all children and caregivers in the North West Georgia 17 county region, has access to timely and appropriate interventions and supports that help children function normally in their families and in their communities.

DFCS Response (cont'd)

To meet the vision, the council is continuously assessing and evaluating existing resources within the region as well as working as a collective to develop or improve services to families and children. There are regional initiatives and each sub-council has additional work that focuses on their sub-council area. Currently, regional initiatives include: resources for CHINS population, development of foster homes capable of meeting increased mental health needs of foster children, BH counseling in schools. In addition, the region is partnering with Casey Family Programs on a Region of Hope project which focuses on communities within the region who have a high number of foster care removals to develop a structured approach to strategic planning with these communities. Projects in the past have included development of web based inventory of behavioral health services, development of in home care coordination for children in need of mental health services and development of Sobriety Treatment Recovery Teams (START) for DFCS clients with substance abuse addiction.

Continued Collaboration:

The Division values its partnership with the CAPTA Panel as we work together to improve child welfare practice here in Georgia. Moving forward there will be quarterly meetings to review and provide updates on the recommendations provided in this report. The first quarterly meeting will be held in November.

State Office leadership will be attending the Panel's September 17 retreat. A portion of the agenda will be dedicated to education on the intake process and laying out a training schedule for the remaining CPS issues (Investigation process), identified during the meeting with the Division.
