Child Abuse Prevention and Treatment Act
Report of the Child Abuse and Neglect Advisory Committee
Citizen Review Panel
May 2024

Background

The Child Abuse Prevention and Treatment Act (CAPTA) mandates the establishment of citizen review panels (CRP) to examine child protective services policies and procedures. CRPs may also review specific child protective services cases to evaluate key concerns such as the Child Protective Services (CPS) programs' compliance with the State Plan, coordination with Title IV-E foster care and adoption programs, child fatalities and near fatalities, as well as other concerns the panel considers important to the CPS program. This report serves as the annual review from the Child Abuse and Neglect Committee of the Family and Children's Trust Fund (FACT), one of Virginia's three citizen review panels.[1]

The Family and Children's Trust Fund (FACT) Board was established by the Virginia General Assembly in 1986 through enactment of § 63.2-2102 of the Code of Virginia. Created as a public-private partnership with the capacity to raise funds for family-serving programs,

[1] Pursuant to sections 106(c)(4)(A)(i) and (ii) of the Child Abuse Prevention and Treatment Act (CAPTA), each panel must evaluate the extent to which the State is fulfilling its child protection responsibilities in accordance with its CAPTA State plan by: (1) examining the policies, procedures and practices of State and local child protection agencies, and (2) reviewing specific cases, where appropriate. In addition, consistent with section 106(c)(4)(A)(iii) of CAPTA, a panel may examine other criteria that it considers important to ensure the protection of children, including the extent to which the State and local CPS system is coordinated with the title IV-E foster care and adoption assistance programs of the Social Security Act. This provision also authorizes the panels to review the child fatalities and near fatalities in the State. https://www.acf.hhs.gov/cwpm/public_html/programs/cb/laws_policies/laws/cwpm/policy_dsp_pf.jsp?citID=70

the FACT Board has the stated mission to amplify community programs and initiatives focused on the prevention and treatment of family violence and the protection of children through funding and awareness. The vision of the Board is a world in which no one in Virginia experiences family violence and all children are safe. FACT defines family violence to include child abuse and neglect, domestic violence, dating violence, sexual assault, and elder abuse and neglect. Through its trust fund, supported by donations from a variety of sources, the FACT Board provides grants to financially support programs that serve Virginia families throughout the Commonwealth.

The FACT Board is governed by a 15-member Board of Trustees appointed by the Governor.[2] The Board meets quarterly and members serve a maximum of 2 four-year terms. The Commissioner of the Virginia Department of Social Services (VDSS or the Department) serves as a permanent member. In 2012, the Governor's Advisory Board on Child Abuse and Neglect (GAB) was moved under the purview of the FACT Board, with the citizen review panel functions of the GAB being assumed by the Child Abuse and Neglect (CAN) Committee established by the FACT Board at that time. The CAN Committee meets quarterly.

The CAN Committee appreciates the response sent by Shannon Hartung, VDSS Child Protective Services Program Manager, on October 20, 2023. VDSS addressed each of the six areas of concern the CAN Committee submitted and the FACT Board adopted in March of 2023. This year, CAN Committee members will continue their focus on three of these issues. Additional context for each area is provided below.

[2] Effective July 1, 2024, FACT Board membership will be amended: 6 members will be appointed by the Governor, 5 members by the Speaker of the Virginia House of Delegates, and 4 by the Virginia Senate Committee on Rules. The Virginia Department of Social Services' Commissioner will become an *ex officio* member of the FACT Board. *See* 2024 *Acts of the Assembly* Ch. 427 (S.B. 683).

Preamble: The Need for Empirical Data

The CAN Committee meets four times each year and devotes part of each meeting to updates from Department Staff on issues identified in these reports. Over the course of the next year, we ask the Department to provide updates on Family First Implementation at two of those meetings, on child death and fatality review findings and recommendations at one meeting, and on the health and capacity of Virginia's child welfare workforce at one meeting.

Going forward, we want to work with VDSS in three other ways, all ultimately for the purpose of improving child welfare policies and practices in Virginia. We think of these as cross-cutting threads that influence all concerns outlined in this report. First, we ask that existing data collected continue to be presented to the Committee, such as local department and call center staffing, hotline response, and reports from child death reviews. Second, we ask that more comprehensive data be presented that includes outcomes, impacts, and implications of policy and practice for child safety and well-being. We are particularly interested in outcome data with regards to Family First implementation and helping to identify appropriate outcome measures and goals. Finally, we request assistance with finding ways to learn about what's happening in local communities and departments in each of these areas. What can we learn from those who work directly with children and families?

1. In-Home Services and Family First implementation.

Family First is still a relatively new federal law that prioritizes keeping children who are adjudicated as at risk for abuse and/or neglect safely at home with family, with kin and community, or with foster care as a placement of last resort. Federal funding is available to support these services. Over the past few years, VDSS has continued to implement federally mandated Family First legislation through the development of policy, guidance, and training, as well as in discussions with local departments. Members of the CAN Committee have learned about and discussed this implementation with members of the

Department a great deal over the past few years. The momentum in moving this initiative forward in Virginia is both substantive and appreciated.

Virginia is now a few years into this implementation process. This year, we ask the Department to provide CAN Committee members with aggregated data that describes (1) the numbers of child abuse and neglect cases resulting in in-home services, in placement with kin or kith, and in placement in foster care; (2) descriptions of services and support provided to children and their caretakers in each type of placement; (3) lengths of time from case opening to case closing; and (4) any measures available for assessing long term stability and safety for the child. It would be helpful to have a comparison of these measures for a fiscal year before implementation of Family First with a recent year after implementation. Such data would provide an overall picture of how child welfare and protection work is changing in Virginia.

To complement this big picture providing data trends, we ask the Department to provide CAN Committee members with specific case studies to illustrate how a local department implements Family First policy in a child's and a family's life. It is important for the group to understand how individual case work proceeds across the state. We expect that Virginia communities vary in their service capacity and resources and want to read and hear about specific cases from several localities.

2. Recruitment, compensation, and retention of child welfare professionals and the child abuse and neglect hotline staff.

CAN Committee members support VDSS' efforts to buttress the child protection labor force. We agree that a fully responsive child protection system needs case workers who are trained for the work, receive salaries and benefits appropriate to the education and skills required to undertake this difficult and stressful work, and a strong sense that their efforts on behalf of the children and families they work with is understood and valued by their community. The Department's Office of Trauma and Resilience Policy has shared

preliminary findings from focus groups with and surveys to child welfare workers in Virginia that confirms this need unequivocally.

There is still much work to be done to build this capacity and labor force in Virginia. As Department staff has reported to us, many local departments of social services in Virginia continue to be short-staffed, even when there are open positions and funding available for the positions. There are problems with high turnover, burnout, low pay, and low morale among child protection employees and, as a result, communities cannot fully respond to child safety needs in their localities. And while data provided to CAN Committee members this past year shows that the Department is making progress in reducing wait times and dropped calls on the hotline, additional support is needed to improve response times for children who may be in danger.

CAN Committee members ask that we continue this conversation in the coming year. Data and information you provide will help the CAN Committee and the FACT Board to advocate and educate for additional funding and resources as appropriate.

3. Regional child death review teams.

There are five regional child fatality review teams in Virginia. The teams may review cases where the decedent child or family was known to a local department and when the death was investigated for suspicion of abuse and neglect. The teams collect case level data and generate recommendations based on trends that they see in these cases; this information is collated in an annual statewide report by the Department.

Staff from the Department have described changes to the organization and efforts of these teams, which are designed to create more systematic reviews across the state. We look forward to hearing about improved reviews, seeing the data, and reviewing recommendations. For our own purposes, CAN Committee members want to use this information, along with that provided by the Virginia Office of the Children's Ombudsman, to consider new insights into the treatment and prevention of child abuse.

As outlined in the Child Abuse and Prevention Treatment Act, we ask that the Department bring case studies from child death review teams to CAN Committee meetings so that members can understand the dynamics of child abuse and neglect in all deaths potentially related to child abuse or neglect, such as, accidental drowning, sleep-related suffocations, and abusive head trauma. Actual cases of child death will also aid CAN Committee members in understanding risk and protective factors, local efforts in working with at-risk children and families, and potential prevention strategies.

Conclusion

Thank you for engaging with CAN Committee workers in this effort. We look forward to working with you on these issues and concerns in the coming year.

CASA/CJA Advisory Committee Citizen Review Panel 2024 Recommendations

Prevention/FFPSA

The Virginia Department of Social Services (VDSS) should continue to focus timely prevention efforts that ensure safety and well-being of the child and support families in ways that provide support and enhance timely permanency. This includes providing services to prevent removal, and services to support adoptive and kinship families. VDSS should continue to build capacity for evidence-based practices and services and then work toward enhancing a robust and qualified workforce. Services should include respite for all members of the family including siblings in the home. Primary and secondary prevention efforts should focus on avoiding penetration into and continued need for tertiary services. Development and integration of best practices of the Science of Hope in working with children and families. Include education stability as a prevention strategy.

The VDSS should develop mechanisms for reporting on its prevention services model. This would include establishing criteria and definitions of the various levels of prevention interventions. Consideration should include reports on the number of prevention (pre-court intervention) cases served, length of time cases are served in prevention, outcomes of prevention efforts, interventions and services provided, how many prevention cases were non-compliant, and what steps the Department took when cases were non-compliant.

System Improvement

The Virginia Department of Social Services (VDSS) continues to focus on family engagement practices as a cornerstone of the child welfare system. To implement family engagement practices effectively, more trained workers are needed. Efforts should be expended to explore interagency collaboration regarding delivery of case management services and implementation of lived experience navigator services to guide parents. VDSS has experienced the impacts of a reduced workforce due to the pandemic, fiscal constraints, and vicarious trauma. Important to retain workers to maintain uniformity and strengthen the workforce.

VDSS should encourage local Departments of Social Services (LDSS) to improve communication and collaboration across jurisdictions when investigating child abuse and neglect and participate in a local multidisciplinary team (MDT), if available. Per Virginia Code § 15.2-1627.5, LDSS-Child Protective Services Unit representation is a required member on a local MDT.

VDSS should encourage LDS agencies to improve cross systems collaboration to support thorough investigations of child abuse and neglect. This should include cross

systems joint training opportunities. Upon commencement of dependency proceedings, VDSS should encourage inclusion of attorneys, relatives and other actors in service planning (i.e., family partnership meetings and team meetings).

The pandemic presented numerous challenges, especially for frontline workers. The VDSS should continue to examine the preparedness for the COVID19 pandemic and begin planning for the next pandemic that will inevitably strike. Included in this planning should be helping teachers and other mandated reporters to identify child abuse and neglect in a virtual environment. VDSS should continue to study trends in the reductions of the number of child abuse and neglect complaints and determine if the reduction in complaints trends actually equates to a reduction in harm to children.

VDSS in-home services practices align CPS ongoing practice, prevention services, and the implementation of the Family First Prevention Services Act. The Advisory Committee requests continued collection of data and information on the path to permanency for children and families involved in Alternate Living Arrangements.

As the Virginia Department of Social Services builds the new Child Welfare Information System (CWIS), the Committee requests updates and asks the Department to seek stakeholder input into the development of data points for the system.

The Virginia Department of Social Services will provide the Committee with a report on the impact and utilization of the Virginia Heals project.

Diversity, Equity and Inclusion in Child Welfare

The Virginia Department of Social Services (VDSS) should ensure equity in its response to child welfare including examination of data through an equity lens. The examination of child welfare practice should include practice implications for children and caregivers of color, children and caregivers that identify as LGBTQ, and children and caregivers with disabilities.

VDSS should ensure voices with lived experience are included in decision-making and policy considerations, with special consideration given to parents and caregivers.

The Committee would like an update on the impact of halting the Qualified Residential Treatment Placement (QRTP) designation for residential setting. The committee would like an update on the number of children in hospitals, hotels and offices (safe and sound task force efforts).