



Department for Children and Families–Family Services Division

Child Welfare and Youth Justice

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DCF Family Services Director of Operations

Family Services Division

● Primary Service Areas

- Child Abuse and Neglect Intake/Emergency Services
- Child Safety Interventions – Investigations and Assessments
- Family Support Services to High Risk Families
- Juvenile Probation
- Children in Custody
 - Abuse/neglect
 - Delinquency
 - Child Behavior

**Our
Primary
Focus:
Child
Safety**



**Engaged relationships are a tool to
increase child safety.**

Family Services Practice Model

Mission: *We partner with families and the community to promote safety, permanence, well-being and law abidance.*

Family Services Practice Model

We Achieve Our Mission By:

Safely stabilizing and preserving families;

and if that is not possible;

Safely caring for children/youth and reunifying;

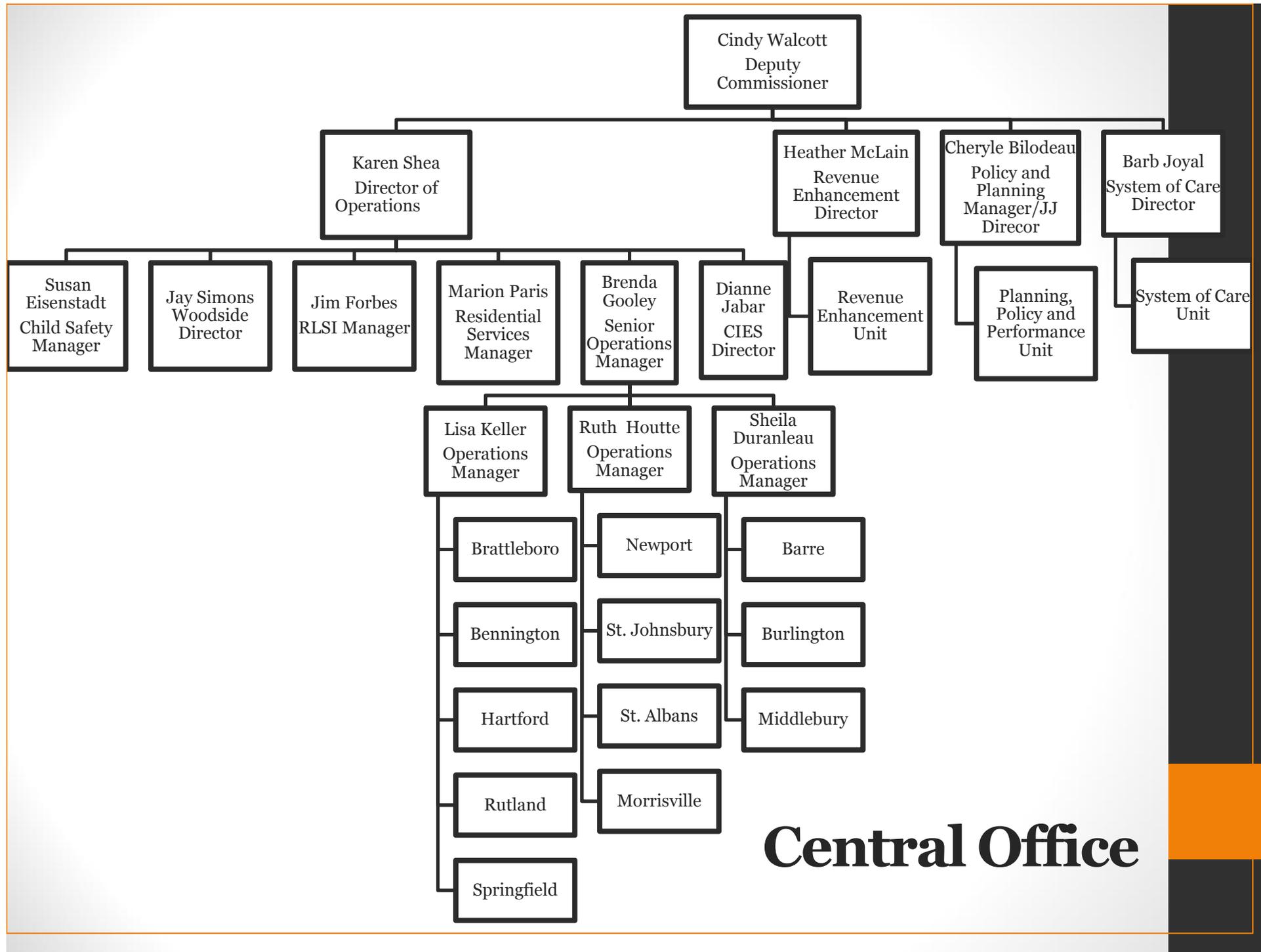
and if that is not possible;

**Safely supporting the development of permanency and
lifelong connections for children/youth**

Family Services Division



- 12 District Offices
- Central Office
 - Two direct service units – Centralized Intake and Emergency Services and Residential Licensing and Special Investigations
 - Provides support to the field, oversees policy and practice, manages budgets, grants and contracts, maintains communication with federal partners
- Woodside
 - In Feb 2011, enabling legislation was passed to allow the re-purposing of Woodside as a cost effective alternative to hospitalization
 - Woodside is no longer a detention facility and treatment is provided to all residents from the first day



Central Office

Central Office

Operations

- Direct supervision of District Directors and statewide functions

System of Care Unit –

- Supports quality service delivery through the contracted system of care, including foster care, kinship care, adoption, residential care and community services.
- Includes adoption unit, with 1900 children receiving adoption subsidy, and post-adoption supports through the Vermont Adoption Consortium. Also, the Vermont Adoption Registry.
- Integrated Family Services

Central Office

Revenue Enhancement Unit – focus on revenues, expenditures, grants and contracts.

Policy, Practice and Performance Unit (PPP)

- Planning (state and federal)
- Policy development
- Practice supports
- Continuous quality improvement and assurance
- Child and Family Services Review

Central Office Direct Services

Residential Licensing & Special Investigations (RLSI)

Licensing of foster homes and residential programs:

- 1000+ currently licensed foster homes
- 500+ foster home applications resulting in 250+ new licenses
- 40+ Residential Treatment Programs
- 12 Commissioner Designated Shelters
- 13 Child Placing Agencies (foster care and adoption)
- 150+ regulatory interventions

Child abuse investigations in homes, facilities regulated by DCF, and schools:

- 200+ child safety interventions

Central Office Direct Services

Centralized Intake and Emergency Services Program (CIES)

- 24/7 call center handling Child Protection Intake
- After hours telephone response to emergencies concerning children in custody, child abuse, etc, with responsibility to call out local staff when necessary.
- Child protection registry checks.



19,292 calls in 2014

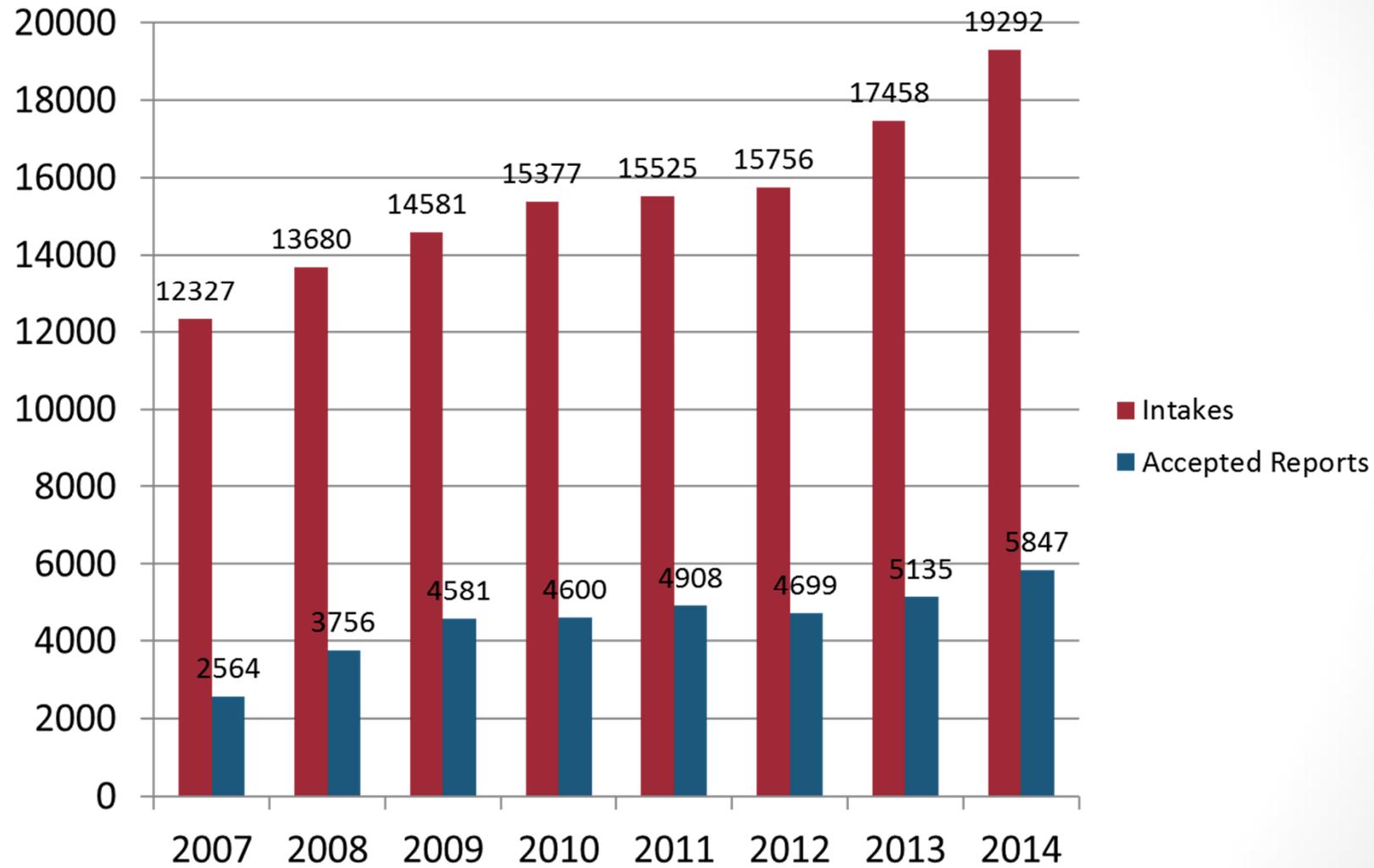
Governing Statutes

- Title 33, Chapter 49
 - Child Abuse and Neglect Definitions
 - Child Abuse Investigation and Assessment Requirements
 - Administrative Appeal Processes
 - Disclosure of Information
- Title 33, Chapter 51, 52, and 53
 - Judicial Procedures Related to Children in Need of Care and Supervision (CHINs)
- 15a VSA on Adoption Proceedings

Decision Point: Is this a valid allegation?

- Decision made by Centralized Intake Supervisor using existing statute (Title 33, Chapter 49), rule and policy.
- A report is considered valid when information suggests that:
 - A person responsible for the child's welfare has harmed or is harming the child by :
 - a. physical injury;
 - b. neglect;
 - c. medical neglect;
 - d. emotional maltreatment; and/or.
 - e. abandonment of the child.
 - The person responsible for the child's welfare has, by acts or omissions, placed the child at significant risk of serious physical harm.
 - Any person who, by acts or omissions, placed the child at significant risk of sexual abuse.
 - Any person has sexually abused a child.

Centralized Intake and Emergency Services



Child Abuse and Neglect: Investigations & Assessments

Specialized staff conduct child abuse investigations and assessments (often referred to as child safety interventions), with primary focus on the immediate safety of children.

- Districts conduct most child safety interventions
- DCF Residential Licensing and Special Investigation Unit focuses on regulated facilities and schools.



5,847 in 2014

What is Differential Response?

- The first and most important focus is always **child safety**
- Differential Response does not change this
- Differential Response is a formal response to a concern of child abuse or neglect – it allows for greater customization based on nature of the allegation.

Decision Point: Track Assignment

- Title 33, Chapter 49 Investigation - Required for “substantial child maltreatment, defined as:
 - Sexual abuse by an adult;
 - Abandonment;
 - Child fatality;
 - Malicious punishment; or
 - Serious physical injury
- Chapter 49 acceptance requires that an incident of abuse / neglect / omission of care creating risk has **ALREADY** occurred

Decision Point: Track Assignment

- Title 33, Chapter 49 Assessment – All other valid allegations. The decision to conduct an assessment shall include consideration of the following factors:
 - the nature of the conduct and the extent of the child's injury, if any;
 - the accused person's prior history of child abuse or neglect, or lack thereof; and
 - the accused person's willingness or lack thereof to accept responsibility for the conduct and cooperate in remediation.
- Chapter 49 acceptance requires that an incident of abuse / neglect / omission of care creating risk has ALREADY occurred

Decision Point: Track Assignment

- Title 33, Chapter 51 sets forth Powers and Duties of the Commissioner that include:
 - (1) To undertake assessments and make reports and recommendations to the Court as authorized by the juvenile judicial proceedings chapters.
 - (2) To investigate complaints and allegations that a child is in need of care or supervision for the purpose of considering the commencement of proceedings under the juvenile judicial proceedings chapters.

Decision Point: Track Assignment

- "Child in need of care or supervision (CHINS)" means a child who:
 - (A) has been abandoned or abused by the child's parent, guardian, or custodian. A person is considered to have abandoned a child if the person is: unwilling to have physical custody of the child; unable, unwilling, or has failed to make appropriate arrangements for the child's care; unable to have physical custody of the child and has not arranged or cannot arrange for the safe and appropriate care of the child; or has left the child with a care provider and the care provider is unwilling or unable to provide care or support for the child, the whereabouts of the person are unknown, and reasonable efforts to locate the person have been unsuccessful.
 - (B) is without proper parental care or subsistence, education, medical, or other care necessary for his or her well-being;
 - (C) is without or beyond the control of his or her parent, guardian, or custodian; or
 - (D) is habitually and without justification truant from compulsory school attendance.

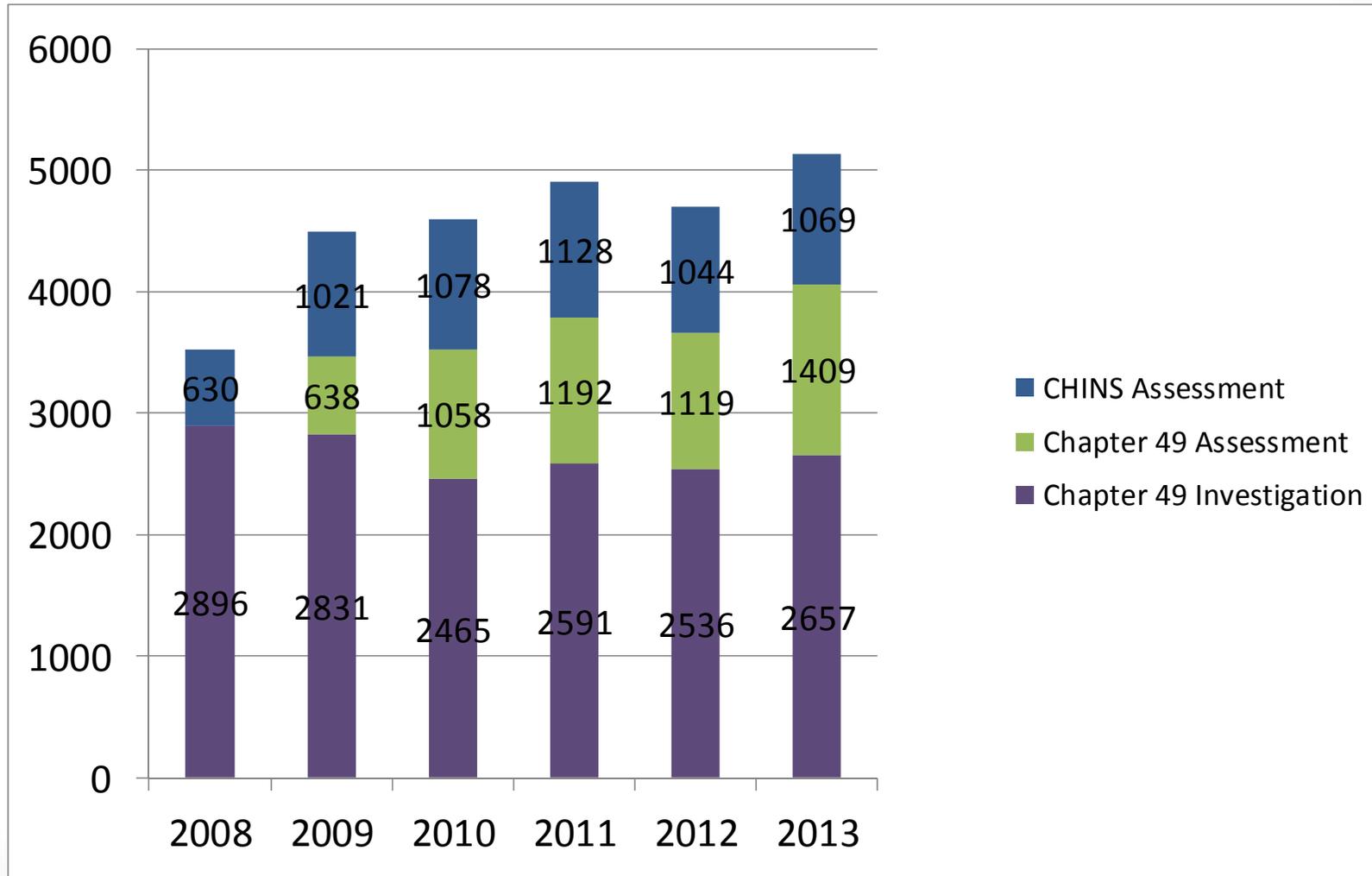
Examples of CHINS B Family Assessments

- A pattern of concerns or a single incident does not meet criteria for acceptance under 33 VSA Chapter 49, but the child may be without proper parental care or subsistence, medical, or other care necessary for his or her well-being.
- An newborn has a positive toxicology screen for illegal substances or prescription medication not prescribed to the patient or administered by a physician
- A newborn has been deemed by a medical professional to have Neonatal Abstinence Syndrome through NAS scoring as the result of maternal use of illegal substances or non-prescribed prescription medication.

Examples of CHINS B Assessments

- Information that a parent may be addicted to substances and/or experiencing significant mental health issues where there is no info that the child's care has been compromised – age of the child, observation of use and/or impairment, chronic condition where impact on caretaking is likely

Accepted Reports Detail



Decision Point: Is the Child Safe?

The first priority of the social worker is to answer the question

Is the child safe now?

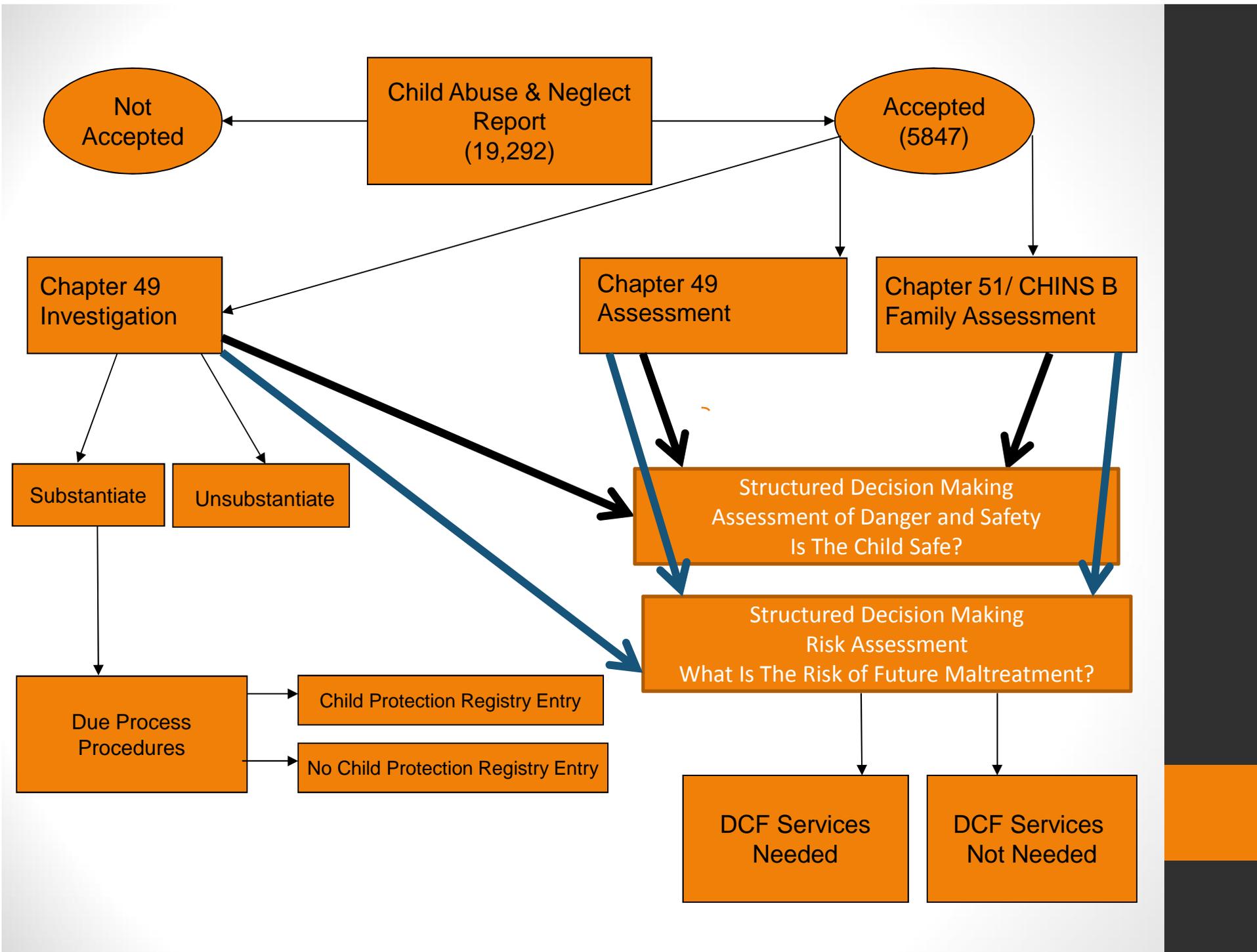
- If not, what needs to be done to promote safety?
- Is out of home placement necessary?
- If the child must leave home, is a familiar person available to provide short-term care?
- Is DCF custody a necessary element to promote safety?

Structured Decision Making
Assessment of Danger and Safety
Is The Child Safe?

Decision Point: Offering Ongoing Services

The ***Family Risk Assessment Tool*** estimates the probability of future maltreatment in the household. The higher the risk, the more important it is to engage the family in identifying supports and services to prevent harm.

Structured Decision Making
Risk Assessment
What Is The Risk of Future Maltreatment?



Investigation and Assessments

Assessment

Investigation

Assess
safety /
coordinate
response

Discuss
issues
w/ parents;
engage to
build
solutions

Collateral
contacts
w/ extended
family/
supports/
resources

Determine
services
needed

Case
determination

Incident
specific
documentation

Key Differences: Assessment & Investigation

- **Overall Focus**
 - Investigation – Child Safety and Family Engagement
 - Assessment – Child Safety and Family Engagement
- **Child Interview**
 - Investigation – Can interview without caretaker permission
 - Assessment – Must have permission
- **Orientation of Focus**
 - Investigation -- Historically / Incident Focus
 - Assessment -- Future Oriented w/ Focus On Incident only as it informs future risk
- **Case Findings**
 - Investigation -- Substantiation decision made. Due process available. Entry on child protection registry.
 - Assessment – Finding is “services needed”, or “no services needed”.

Family Support Cases

- A Family Support Case is opened if:
 - The family is at high or very high risk as indicated by the final risk level on the Family Risk Assessment; or
 - The family has a danger issue that could not be resolved during the child safety intervention, **regardless of risk level**; or
 - The family requires FSD involvement to ensure engagement with services or other support or monitoring.
- District social workers provide services to families who are at high risk for child abuse and neglect. This support is targeted at the reduction of risk and the promotion of protective capacities.

405 families point in time in 2014

Working With The Court

- In any type of case, a child can come into DCF custody due to concern for their safety – AT ANY TIME. This may happen during the Child Safety Intervention or may occur during an Family Support Case
- Only a police officer may take a child into physical custody.
- The officer must take the child home, or to a designated shelter, or to the court.
- Only a judge may transfer custody to DCF.
- During work hours, DCF usually initiates a court hearing. After hours, the police usually recommends custody; the hearing is usually held by phone.

Youth Justice

Unlike child protection agencies in most other states, FSD also serves as the state's youth justice agency. In this role, we:

- Work with youth whose own behaviors put them at risk;
- Supervise youth who are on probation for committing delinquent acts;
- Assess youth to determine their challenges and strengths;
- Place youth in temporary out-of-home care when necessary;
- Work with the youth and parents towards their safe return home; and
- Find permanent homes for youth who cannot safely return home, preferably with extended family members or known connections.

Social workers are NOT probation officers—rather they are social workers who are tasked by Vermont statute with overseeing probation conditions as set by the court.

Social workers supervised 186 youth (point in time) in 2014

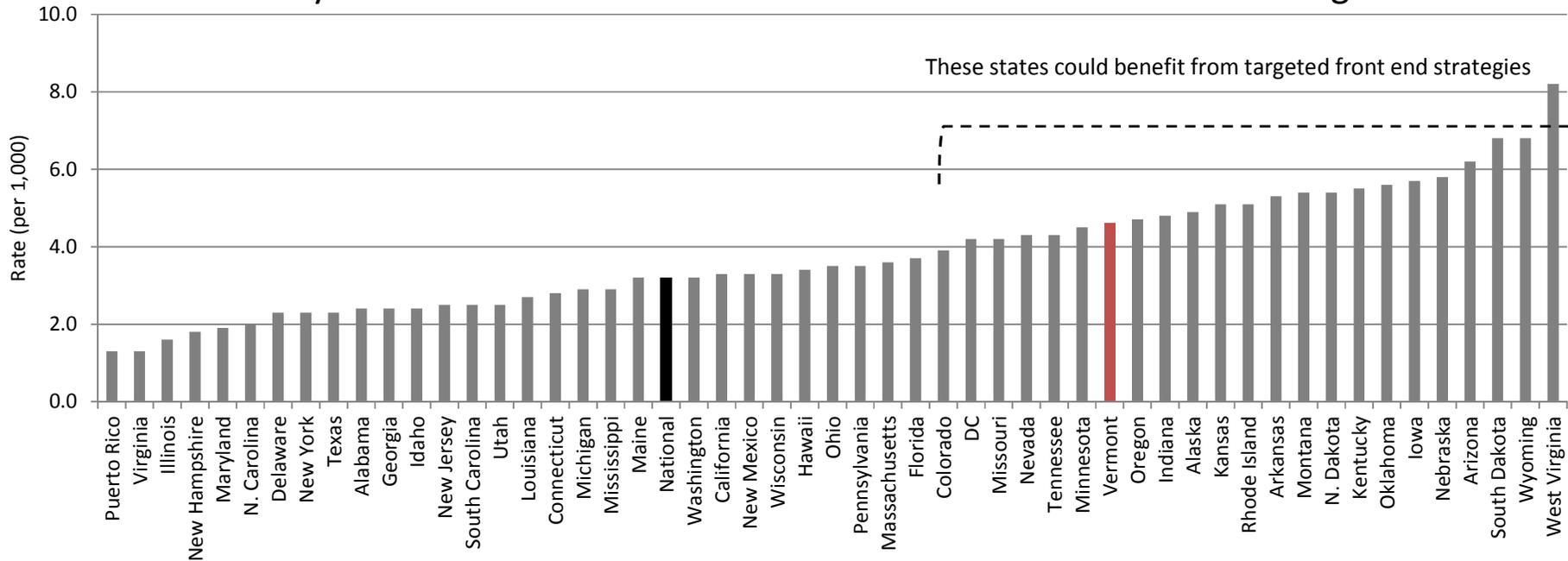
Children in DCF Foster Care

- **Reasons for foster care:**
 - Abuse/Neglect
 - Child Behavior (but not just for treatment)
 - Delinquency
- **Numbers were declining although still higher than the national rate of entry**
 - From 1453 in 2006 to 1087 as of 6/30/2014.
 - 1196 children/youth in custody as of 1/21/2015.

The entry rate in VT(4.6 per 1,000 in FY12) is higher than the national rate (3.2 per 1,000 in FY11).

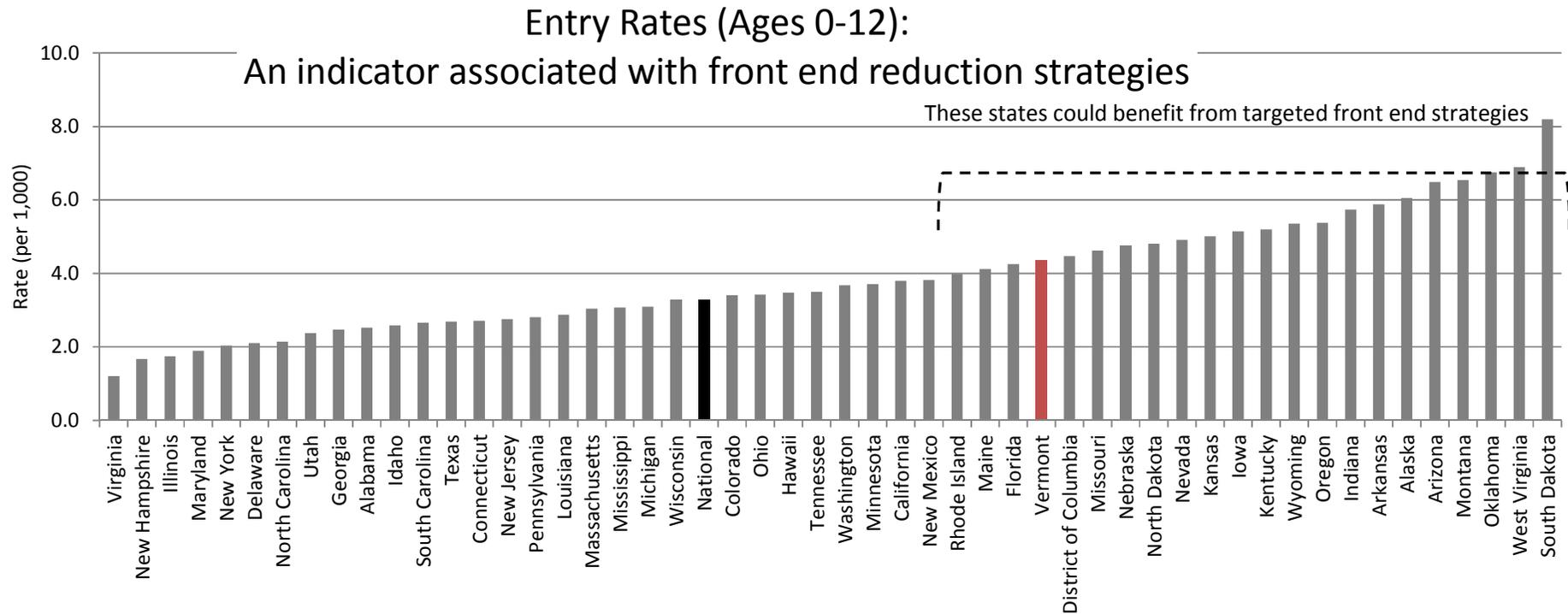
However...not all states include Juvenile Justice entries...

Entry Rates: An indicator associated with front end reduction strategies



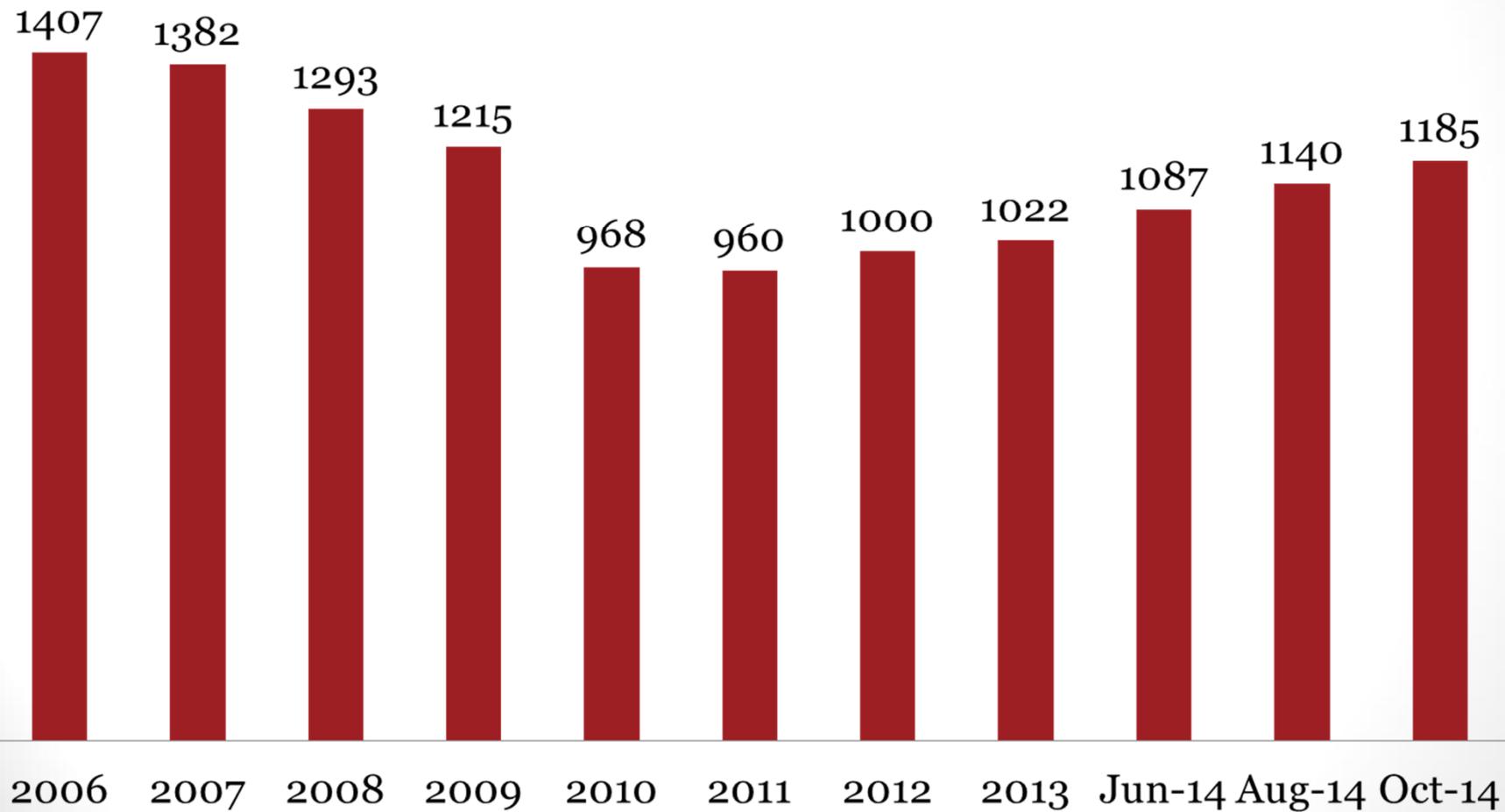
Entry rate is the number of children (ages 0-17) entering care during the year for every 1,000 in the general population. Data source is FY12 AFCARS (FY11 in PR, CT, NM, SD and National) CA data from CWS/CMS

Even for just younger children (ages 0-12), VT has an entry rate that is higher than the national rate.



Entry rate is the number of children (ages 0-12) entering care during the year for every 1,000 in the general population.
Data source is FY12 AFCARS (FY11 in CT, NM, SD and National) CA data from CWS/CMS

DCF Custody Trend Over Time



DCF Custody

Age Group	6/30/2014	12/1/2014
0-5	336	411
6-11	228	238
12-17	481	479
18+ (still in high school)	42	51

Placement Statistics

as of June 30, 2014

Foster Care ~42%

Kin Care ~28%

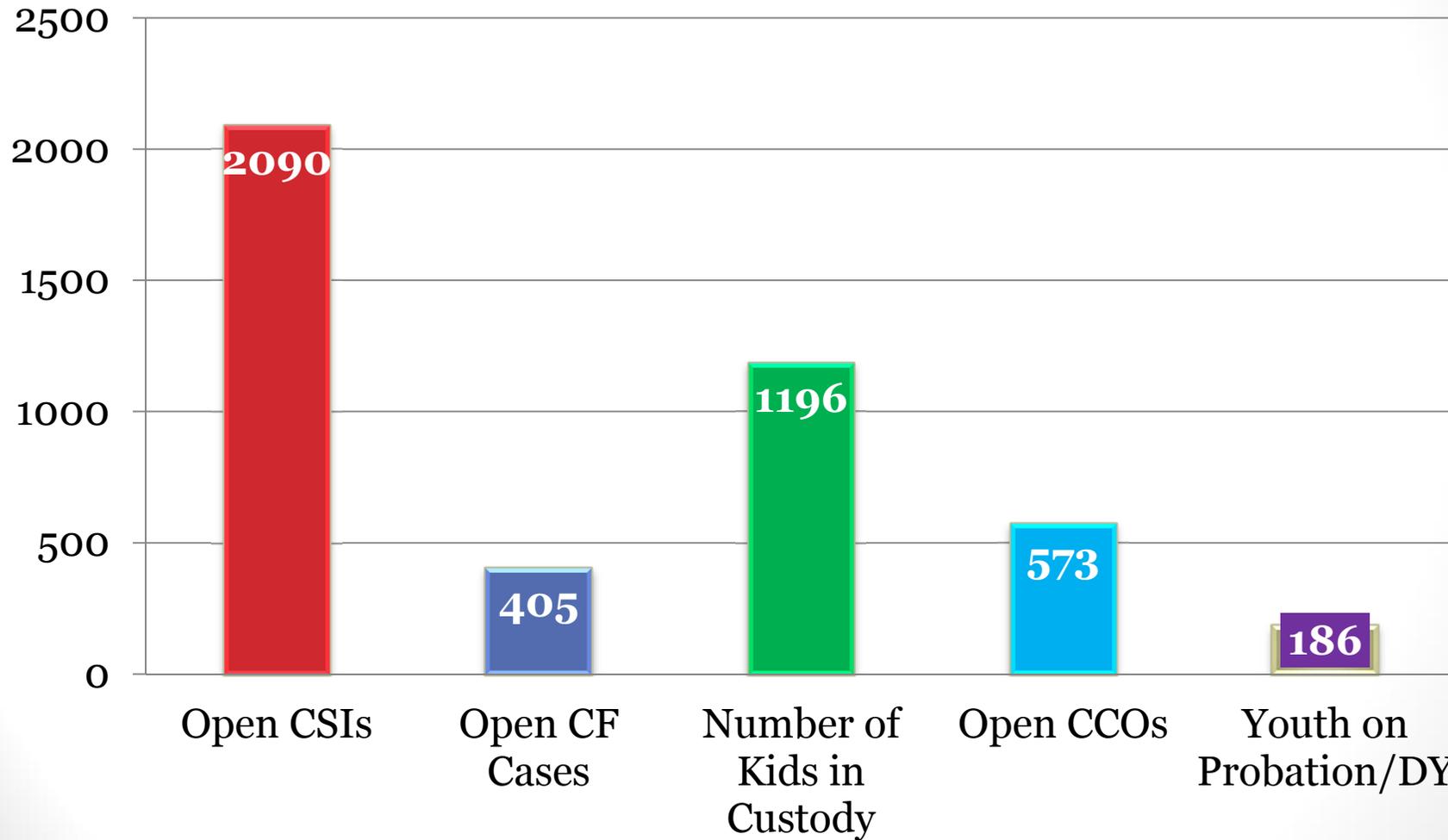
Residential Care ~13%

Institutions ~2%

Independent Living ~2%



What Does Our Current Work Look Like?



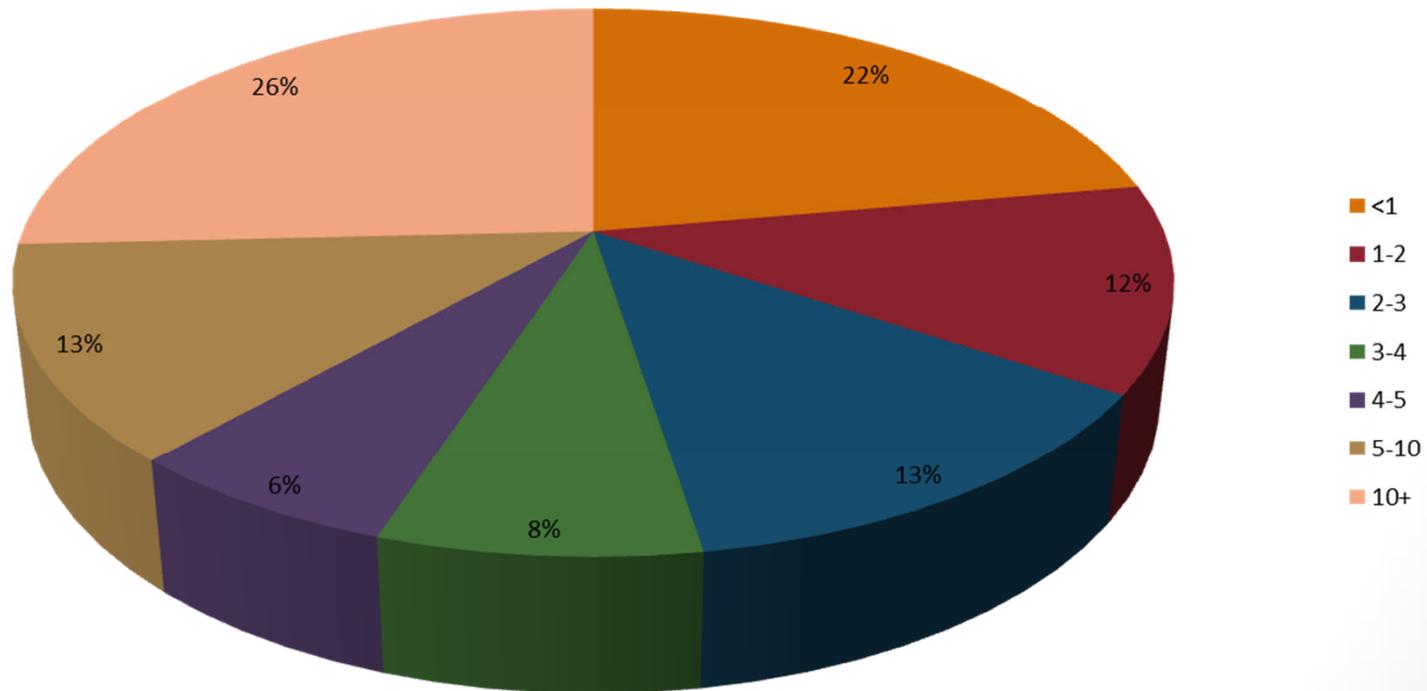
Family Services Front-Line Staff~

Years of Service (August 2014)

District	<1	1-2	2-3	3-4	4-5	5-10	10+	Total
Barre	4	4	3	2	1		1	15
Bennington			1			3	6	10
Brattleboro	4	1	1	1			5	12
Hartford	7	1	2		1			11
Middlebury	2	3	1		1	2		9
Morrisville				1	1	3	2	7
Newport	3		1	1			3	8
Rutland	3		1	1	1	4	7	17
Springfield	7	2			1		2	12
St Albans	1		4		3	3	6	17
St Johnsbury	2		2	2			2	8
Williston/Burlington	6	2	7	3		9	12	39
Woodside Youth Counselors	5	11	3	4	2	1	5	28
Total	44	24	26	15	13	25	51	193 (165 SW/28 Woodside)

Family Services Staff Years of Service

Family Services Front Line Staff,
Years of Service



Family Caseload

