

## **Summary of Testimony of Kathryn (Kate) Piper- January 29, 2014 Vermont House Human Services Committee**

- 1. Benefits of DR as Implemented in Vermont:**
  - a. Expansion of safety net:** DR has had the intended effect of increasing the number of families served by CPS and receiving services as a result.
  - b. More Family-Friendly approach:** The less accusatory approach of the assessment track has led to better working relationships between DCF and families.
  
- 2. Has this better relationship led to greater engagement in services and improved child safety?**
  - a. What does the research tell us?** “The current body of research supporting claims of safety and improved outcomes for children in DR programs is, at best, inconclusive, and at worst, misleading.”
  - b. What does the NCIC evaluation tell us about safety of children on assessment track?** Nothing. The definition of maltreatment recurrence used in the evaluation does not apply to children on the assessment track.
  - c. What data is needed to begin to answer this question?** DCF needs to provide data on the number/rate of re-reports received on children whose cases have been assigned to the assessment track.
  
- 3. DR is implemented in different ways from state to state, making it impossible to generalize study findings from one state to another.**
  
- 4. Concern: A much higher percentage of cases involving children with prior victimization are ending up on the assessment track in Vermont compared to other DR states.** Research suggests that families with a prior history of involvement with CPS may need more assistance and require a more intrusive intervention, especially in cases involving parental substance abuse, mental health and domestic violence problems.
  
- 5. Changes to consider:**
  - a. Mandate that ALL cases involving children under age 3 be investigated.**
  - b. Remove the requirement that parental permission be obtained in order for DCF to interview the child in any cases involving physical abuse, domestic violence or parental pressure on the child to recant allegations.**
  - c. Develop practices that provide more effective means of handing off a case to service providers after a referral has been made and more effective monitoring of service participation and completion.**
  - d. Mandate a review of the availability and gaps in services**

