



# DEPARTMENT of CHILDREN and FAMILIES

Making a Difference for Children, Families and Communities



## DEPARTMENT OF CHILDREN AND FAMILIES (DCF) OVERVIEW

### Child Fatality Hearing

October 2, 2014

#### A. Overview

1. **Careline Calls:** The DCF Careline receives tens of thousands of calls every year. Most calls are to report suspected abuse or neglect of children. Calls from hospitals or police departments are routed into priority queues for faster response from call center staff, while other callers can choose from English or Spanish-speaking queues. The following table shows the breakout of calls by calendar year, and for reports of abuse/neglect, the numbers accepted, not accepted and the rate of acceptance.

CARELINE CALLS BY CALENDAR YEAR				
	2011	2012	2013*	2014**
<b>TOTAL CALLS RECEIVED</b>	92538	94962	89355	64539
<b>Abuse/Neglect Reports</b>	44938	45527	47870	29407
Accepted	29431	28652	29631	16291
Not Accepted	15507	16875	18239	13116
<b>Acceptance Rate</b>	65.5%	62.9%	61.9%	55.4%
* 2013 first year that Background Check and Voluntary Services calls are excluded				
** 2014 Data is partial, from 1/1 - 9/29/2014				

2. **Accepted Reports:** Many reports of abuse or neglect made to the DCF Careline are Accepted for our Differential Response System, Family Assessment Response (FAR) track. The following table shows the total number of accepted reports since CY 2011, then breaks them out by those alleging only physical abuse, physical abuse in combination with any other type, and other abuse/neglect.

ACCEPTED REPORTS BY CALENDAR YEAR AND ALLEGATION TYPE				
	2011	2012	2013	2014*
<b>TOTAL ACCEPTED REPORTS</b>	29431	28652	29631	16291
Physical Abuse Only	4701	4489	4358	2380
Physical Abuse and Other Abuse/Neglect	4531	4151	4408	2445
Other Abuse/Neglect Only	20199	20012	20865	11466
Physical Abuse Only	16.0%	15.7%	14.7%	14.6%
Physical Abuse and Other Abuse/Neglect	15.4%	14.5%	14.9%	15.0%
Other Abuse/Neglect Only	68.6%	69.8%	70.4%	70.4%
* 2014 Data is partial, as of 9/28/2014				

3. **Substantiated Reports:** About a third of all accepted reports are considered relatively low risk, and are designated to receive a Family Assessment Response (FAR). For these responses, there is no requirement to substantiate that some form of neglect has occurred. The traditional CPS track requires DCF to determine that a reasonable cause to believe abuse or neglect of a child has occurred. The following table shows the total number of substantiated reports for the past several years, then breaks them out by the same abuse/neglect types seen in the previous table.

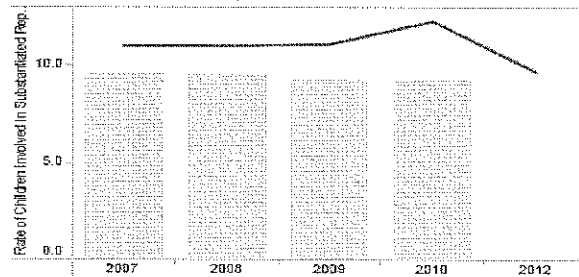
SUBSTANTIATED REPORTS BY CALENDAR YEAR AND SUBSTANTIATION TYPE				
	2011	2012	2013	2014*
<b>TOTAL SUBSTANTIATED REPORTS</b>	6685	5383	5388	2874
Physical Abuse Only	555	484	466	248
Physical Abuse and Other Abuse/Neglect	440	437	476	209
Other Abuse/Neglect Only	5690	4462	4447	2417
Physical Abuse Only	8.3%	9.0%	8.6%	8.6%
Physical Abuse and Other Abuse/Neglect	6.6%	8.1%	8.8%	7.3%
Other Abuse/Neglect Only	85.1%	82.9%	82.5%	84.1%
* 2014 Data is partial, as of 9/28/2014				

### Which children are involved in a substantiated report?

(Data Source: NCAANDS, state files)

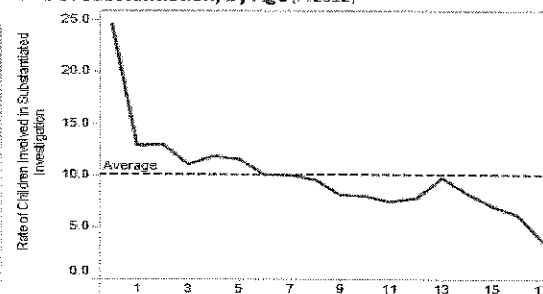
#### Connecticut:

**Rate of Children Involved in Substantiated Investigation** (Unique count, per 1,000 children in population)

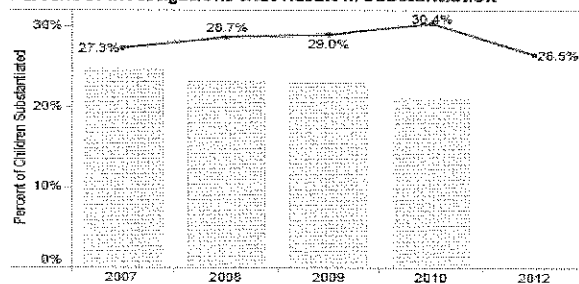


Jurisdiction National

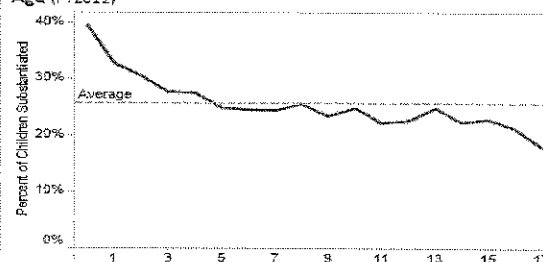
**Rate of Substantiation, by Age (FY2012)**



**Percent of Investigations that Result in Substantiation**



**Percent of Investigations that Result in Substantiation, by Age (FY2012)**



4. **Families Served:** DCF provides direct services to families in many different ways, some of which are not the result of anyone having committed abuse or neglect against a child.

	CY2011	CY2012	CY2013	CY2014*
<b>Total Unique Families Served Directly</b>	36753	35568	34704	30250
<b>Unique Families Served by Service Type**</b>				
Child Protective Services (CPS) Investigation	26668	20266	17342	14423
Family Assessment Response	0	7455	11019	9706
CPS In-Home Services	10352	8767	8383	7408
CPS Out-of-Home Services	3536	3266	3192	2802
Permanency Service	1128	1178	1094	902
Adolescent Services	1310	1188	1113	904
Interstate Compact Office Services	166	158	155	133
Probate Services	2487	2529	2492	2106
Voluntary Services (In-Home)	1423	1356	997	708

	CY2011	CY2012	CY2013	CY2014*
<b>Total Unique Families Served Directly</b>	36753	35568	34704	30250
<b>Unique Families Served by Service Type**</b>				
Voluntary Services (Out-of-Home)	158	150	102	70
Family With Service Needs (In-Home)	78	68	58	41
Family With Service Needs (Out-of-Home)	34	24	25	18
Juvenile Justice Services	584	574	542	500
* CY2014 data is partial as of 9/29/2014				
** Each family may be served in multiple ways during each year, so it is expected that the figures by service type will sum to a larger number than the actual number of unique families served each year.				

5. **Children Served<sup>1</sup>:** The following table provides the total numbers of unique children served by the Department, by calendar year, and then how many were served by the various type(s) of service they received.

	CY2011	CY2012	CY2013	CY2014*
<b>Total Unique Children Served Directly</b>	80102	76183	73735	64213
<b>Unique Children Served by Service Type**</b>				
Child Protective Services (CPS) Investigation	63263	49112	42700	35410
Family Assessment Response	0	16657	24071	20863
CPS In-Home Services	22936	18739	16823	15057
CPS Out-of-Home Services	9337	8500	7877	7023
Permanency Service	1283	1303	1188	1008
Adolescent Services	3269	2899	2655	2130
Interstate Compact Office Services	340	330	315	282
Probate Services	5234	5158	4978	4257
Voluntary Services	3305	3054	2252	1624
Family With Service Needs	258	210	191	122
Juvenile Justice Services	1079	1275	1210	1032
* CY2014 data is partial as of 9/29/2014				
** Each child may be served in multiple ways during each year, so it is expected that the figures by service type will sum to a larger number than the actual number of unique children served.				

## B. Child Maltreatment Fatalities Data

### 1. Definition:

DCF has defined a child maltreatment fatality as one for which at least one allegation of abuse or neglect related to the death has been substantiated [by DCF] against a caregiver.

### 2. Data:

- The CT maltreatment fatality rates have consistently been below the national rates and the 2.20 national average.
- The NCANDs report notes that while the national estimate and rate is lower in 2012 than for 2008, both the number and rate have been increasing since 2010.

1. <sup>1</sup> Please note that a single child may be served in multiple ways during the course of a year (or even at the same time), so the detailed figures contain duplication and will not add up to the total number of unique children served each year.

- Many states have attributed increases in their rate due to improvements in reporting of such incidents.
- The Annie E. Casey Foundation's 2014 Data Book, CT is ranked 7th in the nation on overall child well-being. This ranking is based on combined data across four domains: Economic Well-Being, Education, Health and Family and Community.
- Connecticut was also one of three states with the lowest rates of child and youth deaths overall, 17 per 100,000, in 2010.

The following table shows numbers of child maltreatment fatalities from two separate data sources for CT: the DCF Critical Incidents Database, and the data DCF submits to the federal government's National Child Abuse and Neglect Data System (NCANDS) report. The NCANDS data comes from CPS Investigation data that tends to be limited to information available within a short window following the incident. The data from the Critical Incidents database is considered more authoritative because our Risk Management team conducts additional follow-up to ensure the most accurate reporting as additional facts and information are revealed over time.

Calendar Year of Incident	Child Deaths Due to Maltreatment				
	DCF CT Number	DCF CT Rate*	NCANDS CT Number	NCANDS CT Rate*	NCANDS US Rate*
2005	N/A	N/A	9	1.08	1.94
2006	3	0.36	3	0.36	2.00
2007	4	0.49	4	0.49	2.28
2008	10	1.20	8	0.98	2.28
2009	6	0.73	4	0.50	2.30
2010	5	0.61	4	0.50	2.08
2011	9	1.10	8	1.00	2.11
2012	10	1.20	6	0.76	2.20
2013	16	2.00	N/A	N/A	N/A
2014	8		N/A	N/A	N/A

\* All rates are shown as the number of child fatalities per 100,000 children in the relevant population (CT or US)

The following table shows all child fatalities reported to DCF since 2005, broken out by the type of DCF involvement. It is important to note that not all child maltreatment fatalities involve children who were receiving services from DCF either in the past, or at the time of their death.

Calendar Year of Incident	Child Deaths Due to Maltreatment			DCF Involved But Death Not Due to Maltreatment	Not DCF Involved and Not Maltreatment	Total Child Deaths Reported to DCF Risk Management
	Open DCF Case	Prior DCF Case	No DCF Involvement			
2006	1	1	1	13	9	25
2007	2	2	0	15	5	24
2008	2	5	4	12	14	37
2009	1	2	4	12	12	31
2010	0	3	2	12	17	34
2011	4	4	2	14	17	41
2012	1	5	4	11	15	36
2013	5	5	6	12	12	40
2014	4	4	0**	14	7	29
2006	4.0%	4.0%	4.0%	52.0%	36.0%	100.0%
2007	8.3%	8.3%	0.0%	62.5%	20.8%	100.0%
2008	5.4%	13.5%	10.8%	32.4%	37.8%	100.0%
2009	3.2%	6.5%	12.9%	38.7%	38.7%	100.0%
2010	0.0%	8.8%	5.9%	35.3%	50.0%	100.0%
2011	9.8%	9.8%	4.9%	34.1%	41.5%	100.0%
2012	2.8%	13.9%	11.1%	30.6%	41.7%	100.0%
2013	12.5%	12.5%	15.0%	30.0%	30.0%	100.0%
2014	13.8%	13.8%	0.0%	48.3%	24.1%	100.0%

\*NOTE: As of 10/1/14, there are three (3) additional fatalities that occurred during CY14 for which the investigation of maltreatment remain pending. Two of them were on an open DCF case, one that had no previous DCF involvement.

\*\*NOTE: As of 6/19/14, the one case previously reported (as of 6/5/14) that was due to maltreatment but had no prior DCF involvement had to be reclassified to having had prior involvement. The initial search of LINK by the Careline for parties involved in the case did not return any results, so a new case was created. However, the new case was merged on 6/12/14 with the family's prior case as part of the closing of the investigation.

**C. Best Practices**

The below table shows some initiatives/activities that are being used in other states and in CT to help prevent child maltreatment fatalities.

National	Connecticut
Specialized screening tools for cases that present with risk factors found in child fatality cases. Ex. Florida's Rapid Safety Feedback	<ul style="list-style-type: none"> <li>• DCF will be participating in a research roundtable with the Casey Forum and the Federal Commission to Eliminate Child Deaths.</li> <li>• DCF met with the Eckerd Foundation, a family service organization, who has worked with the state of Florida in response to child fatalities, and looking to bring RSF to CT.</li> <li>• Policy 34-2-6 "Critical Questions to Answer"</li> <li>• DCF working with Hospitals and Medical Community to improve reporting</li> <li>• CT developed proactive strategies that promote the consistent screening and early detection of child abuse. These guidelines provide medical personnel with a protocol to follow when a child presents in any clinical setting with a traumatic injury that may have been caused by abuse or neglect</li> </ul>
States are doing Safe Sleep Campaigns	<ul style="list-style-type: none"> <li>• DCF Policy 44-12-8, Safe Sleep Environments: brochures for families, discussions with families.</li> <li>• Public health campaign is being designed and developed to increase caregiver knowledge and raise public awareness of topics relevant to preventing child abuse and maltreatment.</li> <li>• DCF secured technical assistance from Casey Family Programs and Prevent Child Abuse America to develop targeted messaging to raise public awareness and caregiver knowledge around recurring issues that present in case fatalities, such as unsafe sleep, abusive head trauma, and attention to caregiver choices.</li> <li>• The campaign is to include targeted messages to Dads</li> </ul>
States have Safe Haven Laws and CPS policies	<ul style="list-style-type: none"> <li>• Policy 33-7-15 "Save Haven for Newborns"</li> </ul>
Some states not only review the fatalities but near fatalities as well	<ul style="list-style-type: none"> <li>• CT Child Fatality Special Review Board: Child Fatality Reviews</li> <li>• DCF Special Review - Partnership with Area Offices to conduct Child Fatality Reviews</li> <li>• ORE finalizing 0-3 fatality review report and developing ongoing fatality case review process.</li> <li>• Implementation of Fatality Data Collection and Review protocol</li> </ul>

National	Connecticut
<p>Some states have laws/statutes/protocols to address children born drug exposed or have heavier criminal consequences when children are exposed to drugs/drug activity.</p>	<ul style="list-style-type: none"> <li>• Policy 34-12-2 "High Risk Newborns"*Policy 34-12-3 "Disabled Infants with Life Threatening Conditions"</li> <li>• Drug Endangered Children Memorandum of Understanding: DCF works collaboratively with law enforcement and other state agencies that serve children and families to improve outcomes for children residing in drug affected environments.</li> <li>• Family-Based Recovery (FBR) provides in-home attachment-based parent-child therapy and contingency management substance abuse treatment. The mission of FBR is to ensure that substance affected children develop optimally in drug-free, safe and stable homes with their parent(s). FBR treats mothers and fathers who are actively using substances or who have recent history of substance abuse that are also parenting a child under the age of 8.</li> </ul>

CT DCF and other state agencies also provide services to families with young children who are the most vulnerable (ages birth to three) to child maltreatment fatalities. These services include:

- 24/7 Dads
- Baby Elmo Project
- Birth to Three System
- Child First Program
- Early Childhood Consultation Partnership (ECCP)
- Family Based Recovery (FBR)
- Maternal Infant Outreach Program (MIOP)
- Nurturing Families Network (NFN)
- Zero to Three Visitation (ZTT)