Department of Children and Families



Legislative Briefing February 4, 2016 Commissioner Joette Katz

DCF Overview

DCF MISSION

Working together with families and communities for children who are healthy, safe, smart and strong.

DCF MANDATES

- Child Welfare
- Children's Behavioral Health
- Education
- Juvenile Justice
- Prevention

SEVEN CROSS-CUTTING THEMES

- implementing strength-based family policy, practice and programs trauma-informed practice
- applying the neuroscience of early childhood and adolescent development
- expanding trauma-informed practice and culture Improvements
- addressing racial inequities in all areas of our practice
- building new community and agency partnerships
- improving leadership, management, supervision and accountability
- becoming a learning organization

DCF Regions

CT Department of Children and Families Regions



Children and Families Served

- At any point in time, the <u>Department serves approximately 26,000 children</u> and <u>11,500 families</u> across its programs and mandated areas of service.
- The DCF Careline received <u>90,492</u> calls in 2015: <u>50,484</u> were reports of child abuse or neglect, and <u>29,957</u> reports received an investigation or Family Assessment Response (FAR). Of the investigations, <u>94.2%</u> were commenced in a timely manner and <u>87.6%</u> were completed within 45 days.
- Approximately <u>14,700 cases</u> are open on a given day.
- Approximately <u>2,500 investigations</u> and <u>2,000 family assessments</u> are underway at a given point in time.
- Approximately <u>4,000 children</u> are in some type of <u>placement on any given day</u>.
- Approximately, <u>308 children</u> (as of 1/20/2016) are currently receiving voluntary services and are not committed to the Department. About <u>292</u> of these children are <u>receiving services at home</u>, with the balance receiving services out of the home.
- During 2015, there were <u>519 reunifications</u>, <u>guardianships were transferred for 284 children</u> and <u>adoptions were finalized for 531 children</u>.
- The <u>% of children overall placed with relatives and fictive kin</u> is <u>40.4%</u> in January 2016 compared to 17.3% in January 2011.
- Post Secondary Education (2 or 4 year colleges or other full time school) in FY 15 financial support was provided for <u>688 Foster Care Youths</u> and an additional <u>181 Adopted Youths</u> up to age 23.

The Careline: Reports of Abuse and Neglect

- In 2015, <u>972</u> allegations of physical and sexual abuse were substantiated as were <u>11,330</u> allegations of physical, emotional, educational and/or medical neglect.
- Approximately <u>80%</u> of reports come from mandated reporters CGS § 17a-101(b) defines mandated reporters.
- DCF has seen a steady increase in the number of calls from mandated reporters as a result of:
 - Statutory expansion of mandated reporter definition
 - On-line training available to mandated reporters
 - Increased penalties for failure or delays in reporting



Children in Placement by Placement Type



Increasing Family-Based Placements

The Department's goal is to serve 90% of children in community-based settings. In January 2011, DCF had <u>1,062</u> children and youth placed in in-state congregate settings and 362 in out-of-state congregate settings compared to 527 children and youth placed in in-state congregate settings and <u>11</u> in out-ofstate congregate settings in January 2016.

Children in Congregate Care: Age Group & Out-of-State



Projections of Children in Placement by Placement Type



Quality Assurance

- DCF's QA/CQI approach is based upon the Federal guidance (IM 12-07), issued in August 2012: 5 Essential Components
 - Administrative structure to oversee effective CQI system functioning
 - Quality data collection
 - Method for conducting ongoing case reviews
 - Process for the analysis and dissemination of quality data on all performance measures
 - Process for providing feedback to stakeholders and decision makers and as needed, adjusting State programs and process.
- An external evaluation by the Annie E. Casey Child Welfare Strategy group in May 2013 found that DCF was "poised for self-evaluation." This is the second highest level within their framework
- The Department has used their Administrative Case Review (case planning assessment) as the cornerstone of their CQI/QA approach. The DCF OACR engages in over 13,000 reviews a year. Case plans are reviewed and rated using a standard tool that looks at safety, permanency and wellbeing. Data reports are generated from these reviews (e.g., Case Practice, Needs Assessment, Well-Being)

Data + QA/CQI: Integrated Performance Management



Quality Assurance: Select Current Activities

- Careline Qualitative Reviews: FARs + Non-Accepts
- Area Office Investigations + FAR Qualitative Reviews
- Administrative Case Review Process + Exceptional Case Planning

All three of the above reviews include some form of assessment of the timeliness and completeness of the SDM tool

- Performance Expectations and Operational Strategies
- RBA based Contract Management and Oversight

2016 QA Enhancements

TRAINING	DATA + EVALUATION	CONSULTATION + PARTNERSHIPS		
QA+ Data for New Managers	CFRS – CCRS	Center for State Capacity		
 QA through a Racial Justice Lens 	DCF Data Connect	Building (Federal contractor)		
	CT Data Portal Additions	Eckerd Rapid Safety Feedback		
 DCF Data Leadership Academy – based on NM STEP curriculum 	New ROM system	NM Safety + Success		
	 New Dashboards (JJ, ESI + Case flow) 	CRC regarding SDM enhancements and QA		
	Data Governance			
	Contracted Services Tier Classification System			
	IRB Lean Management			
	FAR Eval Next Steps			

Research Agenda



Family Assessment Response (FAR)

- FAR was implemented in March 2012.
- As of April 2015, a total of 4,532 unique families were served by Community Supports for Families (CSF) program..
- Mean age of children is 7.84 years (range 0 17).
- 37.6% of the children served in CSF were ages 0-5.
- Racial breakdown of CSF participants:
 - Black/African American 17%;
 - White 41%;
 - Hispanic/Latino 35%;
 - Other 6.5%

Data Source: Evaluation from the Performance Improvement Center, UConn School of Social Work, August 2015

FAR + Investigations Comparative Data

	Invest.	FAR	Invest.	nvest. FAR		
	#		%		#	%
Total Accepted Reports 4/1/12 - 6/30/15	61595	34872	63.9%	36.2%	96384	100%
Reports Responses Completed On Time	52850	30168	85.8%	86.5%	83018	86%
Reports Resulting in Case Opening	13147	1006	21.3%	2.9%	14153	15%
Reports with Alleged Victims in Repeat Report in Same Case Within 6 Months	10114	5404	16.4%	15.5%	15518	43%
Reports with Alleged Victims with Substantiation in Same Case Within 6 Months	3014	1171	4.9%	3.4%	4185	9%
Reports with an Alleged Victim that Entered DCF Placement Within 6 Months	3832	300	6.2%	0.9%	4132	2%

FOR REPORTS WITH ALLEGED VICTIMS AGES 0 - 2							
	Invest.	FAR	Invest.	FAR	Total		
	#		%		#	%	
Total Accepted Reports 4/1/12 - 6/30/15	15855	7264	68.6%	31.4%	23119	100%	
Reports Responses Completed On Time	13861	6367	87.4%	87.7%	20228	87%	
Reports Resulting in Case Opening	5188	301	32.7%	4.1%	5489	24%	
Reports with Alleged Victims in Repeat Report in Same Case Within 6 Months	2741	1250	17.3%	17.2%	3991	17%	
Reports with Alleged Victims with Substantiation in Same Case Within 6 Months	1054	342	6.6%	4.7%	1396	6%	
Reports with an Alleged Victim that Entered DCF Placement Within 6 Months	1727	75	10.9%	1.0%	1802	8%	

Current data suggests that CT FAR cases, including those that involve children under age 3, have lower re-referral and repeat maltreatment percentages than traditional CT CPS cases

DCF Racial Justice Pathway Data



17

FAR Racial Justice Considerations

Reason for CSF Discharge by Child Race*



FAR Racial Justice Considerations, cont.

CSF Survival Time to First Subsequent Report by Caregiver Race/Ethnicity



Non-Hispanic Blacks are 15% less likely to have a subsequent report than Non-Hispanic Whites.

 After adjusting for race/ethnicity, the survival time to an investigation subsequent report between Region 5 & 3 becomes nonsignificant.

Early Childhood Initiatives

SAFE SLEEP CAMPAIGN

- DCF and the Office of Early Childhood (OEC) kicked off Safe Sleep Campaign with other partners on February 2, 2016
- Materials the materials will be offered to hospitals to assist with their implementation of PA 15-39, An Act Concerning Infant Safe Sleep Practices.
- Materials to be distributed to home visiting programs, early child care providers, maternal health clinics, and other community partners.

EARLY CHILDHOOD PRACTICE GUIDE

- DCF supports healthy relationships, promotes safe and healthy environments and assures that the emotional and social needs of children aged 0-5 are met.
- This provides a framework to help staff in their work with families providing care to infants, toddlers and preschoolers involved with the Department.
- Implementation of the guide is currently underway through our Early Childhood Community of Practice.

Considered Removal Child and Family Team Meetings

- Implemented in February 2013
- DCF staff are required to hold a child and family team meeting when staff are considering the removal of a child
- Meetings are to occur prior to the removal or, where that is not possible consistent with child safety, within 48 hours of the removal
- Families are asked to invite anyone in their extended family or network of supports who might help resolve the underlying challenges
- For CY 2014
 - 2,611 child-specific meetings, 71% of which occurred PRIOR to a removal. 75% were either not removed or were placed with someone they know (kinship family)
 - 47% of those placed were placed with relatives or kin
- For CY 2015
 - 2,743 child-specific meetings involving 1,627 families, 76% of the meetings occurred PRIOR to a removal. Of those, removal was recommended for 30% of the children.
 - 72% of those placed were placed with relatives or kin

Children's Behavioral Health Plan

October 2015 marked the first progress update of the CT Children's Behavioral Health Plan following its initial submission in October 2014. The plan represented 50 plus activities underway across 6 state agencies supporting the seven thematic areas. Some of those include:

- Establishment of an Advisory Board with three key areas of focus; financial mapping, network analysis and data integration
- Implementation of CT's first Care Management Entity
- Issuance of the CT Suicide Prevention Plan
- Statewide expansion of crisis stabilization/crisis respite resources
- Expansion of Emergency Mobile Psychiatric Services (EMPS) and the completion of 60 Memorandums of Agreement (MOA's) between Local Education Agencies (LEA's) and EMPS teams
- Expansion of Modular Approach to Therapy for Children (MATCH) to 6 additional clinics
- Implementation of Cognitive Behavioral Intervention for Trauma in Schools (CBITS) in 4 school systems
- Implementation of Adolescent Screening, Brief Intervention and Referral for Treatment (SBIRT)
- Establishment of Autism Spectrum Disorder (ASD) Unit at CT Behavioral Health Partnership
- Continued investment in Infant Mental Health training and implementation of Circle of Security Parenting

USD#2 – Virtual Academy

- Established pursuant to § 17a-37 (b) of the General Statutes
 - The superintendent of the school district shall have the power to (1) establish and maintain within the Department of Children and Families such schools of different grades as he may from time to time require and deem necessary . . .
- Open communication with the State Department of Education
- Certified teacher location in the regions are: Region 1 (Bridgeport and Norwalk) Region 2 (New Haven) Region 3 (Middletown) Region 4 (Hartford) Region 5 (Waterbury) Region 6 (New Britain)
- Juvenile Justice / DCF Youth Focus

Region	JJ Youth
1	77
2	53
3	26
4	48
5	52
6	36

USD#2 - Virtual Academy

Virtual Academy's overarching goals are:

- Students will have access to Math and English remediation classes
- Students will have access to online core content area classes in English Language Arts, Math, Science and Social Studies.
- Students will have access to elective courses, testing prep courses, and trade prep courses.
- Students who are on a diploma track will fulfill the state requirements for graduation.
- Students will demonstrate proficiency in the understanding and application of skills and concepts
- Students will have a well developed Post Secondary Education Plan
- Students will have access to career exploration tools



Framework for the Plan to Close CJTS

- Develop recommendations to inform the closure of the Connecticut Juvenile Training School by July 1, 2018.
- Plan will be informed by national best practices, as well as an analysis of the population of youth currently served by CJTS and the youth who will be impacted by future age related statutory changes.
- Plan will present options for closure, including the development of new services and the re-purposing of existing programs to meet the needs of the population.
- Plan Development Process
 - Phase I Developing the Foundation
 - Phase II Stakeholder Input
 - Phase III Plan Development

Closure of CJTS: Timeline for Developing the Plan

JAN 2016	FEB 2015	MAR 2016	APR 2016	MAY 2016	JUNE 2016	JULY 2016	AUG 2016	SEPT 2016	
Nation	al Scan		pulation ojections						
External Stakeholder Input									
		DCF Staff Focus Groups							
							D	raft Plan	

Domestic Minor Sex Trafficking

Governor Malloy's Proposal Concerning Human Trafficking of Minors

Strengthen Protections for Minor Victims of Human Trafficking

- amends the trafficking in persons statute to eliminate the requirement to prove more than one occurrence of sexual contact if the person trafficked in a minor under age 18.
- makes patronizing a trafficked person an offense, if such person knew or reasonably should have known that the other person was under age of 18 and a victim of trafficking.

Enhanced Protections for Victims

 includes the trafficking of a minor under the age of 18 as an offense that allows the court to issue a standing criminal protective order requiring convicted traffickers to stay away from victims. It also extends the time limitation for filing an application for compensation for victims of child sex trafficking if the victim makes the application within two years of reaching age 18.

Provide More Tools to Investigators

- amends the enticing a minor statute to allow for a conviction if the person contacted is reasonably believed to be a minor under age 16.
- requires that hotels and other accommodations maintain a computerized record-keeping system of all guests and transactions and maintain those records for not less than six months.

Questions