



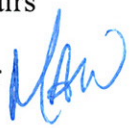
B. J. Walker, Commissioner

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June 22, 2010

MEMORANDUM

TO: Citizen Review Panel Steering Committee Chairs

FROM: Mark A. Washington, Assistant Commissioner 

RE: CAPTA Citizen Review Panel
FY2009 Annual Report and Panel Recommendations

The Child Abuse Prevention and Treatment Act (CAPTA) require all states establish Citizen Review Panels to review the compliance of state and local child protective service agencies in the discharge of their duties. Georgia is fortunate to have three entities that have assumed this responsibility, the Child Fatality Review Panel, Children's Justice Act Advisory Committee and the Child Protective Services Advisory Committee, to satisfy this federal requirement. The purpose of this communication is to acknowledge the work of the panels and to describe whether or how the state will incorporate the CRP recommendations into its plans to make measurable progress in improving the state and local child protection system

The mission of Georgia's Citizen Review Panels (CRP) is to assure that children and families in the community are provided the best possible services within the framework of available resources and those children are protected from maltreatment. This mission, which is shared by DFCS, can only be achieved when the broader community has a better understanding of and voice in:

- Evaluating and assessing the child welfare system
- Promoting quality child protective services practice
- Advocating for the strengthening of resources
- Recommending and advocating for policies and procedures that promote the highest practice standards
- Engaging in cross-system problem solving which involves both formal and informal support agencies, groups and individuals

Georgia Citizen Review Panel – FY 2009 Activities and Recommendations:

The activities and recommendations provided by each of Georgia's Citizen Review Panels have been helpful in improving interagency collaboration and services for children and families throughout the state. We commend the dedication and commitment demonstrated by the panel membership. The coordination of activities among the three panels via the CRP Steering

Committee has provided a unique opportunity for inter-panel collaboration to identify shared priorities and goals, support collective objectives and coordinate activities and planning with Georgia's child welfare agency. Representation from the panels at the national CRP conference provided additional insight into the role, opportunities and potential for significant contribution at both the state and national level.

Key CRP Recommendations: The state has incorporated a number of CRP recommendations into ongoing efforts to make measurable progress in improving our state and local child protection systems. Specific CRP Panel recommendations and the state response regarding each one follow:

CRP Recommendation #1:

Development of training for caseworkers and supervisors to improve intake screening, case management and monitoring/follow up of "diverted" reports/cases.

State Response to Recommendation #1:

The state is in the process of developing a new "Steering Committee" comprised of agency leadership and external stakeholder leadership to identify practice change priorities and a seamless practice for the agency, inclusive of the infusion of Family-Centered Practice throughout the work of the agency, Differential Response/Diversion, Risk Assessment, Safety Framework, Concurrent Planning and other critical agency responses. The work of this steering committee is expected to commence August 2010.

The state has received an analysis of the current diversion program (now known as Family Support Services) from nationally known expert JoAnn Lamm. Ms. Lamm was instrumental in establishing the differential response in North Carolina. As a component of her Georgia assessment, Ms. Lamm engaged in discussions with external and internal stakeholders, assessed current practice and solicited input from county staff on current diversion practices. This report will be shared with this new steering committee and will be used to guide the development of a seamless assessment process inclusive of Intake, Investigations, and Diversion.

CRP Recommendation #2:

Engagement of community at large to ensure availability of adequate supports and services to meet the early intervention needs of children and families in Diversion cases.

State Response to Recommendation #2:

The agency is in the process of creating a new staff position that will support a system of care-like response for the agency. This staff member will be responsible for assessing needs and engaging the community in the identification and development of resources to support the families we mutually serve.

CRP Recommendation #3:

Increase in the number of Diversion cases reviewed during regional case review process (PEAS) to be more reflective of the volume and impact of these cases.

State Response to Recommendation #3:

Through the work of the above-referenced new steering committee, the state anticipates that as a component of the state's newly established safety framework, Diversion cases will be included in the PEAS sampling process and will be proportionately reviewed with Investigations, Family Preservation and Foster Care Cases. This review will focus on determination of the family's needs, inclusive of caregiver capacities and child vulnerabilities.

CRP Recommendation #4:

Work collaboratively with the Office of Child Fatality Review to expand and enhance the prevention component of Georgia's model child abuse protocol to advance a statewide child abuse prevention plan.

State Response to Recommendation #4:

The agency is partnering with the Office of the Child Advocate/Office of Child Fatality Review(OCA/CFR) to review case files and will continue to partner with the OCA/CFR to expand any initiatives related to advancing the a statewide child abuse prevention plan. The agency remains committed to transparency and working with community partners on sharing of information related to child death and near fatalities in an effort to develop multi-disciplinary action plans toward prevention.

CRP Recommendation # 5:

Development of a comprehensive sexual abuse training curriculum that could be made available to a broad spectrum of disciplines involved in the investigation, treatment and prosecution of these cases using a model similar to the revised DFCS new caseworker curriculum, based on updated research and victim advocacy, and general enough in nature to encompass the unique needs of the multiple disciplines involved.

State Response to Recommendation #5:

During the past year the agency has expanded collaborations with the Judiciary, the Court Improvement Project and the Office of the Child Advocate. To achieve the recommendations of the CRP, the agency is expanding collaborative efforts with Children's Healthcare of Atlanta (CHOA), the Department of Community Health/Public Health, the National Resource Centers for CPS, as well as the Annie E. Casey Foundation. In an effort to target the staff training needs for child victims of sexual abuse, the agency will partner with CHOA. The initial audience for the sexual abuse training will be the social services staff at the Fulton and DeKalb County Departments of Family and Children Services.

In addition, the state is participating in a Project Prevent, a co-sponsored activity between the Office of the Child Advocate, Children's Healthcare of Atlanta, DFCS and the Governor's Office of Children and Families. Using community-based advocates, pediatricians and their medical support staff are trained to ask screening questions and trained in identifying the signs of possible abuse or neglect during well-being check-ups with children under the age of two. A local resource guide is used by medical staff to ensure that families are connected to services in their community so that families under stress or in need of additional support are connected to local community resources.

CRP Recommendation # 6:

Re-establishment of an annual, multi-disciplinary conference or series of workshops that incorporates both foundational and discipline-specific information and resources for coordinated, cross-discipline training and professional development on child abuse and neglect, more specifically on child sexual abuse

State Response to Recommendation #6:

Due to economic restraints, there are no current plans for the agency to host an annual multidisciplinary conference. To allay the cost of training, the agency has instituted regionalized training opportunities and would welcome opportunities to partner with other disciplines in the development of regionalized training opportunities for professional development.

CRP Recommendation # 7:

Continued expansion and support of local child abuse investigative teams trained in the multi-disciplinary approach to death scene investigations

State Response to Recommendation #7:

The state is developing a “Special Investigations Unit” for investigating cases of child death, near fatality and allegations of maltreatment in care. Staff for the unit will be located regionally and will have demonstrated skills in the assessing of critical cases. It is the expectation for the newly reconstituted unit to engage local teams in the investigative process whenever possible. The agency plans to have this unit operational by August 2010.

CRP Recommendation # 8:

Routine training for hospital staff, community medical providers and other categories of mandated reporters on identification of child abuse, injury prevention strategies and how to make a report to DFCS

State Response to Recommendation #8:

The agency remains committed to partnering with related agencies and other community partners on the development of training for other categories of mandated reporters regarding the identification of child abuse, injury prevention strategies and how to make a report to DFCS. CAPTA funds will be utilized to support the development of online mandated reporter training with evaluation and refresher components for staff, with wider distribution to include early care and school personnel. Upon successful implementation of this online training, future modules for other mandated reporters will be considered.

In addition, the state is participating in the new Project Prevent described above to training pediatricians and their medical support staff in screening for and identifying possible abuse or neglect.

CRP Recommendation # 9:

Develop public awareness campaign to target risks of co-sleeping, shaken baby, and drowning

State Response to Recommendation #9:

The agency continues to partner with the Division of Public Health in public awareness campaigns, which include distribution of pamphlets in local DFCS and DPH offices. We are also piloting a partnership with visiting nurse programs for parents of newborns to address these issues as well.

CRP Recommendation # 10:

Reconstitution of multi-disciplinary, multi-agency team to examine causes and circumstances of deaths, near-fatalities and serious injuries as reported through Child Death and Serious Injury (CDSI) procedure

State Response to Recommendation #10:

As pledged in the CAPTA PIP addressing public disclosure of near-fatalities, the multi-disciplinary workgroup (“CDNFSI” committee) was reconvened by the Office of the Child Advocate (OCA). OCA re-established the committee to review serious injuries and deaths of children in DFCS custody and children whose families have a past history of DFCS involvement. The committee’s charge was expanded to include near-fatalities. The stated goal of this committee is to make recommendations to DFCS on policy and practices, utilizing a comprehensive

communication and feedback process from the committee to the counties. The feedback process will include: a checklist attached to each report requiring the county to answer preliminary investigative questions (as designed by the CDNFSI committee); and, structured feedback given to the counties outlining good policies and practices and suggested areas for improvement. The committee will also track data and trends to develop prevention practices, including: enhancement of the DFCS education and training for new workers; improvement of the knowledge of current field staff on child death and injury prevention techniques; and the development of public awareness campaigns by DFCS in collaboration with state partners (Child Fatality Review, Public Health, etc.) on community prevention techniques.

The committee is composed of professionals from the Office of the Child Advocate (child welfare analysts and child fatality review staff), DFCS, the Georgia Bureau of Investigation (staff from the medical examiner's office), medical experts from Children's Healthcare of Atlanta and injury prevention specialists from the Department of Public Health. Members met for the first time on January 26, 2010, and have subsequently met two additional times. Ideally, the workgroup will establish a routine of meeting on a regular monthly or semi-monthly basis. The Office of the Child Advocate/Child Fatality Review chairs the group, circulates summaries of the cases selected for review in advance of the meeting, and leads the discussion

CRP Recommendation # 11:

Develop mechanism by which "near-fatalities" that result from child maltreatment will be made publicly available so as to enhance system transparency and accountability

State Response to Recommendation #11:

Focal groups have been participating in the SHINES development of alerts and reports for the disclosure of child death and near fatalities. Changes are being made to the Child Death Serious Injury Report (now CDNFSI report) to include the Near Fatality designation. During the course of investigation, case managers will be required to indicate whether an incident involves a Child Death (CD), Near Fatality (NF), Serious Injury (SI) or none. If the case is designated as either a CD, NF, SI the system will require the case manager to complete a CDNFSI report and submit to the designee (either County Director or Supervisor) for approval. The system will then set an alert indicating that the case is a CD or NF and is therefore subject to public disclosure.

In an effort to disseminate information to the public regarding their access to Child Death and Near Fatality information, other public entities (i.e. GBI) have agreed to allow for the process and procedures link on the DFCS website to be included on their websites.

CRP Recommendation # 12:

Develop definition of "child maltreatment" that can be consistently applied across contexts and encompass the components of fatal neglect and fatal abuse

State Response to Recommendation #12:

In response to CRP's recommendation that DFCS modify the current definition of maltreatment, it should be noted that Senate Bill 292 proposes a number of changes to the existing juvenile code, including the definition of maltreatment. DFCS looks forward to working collaboratively with stakeholders across the spectrum of Georgia's child welfare system and would welcome CRP participation in order to collectively influence passage of a definition that is consistent with the system's values and best practices.

As key stakeholders, your participation, observations and recommendations are critical to our efforts as we work to assess and improve our child protection service delivery system. Your analysis of our strengths and needs will be reflected in the federal Annual Progress and Services Report for 2009. We look forward to our common work and to your ongoing participation and input into the implementation of these recommendations.

It is our hope that together we can develop and implement strategies for improved collaboration, information-sharing, shared accountability, resource allocation and needed system improvements. On behalf of the children and families of Georgia, we thank you for your efforts and support.

MAW/adp

cc: B.J. Walker, Commissioner Department of Human Services
Ruth Walker Simpson, Region IV ACF Program Manager
Tracy Fava, Region IV ACF Program Specialist
Isabel Blanco, Executive Director Family Outcomes & Practice Standards
Susan Denney, Director Strategic Planning
Deb Farrell, CRP Program Coordinator.