

STATE OF GEORGIA Division of Family and Children Services

Nathan Deal Governor

Bobby D. Cagle Director

June 16, 2016

Dear CAPTA Panel Members:

Thank you for your service to the children and families of Georgia. Your participation as a member of a CAPTA panel provides invaluable insight to the Division as we strive to build a better future for this state by developing the best child welfare agency in the world. Many of you are aware of my plan to realize this vision. Known as the Blueprint for Change, it is a three-pillar approach to reforming Georgia's social service system.

- The first pillar includes the establishment and adoption of a practice model that will serve as the foundation to keep children safe and strengthen families.
- The second pillar focuses on developing a robust workforce for the Division, both in numbers and level of expertise and training.
- The third pillar is focused on constituent engagement, which is an effort to engage with the public to build consensus and collaboration among partners, staff and stakeholders.

I share this with you since I view your participation as a key piece of pillar three and since your recommendations seem to echo the importance of the first two pillars – safe and strong families and a robust workforce. In many ways the Division is already addressing the recommendations of the panels and I believe this is reflective of strong working relationships and growing collaboration.

Over the course of the following pages you will find the Division's written response to your recommendations. We value the time and effort put into your recommendations, we value even more the day in and day out work you do and the dialogue we have throughout the year that helps propel us toward our vision of safe children, strengthened families, and stronger communities.

Thank you again for your commitment and service to Georgia.

Sincerely,

Director

GA CAPTA PANEL 2015 RECOMMENDATIONS

DFCS RESPONSE

CHILD PROTECTIVE SERVICES ADVISORY COMMITTEE - RECOMMENDATION #1

During 2015, the CPSAC continued its work related to its workforce survey conducted in 2014. Related recommendations address their ongoing concerns related to high staff turnover and poor morale at the child welfare agency. These include:

Workforce

- Developing a retention and succession plan, including qualifications, educational background, and selection criteria for County Directors
- Reducing the time it takes the Division to hire new employees from an average of 115 days (or 4 months) to 60 days (or 2 months)
- During the state FY 2017, reviewing the physical workplace environment for county staff in the offices where turnover exceeds 30%, paying particular attention to:
 - o Lighting levels in all interior and exterior work areas
 - Quality of break rooms
 - Quality of meeting rooms, especially those visited by the public for visitation, adoption, and staffing; and waiting rooms
 - o Solicit suggestions for improvements/changes from the local staff

DFCS RESPONSE

The Division acknowledges the negative impact that high turnover has on both worker morale and job performance. In a deliberate effort to greatly stem turnover, the Division has developed a number of strategies targeted toward strengthening its workforce. These strategies include:

- Utilizing the "Employee Selection Process" (ESP), a research-based method for recruiting and selecting individuals who very likely have what it takes to be successful in the field of child welfare. While ESP is not used for levels above front-line, the CPSAC's recommendation to place attention on the selection of County Directors is well received and in line with the Division's intent that selection, regardless of position being filled, is handled thoughtfully with focus on required competencies and individual fit. The hiring of County Directors now follows a Standard Operating Procedure (SOP) and includes both Required and Preferred Qualifications for the position. Qualifications vary somewhat depending on the Level of County Director being hired, with Level largely being determined by county size, but required qualifications for all County Director positions include supervisory experience and child welfare background.
- The time it takes to onboard new staff is currently far too long. This concern has been voiced by the Division's Director directly to the Commissioner of the Department of Human Services (which is where the Office of Human Resources is housed). Action is being taken currently to resolve this.

- Quality supervision is critical to retention of front-line staff. A Supervisor Mentor program is being piloted with the goal of demonstrating effectiveness as part of an overall supervisor development program. Currently, the Division is dedicating two full-time mentors to the program. It is hoped that eight additional will be funded in FY18.
- A Career Path plan is in final design phase and will be introduced with request for funding in FY18. Historically, increase in salary is achieved only through advancement into a higher level position (i.e. front line staff to supervisor). The Career Path will allow individuals who wish to remain in their job the ability to do so while being afforded ability to increase salary by, among other things, earning various certifications related to their current job function.
- A Field Practice Coach program is being implemented which assigns a new worker to a seasoned peer who provides support and guidance around practice expectations, office functions and community connections.
- The IV-E Education Program has been recently reinstated with five schools of social work participating. Studies reveal that IV-E graduates are much more likely to remain on the job given the knowledge and understanding they acquire about the Division when participating in their field experience. A number of schools offer a Masters in Social Work degree program to which Division Staff are free to apply for acceptance. It is expected that the IV-E Program will grow considerably over the coming years.
- Retention improves when individuals feel connected to something worthwhile and when they are appreciated for their contribution. The Division is about to embark on a re-branding initiative called #iamtheblueprint. The initiative will serve in large part to demonstrate the contributions of all who serve within the Division and that the positives far exceed the negatives.
- Succession planning within the Division, as recognized by CPSAC, has been inadequate, leaving the pool of potential leaders limited. Knowing that strong leadership is essential to establish and maintain a healthy work culture which promotes retention, the Division recently accepted an invitation from Casey Family Programs to participate in their Leadership Fellows program. The program will allow Division participants to join with participants from states across the county to share ideas and strategies related to leadership development, inclusive of succession planning.
- Last year the Office of the Inspector General was tasked by the Commissioner's Office to perform a Site Assessment Survey. The Agency will reexamine the report for insight into issues around physical work environment that may contribute to turnover or staff morale issues.

CHILD PROTECTIVE SERVICES ADVISORY COMMITTEE – RECOMMENDATION #2

With CPSAC's longstanding interest in improving the quality and consistency of reports of suspected abuse to the child welfare agency and the response by the agency to those reports, CPSAC presents this follow up to a previous recommendation:

Reports of Suspected Child Abuse

Based on changes in child welfare law, policy and practice and changes or improvements to the central intake system, including electronic reporting options, provide ongoing public education and awareness on:

- Recognizing child abuse and neglect and training availability
- Obligations to report suspected abuse and what to report/not report
- Options for making a report and what to expect

Furthermore, the CPSAC also recommends that the Division solicit feedback regularly from mandated reporters on their experiences in making/filing a report and evaluate the quality and effectiveness of mandated reporter training available.

DECC RECOVER

DFCS RESPONSE

The Division has implemented several strategies to increase public awareness around recognizing and reporting child abuse. They include:

- Hosting a four-day roadshow in each region. Information regarding the importance of recognizing
 and reporting child abuse is shared with each stakeholder group (law enforcement, judges, foster
 parents, private providers, the faith community, community partners and the general public by
 way of a Town Hall Meeting).
 - Roadshows held in 9 Regions (7 in 2015, 1 in 2016 as of May 1- with an additional 6 Roadshows scheduled for the remainder of 2016.)
 - Additionally, a portion of the information shared at the Town Hall Meeting focuses on informing the public of the effects of trauma on a child's brain and the importance of traumainformed practice.
- Partnering with Prevent Child Abuse Georgia to distribute information about child abuse
 prevention and reporting during Child Abuse Prevention Month as well as purchase calendars for
 public distribution that share prevention tips as well as information about the importance of
 reporting suspected child abuse.
- Continually reinforcing the importance of reporting suspected abuse in media interviews and when Director Cagle is speaking to the public.

Since the inception of the CPS Intake Communication Center (CICC) in 2014, the State has seen a 60% increase in the number of reports of child abuse and neglect with a current average of 5,500 referrals received weekly. While many factors impact the number of reports of suspected child abuse and neglect received by the state, the Division believes that the substantial increase in reports supports the notion that the public, including mandated reporters, is aware of the importance of reporting suspected abuse and aware of the process to do so.

To ensure mandated reporters are well educated, the Division works with Care Solutions to provide mandated reporter training statewide. From October 1, 2014 to September 30, 2015 training was completed by 20,878 mandated reporters. From October 2015 to present an additional 10, 334 mandated reporters have completed the training. All those who complete the training are required to complete a survey about their experience as mandated reporters and any ongoing concerns.

Since introducing electronic forms of reporting for mandated reporters, the agency has seen a significant increase in the use of these options. As of March of 2016 electronic reporting has outpaced telephone reporting by 10%.

The CICC staff has continued to provide education to mandated reporters across the state at every opportunity including schools of social work, the Office of the Child Advocate, Office of the Inspector General, statewide law enforcement agencies, school systems, community groups including religious based groups, scouting groups, and local child advocacy groups.

The Division appreciates the importance of keeping the public, including mandated reporters, informed about the importance of recognizing and reporting suspected child abuse and/or neglect. While the Division has already made substantial efforts to educate mandated reporters, we also intend to review much of the existing mandated reporter training in the coming year and revise as appropriate.

Related to the issue of reporting suspect child abuse, the Division is transitioning to a new process where all assigned cases are initiated within the assigned time frame (immediate to 72 hours) for the completion of the Initial Safety Assessment (ISA). Under this new process, the track assignment of CPS Investigations or Family Support Services is determined based on the findings of this Initial Safety Assessment. The objective is a seamless and immediate, if possible, flow for families between the initial assessment and the initiation of track related processes and assessments.

CHILDREN'S JUSTICE ACT TASK FORCE – RECOMMENDATION

During 2015, the Task Force focused its efforts on follow-up related to the three-year assessment, establishing two committees to advance those interests. Recommendations from those committees will be included in the 2016 annual report. However, with respect to their ongoing consultation in the administration of the state's Children's Justice Act grant, the Task Force recommends continued support of several projects, including:

- ChildFirst training for investigators
- Summer internships for law students in the field of child advocacy
- Efforts to maintain an effective Child Abuse Protocol that is reflective of federal and state child welfare law, policy and practice
- Training for first responders and local child fatality review committee members on recognizing maltreatment as a factor or cause in child death and/or near-death or serious injury cases
- Improving the consistency of maltreatment terminology among the Georgia Code, state agencies with child caring responsibilities, other stakeholders, and the state's child welfare agency policies
- Training for individuals, Court-Appointed Special Advocates (CASAs) and/or guardians ad Litem (GAL), who represent children in dependency cases

DFCS RESPONSE

The Division recognizes the prioritization of CJA funding for coordinated, multidisciplinary approaches that improve the investigation, prosecution, and judicial handling of cases of child abuse and neglect, and in particular, training related to victims with special needs, commercial sexual exploitation of children, and maltreatment-related child fatalities. The Division supports the areas the Task Force has identified as

priorities and looks forward to working with the Task Force to facilitate CJA grants once the Task Force has completed its proposal review process and shared its final recommendations with the Division.

The Division recognizes the value of consistency in the child abuse and neglect definitions across various sections of the Georgia Code. The recommendations from the CJA Taskforce and the related Barton Policy and Law Center research further confirm and support this need. Over the next year, the Division will be working with relevant stakeholders to review the recommendations and to determine strategies for pursuing potential legislation to streamline the definitions and facilitate an improved response to child abuse and neglect across the various agencies that are involved with children and families in Georgia.

CHILD FATALITY REVIEW PANEL - RECOMMENDATION #1

In 2015, the Child Fatality Review Panel, made a considerable effort to enhance their examination and reporting on maltreatment-related child fatalities. This effort was reflected in their annual report. Recommendations included in the report related to the prevention of child abuse and neglect-related fatalities, are as follows:

Child fatality review committees determined that maltreatment was the direct cause or contributing factor in 99 deaths (maltreatment includes abuse, neglect, and poor supervision) during 2014. In response to these deaths, the annual report identifies several findings and recommendations related to the prevention of child abuse and neglect -related deaths from the Child Fatality Review Panel and/or from local child fatality review committees.

The Child Fatality Review Panel recommends increasing collaboration between the Department of Public Health (DPH) and the Division of Family and Children Services to assure Part C evaluations be completed, that the recommended services be utilized, and a smooth transition is achieved at age 36 months into Early Head Start or special education. This can have tremendous protective potential to reduce child maltreatment in our youngest and most vulnerable citizens.

DFCS RESPONSE

Partnership with Department of Public Health (DPH) for Children 1st/Babies Can't Wait Program

The Division through its Well-Being Services Section/Wellness Programming, Assessment and Consultation (WPAC) Unit continues to work in close partnership with DPH through its Office of Children and Youth with Special Health Care Needs /Maternal and Child Health. Over the past several months both Departments have worked collectively to review the existing Memorandum of Understanding (MOU) that outlines our partnership related to early developmental screenings for children engaged with Georgia's child welfare system. The MOU is being revised to reflect DFCS' new case practice, reaffirm mandates related to CAPTA requirements, and include a more robust data gathering component with expectations related to partnership, standing meetings, and improving the service delivery model.

Head Start and Early Head Start Collaboration

Recent research in the neurosciences has established that around 80 percent of brain development takes place by the time a child is five-years-old, with the first three years seeing the maximum growth. Care and education in these early years give children a head start on skill development, school readiness, and future educational success. Access to quality early childhood care and education should be the fundamental right of every child from the prenatal stage onward.

In an effort to provide resources to our families of children in foster care between the ages birth to five the Division is partnering with the federal and local Office of Head Start to connect them to available Head Start education programs within their community. Georgia Head Start and Early Head Start programs provide comprehensive early childhood and family development services to children from birth to five-years-old, pregnant women, and families. These programs have a long tradition of delivering comprehensive and high quality services designed to promote healthy development for low-income children and their families. Head Start and Early Head Start programs support the mental, social, and emotional development of children from birth to age five. This partnership will afford our children in foster care the opportunity to:

- Access programming that supports early brain development
- Promote school readiness
- Increase the child's capacity to relate positively to family members and strengthen the family's ability to relate positively to the child
- Help improve the overall social, emotional, and physical well-being of the child

For every child under five years of age who enters into foster care, an *Early Childhood Education Form* should be completed. This form will be used to track the educational services provided to children in foster care. For those children within families who do not have an identified early childhood education plan, a DFCS Head Start Referral will be made. Below you will find the protocol for supporting foster youth under five years of age.

Early Childhood Education Support Protocol

The following protocol will be implemented to support the early childhood education development of our children in care:

- 1. Effective February 1, 2016, once a child under five years of age enters into foster care, the child's Case Manager should complete the *Early Childhood Education Form*.
- 2. The case manager will submit the form to the DFCS Head Start Collaboration Program Manager at dfcs.headstart@dhs.ga.gov within five business days.
- 3. The DFCS Head Start Collaboration Program Manager will review the *Early Childhood Education Form* and identify if the child is in need of Early Head Start or Head Start services.
- 4. If a request for Early Head Start or Head Start services has been made, a referral will be sent to the local Head Start agency based upon the child's boarding zip code.
- 5. Within ten business days of the receipt of a referral, the Head Start agency will make contact with the referred child's caregiver to begin the application and enrollment process.

- 6. If the child is unable to be enrolled in the program, the Head Start agency will contact the child's caregiver with additional follow-up.
- 7. A copy of the *Early Childhood Education Form* should be uploaded into the child's case file within SHINES under School Records.

In addition, Director Cagle is working with Commissioner Amy Jacobs of the GA Department of Early Care and Learning to change policy to make all children in foster care categorically eligible for child care with an emphasis on placing children in facilities that are quality rated.

CHILD FATALITY REVIEW PANEL - RECOMMENDATION #2

Further recommendations cited in the report from local child fatality review committees include:

- Increasing public education and awareness opportunities on recognizing child abuse
- Increasing opportunities for mandated reporter training in communities
- Screening parents of children ages 0–5 in pediatric primary care settings to identify parental exposure to partner violence, mental illness, or substance abuse and provide appropriate referrals
- Increasing awareness and utilization of support services by at-risk families, including evidencebased home visiting programs and parent education programs
- Increasing awareness of the 1-855-GA CHILD hotline for the CPS Centralized Intake Communication Center

DFCS RESPONSE

Public Education, Mandated Reporter Training, & Awareness of Centralized Intake Hotline

The need to increase public education and awareness around issues of recognizing child abuse, of providing effective training of mandated reporters, and ensuring the public is aware of the 855-GA CHILD hotline are clearly important as evidenced by similar recommendations from both the Child Protective Services Advisory Committee (CPSAC) and the Child Fatality Review Panel. Please see the relevant response to CPSAC Recommendation #1 earlier in this response. In addition to that response, the Division affirms that it is fully committed to ensuring mandated reporters have access to quality training that is up-to-date and consistent with state law and policy. In keeping with the objectives set out in the existing CAPTA plan, DFCS has worked with partners including what was previously known as the Governor's Office for Children and Families, with Prevent Child Abuse Georgia, Care Solutions, and Children's Health Care of Atlanta to develop and offer three distinct mandated reporter trainings. All three are available as online courses and can be accessed from the DFCS website (http://dfcs.dhs.georgia.gov/trainings-events). There is a general mandated reporter training, one targeted to medical professionals, and one targeted to school personnel. The Division is also working with our partners to develop face-to-face mandated reporter training and increase awareness of these on-line training courses. Descriptions are as follows:

Mandated Reporters: Critical Links in Protecting Children in Georgia

Who is a mandated reporter? Every child care provider and many other professionals who come

in contact with children are important parts of Georgia's plan to eliminate the abuse and neglect of children. In this one-hour online course, you will learn to better recognize the indicators of abuse and neglect, understand your role in responsible reporting, and identify the groups of children that may be at a higher risk of being abused or neglected.

Mandated Reporting Requirements: A Track for Georgia Medical Professionals

Certain individuals in Georgia are required by state statutes to report suspected child abuse and neglect. There is a system in place to intervene on behalf of children who may be abused or neglected and to secure their safety. In order for this system to function, however, someone must first identify and refer the children who might be in need of protection. This course was written specifically for medical professionals (like doctors and nurses) in frequent contact with children. Medical professionals will learn about their legal responsibility to report suspected abuse and neglect.

Child Abuse and Neglect: Mandated Reporting Requirements for Employees, Volunteers, and Contractors of Georgia Public Schools

Certain individuals in Georgia are required by state statutes to report suspected child abuse and neglect. There is a system in place to intervene on behalf of children who may be abused or neglected and to secure their safety. In order for this system to function, however, someone must first identify and refer the children who might be in need of protection. This course was written specifically for individuals employed by the Georgia Department of Education (like public school teachers and principals or school volunteers) in frequent contact with children.

Screening Parents in a Pediatric Care Setting

The screening of parents in a pediatric care setting is not within the purview of the Division. However, the Division does understand the importance of screening, identification, and referral to services for issues including partner violence, mental illness, and substance abuse so we will share this recommendation with our Department of Public Health partners in the Maternal and Child Health section since they may be the more appropriate entity to follow through on this recommendation.

<u>Increasing Awareness and Utilization of Support Services by At-Risk Families, Including Evidence-</u> Based Home Visiting Programs & Parent Education Programs

The Division agrees that it is important to both increase awareness and utilization of services by at-risk families and to provide or refer to evidence-based programs whenever possible. One way in which the Division is focusing on these efforts is through the Promoting Safe and Stable Families Program (PSSF) which is designed to provide child welfare funding, training and technical assistance to support children and families most at-risk and build state and community capacity. Community-based services in Georgia are designed to reinforce ongoing service and population priorities, support the state's new five-year Child & Family Services Plan for FFY 2015-2019 (CFSP), and address needs as identified in the state's service array assessment.

PSSF increased the number of PSSF service providers from 122 in FY 2014 to 143 in FY 2015. In addition, PSSF served families in 152 counties in FY 2014 and served families in 155 counties in FY 2015. PSSF will continue to assess the needs of communities

Georgia's PSSF funding will continue to create a network of community-based, family-centered agencies that will provide an array of services to our most vulnerable children and families in hopes of reducing abuse and neglect, unnecessary separation of children from their homes and provide necessary supports and resources to help stabilize crisis, improve family functioning, and keep the family intact. Georgia PSSF provides an array of services and currently collaborates with 143 community-based agencies to provide services throughout the State of Georgia.

PSSF FAMILY SUPPORT services: Community-based prevention and early intervention services are designed to prevent and reduce the risk of child maltreatment by promoting the well-being of the entire family. All services are designed to build on existing family strengths, increase the stability of families, increase parental confidence and competence in their parenting abilities, and enhance overall family functioning to prevent initial or repeat child abuse and neglect.

Target Populations: PSSF Family Support services are provided to families in Georgia who are at risk for CPS involvement to reduce risk and prevent child maltreatment. This includes families:

- Not known to the child welfare agency
- Who have been the subject of a report of suspected child abuse or neglect who:
- Were assigned to Family Support
- Were screened out or were the subject of an unsubstantiated investigation
- Have prior CPS history (closed but referred for follow-up supports/services)

We estimate that 7,000 individuals and 2500 families will be served in FFY2017.

Services to be provided in FFY2017:

Prevention & Early Intervention: Voluntary, in-home or center-based supports and services to help families identify and address family issues that threaten child safety, strengthen family protective capacity, reducing the risk of CPS intervention.

Home Visiting: Voluntary, in-home services to support positive parent-child relationships, child health and development, parental self-sufficiency, and safe home environments to prevent child abuse and neglect.

Healthy Relationship & Co-Parenting: Services are designed to build and maintain healthy partnerships, identify and manage stress that threatens relationships, and promote and support life-long parental or coparenting relationships.

Supports & Services for Homeless Youth: Services to help unaccompanied homeless youth or victims of sexual exploitation transition to independent living and become self-sufficient through community involvement and relationships, education, employment, health, and safety.

In addition to the work being done by the PSSF program, The Office of Prevention and Family Support (OPFS) within the Division also promotes the health, safety, and wellness of Georgia's children and families. OPFS work includes:

- Developing and enhancing community-based projects and prevention strategies which provide primary and secondary prevention programs for families to prevent child abuse and neglect;
- Developing and maintaining state and local interagency collaborative efforts through systems integration and systems change aimed at improving outcomes for families and communities;
- Developing and promoting services for the traditionally underserved populations and raising awareness of these populations in Georgia;
- Assisting parents in gaining the knowledge, skills, and opportunity to shape policy, programs and services that impact families;
- Providing training, technical assistance and evaluation infrastructure needed to support the
 implementation of high-quality, evidence-based programming that enhances knowledge of early
 childhood education, child maltreatment prevention, abstinence education, youth development in
 order to build state and community capacity to meet the needs of families at risk of child welfare
 intervention and families in crisis; and
- Engaging all sectors of the community in child abuse prevention programs and activities.

An important element of OPFS programming is the development of a strengths-based, prevention-driven community response to vulnerable children and families. Families at greatest risk of entering Georgia's child protection system often have complex and interrelated problems such as poverty, unemployment, domestic violence, substance abuse, and teen pregnancy which increase family stressors, impair family functioning, and place children in situations where they may be unsafe. Children have the greatest chance for a safe and stable home environment when their parents and caregivers are knowledgeable of and have access to essential supports and services in their own communities. All OPFS services MUST utilize evidence-based practices, strategies, or program models in addressing the needs of the target population and achieving desired outcomes.

OPFS works in partnership with community-based organizations committed to reducing the incidence of child abuse and neglect by taking a universal approach to strengthening families, as well as targeting atrisk families with evidence-based prevention and early intervention techniques to ensure positive outcomes for children and families. State and federal funding provides families throughout Georgia with services such as parenting courses, screening and identification tools, training opportunities, high-quality home visitation, and primary, secondary maltreatment prevention that helps local communities promote the overall health and well-being of Georgia's children, youth, and families.

A key component to OPFS' strategy for services to expectant parents, children birth to five, and their families is evidence-based Home Visitation Services. These services are voluntary, in-home support and educational services designed to enhance parental capacity to care for children, strengthen parent/child relationships, and help families identify and access community resources. Home Visitation programs offer a variety of family-focused services to expectant parents and families with new babies and young children. Home Visitation programs address issues such as maternal and child health, positive parenting practices, safe home environments, and access to services. Home Visitation services utilize an evidence-based home

visitation practice model to support positive parent-child relationships, promote optimal child health and development, enhance parental self-sufficiency, ensure safe home environments, and prevent child abuse and neglect.

OPFS funds several different types of evidence-based prevention programs:

- Programs to reach parents at the time of birth
- Home-based parenting programs
- Group-based parent training/coaching programs
- School-based parenting programs
- Programs for teen parents and programs for families with children with special needs
- Programs that teach children life skills for prevention

The Division estimates that approximately 30,000 children, youth, or families will be served in FFY2017. In addition, estimates are that at least 20,000 individuals will receive training within the OPFS. All counties in GA are reached through at least one prevention practice/strategy.

Through OPFS' Annual Statement of Need(s), the special populations at risk of maltreatment that OPFS will target include:

- Grandparents Raising Grandchildren
- Children birth to five and their families
- Prenatal families
- Children with special needs and their families
- Children deaf and hard of hearing and their families

Georgia OPFS funding will continue to create a network of community-based, family-centered agencies that provides an array of services to our most vulnerable children and families in hopes of reducing abuse and neglect, and improve family functioning in order to create safe, stable, and nurturing relationships and environments for our children and families. OPFS provides an array of services and currently collaborates with over 100 community-based agencies to provide primary and secondary prevention services throughout the State of Georgia.

SafeCare Augmented: SafeCare Augmented is an Evidence Based Family Visitation Program for children ages zero to five. In the coming year, the Division will restructure the program with the explicit goals of improving service delivery, eliminating regional constraints, maintaining accountability, and managing funding. The restructure of SafeCare Augmented will improve data maintenance, outcome measurement and provider performance. It will create an environment for effectively evaluating evidence of increased parental capacity, self-sufficiency, and child safety. It will strengthen the family's potential for program completion, decrease repeat maltreatment and recidivism.

Sleep-Related Deaths

The Division is well-aware and appreciative of the work that has been done by the Child Fatality Review Panel around sleep-related deaths and also wants to share progress on this issue. Having identified unsafe sleep as a major contributor to child fatalities in Georgia, the Division committed significant time and

funding to issues around safe sleep. CAPTA funds supported a joint effort between DFCS and the Division of Public Health to educate DFCS social services staff and families receiving services from DFCS on strategies to prevent infant sleep related deaths through training, access to resources and community awareness. Funding has covered a variety of needed supplies including educational flip charts, safe sleep flyers, baby sleep sacks, and crib displays for county offices. The DFCS Infant Safe to Sleep Initiative was developed in partnership with Georgia State University, Georgia Child Fatality Review Panel and Georgia Department of Public Health to offer training and resources to families. It was developed to increase the critical thinking skills of staff to educate parents on infant safe sleep practices. This campaign provides a video or flipchart created for the state of Georgia on Safe Sleep Practices for Babies. Case managers are required to take a Train the Trainer course on how to implement and use the Safe Sleep video. Every case manager in the state is to use the video to have a conversation with families who have children under the age of 12 months in their homes. This training and video are also being provided and required of stakeholders under contract with the agency. The expectation is that private providers will also provide this training to their families. In the coming year, the Division will be tracking sleep-related deaths with the hope and belief that we will then be able to report a drop in such tragic and preventable deaths.

ALL PANEL - CLOSING STATEMENT

On behalf of the members of Georgia's CAPTA Panels, the 2015 annual report and recommendations are respectfully submitted for review and consideration by the Division. CAPTA Panel members look forward to an ongoing dialogue on our shared priorities, the Panels' recommendations included in this report, and the state's response to those recommendations.

We want to express our sincere appreciation to Director Cagle and the leadership team at the Division for their continued support of the Panels and the validation of our contributions. We are especially appreciative of the respect, transparency, and responsiveness of the Division in helping to fulfill our mandate as CAPTA Panels. We look forward to continuing our excellent working relationship.

DFCS RESPONSE

Director Cagle, the leadership team, and all of the Division appreciate the relationship that has developed with members of Georgia's CAPTA Panels. The contributions made by the Panels in their entirety and by their individual members have added immeasurably to the Division's work. As the Division reviewed this year's recommendations and prepared a response, the Division found it encouraging to realize so much work was already being done that aligned with the recommendations. This is in part a function of the year-round contributions of and feedback from Panel members and the on-going communication between the Panels and the Division Leadership. Thank you for your service to Georgia's children and families. We look forward to the year ahead.