

Connecticut Response to Citizen Review Panel Recommendations - 2006

Category	Recommendation	State Response	Responsible Party
<p>Foster Care</p>	<p>Develop Practice Standards for CAFAP Liaisons</p>	<p>The Department of Children and Families is in process of enhancing our Foster Care Program incorporating feedback and recommendations made by our Citizen Review Panel and other key stakeholders. A statewide Foster Care Plan is being developed that is designed to improve outcomes for children placed in out of home care. This plan outlines significant changes within Foster Care Services that are necessary to improve foster care operations in the state. In an effort to understand current operations, the Director of Foster Care Services elicited feedback from agency staff, foster parents, foster parent support groups and private agency providers. This feedback is the foundation of the Department's Foster Care Plan. The plan targets the following key components:</p> <ul style="list-style-type: none"> ◆ Restructuring and Reorganizing the Foster Care Staffing Structure to standardize services statewide. ◆ Standardize Policy and Procedures in area offices relative to foster care operations and to establish staff productivity standards as a means of addressing the variations in practice, policies and procedures statewide. This will include the role/responsibility of CAFAP liaisons. ◆ Develop and implement new training programs for foster care staff, protective service staff and foster and adoptive parents. ◆ Develop a statewide plan aimed at retention of existing foster homes. A number of barriers have been identified in our current practice that if 	<p>Bureau of Child Welfare – Division of Foster Care Services</p>

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		<p>remedied, would enhance foster parent retention, recruitment and ultimately increase the level of support available to foster families. These issues will be incorporated into the Department's Foster Care Plan.</p> <ul style="list-style-type: none">◆ Develop a statewide plan to enhance recruitment efforts. The Foster Care Division has established a Memorandum of Agreement with UCONN to gain a better understanding about foster parenting and evaluate statewide recruitment efforts from a community perspective. UCONN will analyze the data and provide recommendations. This will inform practice and recommendations for future recruitment activities.◆ Reorganize and enhance support system available to foster and adoptive parents including more effective use of CAFAP liaisons.◆ Maximize effectiveness of Private Agency Providers Contracts. The Division will be reviewing and evaluating existing contracts to determine their overall effectiveness and make modifications as necessary in conjunction with the internal changes being implemented within the Division of Foster Care Services. <p>This comprehensive plan incorporates many of the recommendations made by the State Advisory Council. This plan will be available for review once fully articulated. The full implementation of these enhancements to Foster Care Services will require considerable effort and extend beyond the department's ability to accomplish this year.</p>	
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		Timeframe: Uniform Practice Standards for CAFAP Liaisons will be developed and incorporated into contract. To be determined.	
	Initiate immediate referrals to CAFAP Liaisons following placement	<p>The Department recognizes the support CAFAP liaisons can offer to foster families and fully supports this recommendation. The Department recommends the CAFAP liaison make contact with the foster family within 3 days of placement.</p> <p>Timeframe: This requirement will be incorporated into contract. Time to be determined.</p>	Bureau of Child Welfare – Division of Foster Care Services
	Develop brochure for foster parents	<p>This past year, the Foster Care Division modified the brochure offered to foster families to reflect the change in philosophy and to educate the community about the Resource Family model. The brochure provides information about the options available to families who want to care for children and illustrates the importance of developing a partnership between the birth parent, foster parent, adoptive parent and the agency.</p> <p>The resource family model is a nationally recognized model that promotes partnership and collaboration between foster, adoptive and birth families and the child welfare agency. The model is child-focused with timely permanency as the goal. Resource families commit to being a permanent resource to the child in their care regardless of the permanency plan. In partnership with DCF, the resource family works toward the goal of reunification, becomes the adoptive family, or assists in transitioning the child to an adoptive family. Ideally, implementation of this model will reduce the number of moves for each child and provide them with a permanent</p>	Bureau of Child Welfare – Division of Foster Care Services

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		lifelong connection to a caring adult. Resource families play an active role in linking the child to their past as well as helping promote family relationships in the future. Timeframe: Completed	
	Data Collection – CAFAP liaisons activities	The department has made some important adjustments to several data elements collected through our Kid-Hero line as well as our monthly activity report submitted by the area offices. Other data elements that describe CAFAP liaison activities may be identified and incorporated into the contract. Timeframe: To be determined.	Bureau of Child Welfare – Division of Foster Care Services
	Exit interviews conducted by independent agent	Exit interviews are currently being conducted by an independent party. UCONN has been asked to review our current foster parent questionnaire and make recommendations in order to maximize the information gathered and increase the number of respondents completing the questionnaire. This practice will continue pending further review of existing contract. Timeframe: Completed.	Bureau of Child Welfare – Division of Foster Care Services
	Develop intake/discharge form to capture data	The Department continues to analyze and refine its data sources and reports related to foster care. This is an ongoing managerial task. Timeframe: To be determined.	Bureau of Child Welfare – Division of Foster Care Services
	Develop protocol to support foster families during investigation process	The Division of Foster Care and the Special Investigations Unit have developed a protocol to support foster families through the investigation process that involves outreach (phone and face-to-face contact) from the Area Office Support Worker assigned to the family. Additionally, a brochure has been developed for foster families outlining their rights, informing them of the investigation process,	Bureau of Child Welfare – Division of Foster Care Services/ Special Investigations

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		<p>regulatory issues, investigation findings and suggested remedies they may act upon should they disagree with the department's findings. The brochure also includes website addresses foster families can access for resources and additional supports.</p> <p>Timeframe: Completed</p>	
	<p>Department to clarify confidentiality issues with foster families</p>	<p>The Department recognizes the importance of foster parents having access to information that would allow them to help care for a child in their home. The Foster Care Management Team will work closely with the Legal Division to clarify the issue of confidentiality and will distribute the information to staff. This information will be incorporated into policy and training currently being developed for DCF staff and foster parents. Staff will be encouraged and supported in involving foster parents in all areas of planning and treatment for children placed in their care so they can access appropriate information and provide optimal care.</p> <p>Timeframe: To be determined.</p>	<p>Bureau of Child Welfare – Division of Foster Care Services/ Legal Division</p>
	<p>Provide opportunities for foster children to participate in community activities</p>	<p>The Division of Quality Management and the Monitor's Office conduct qualitative case reviews to assess whether the department is meeting the needs of children in out of home care. Information obtained as a result of these reviews will help determine action steps. The Department recognizes the importance of and supports foster children being fully integrated into their community. Funding is available for children to participate in community activities (e.g. sports, dance, summer camp etc.) to improve self-esteem and their sense of belonging to the community.</p> <p>Timeframe: Current.</p>	<p>Bureau of Child Welfare – Division of Foster Care Services</p>

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Communication	Develop process to identify issues/concerns statewide that are addressed through the SAC	The Area Advisory Co-Chairs meet quarterly with representatives from Central Office, Area Office Directors and the State Advisory Council for information sharing and technical assistance. These meetings provide a forum and an opportunity to discuss state and local issues on an ongoing basis. Timeframe: Current	Bureau of External Affairs
Training	Develop training for caseworkers – support to foster/adoptive families	The Foster Care Division and the Training Academy are collaborating to develop a training program specific to CPS staff that emphasizes a team approach and the importance of developing partnerships with foster families and birth families to enhance service delivery. Timeframe: To be determined.	Training Academy/ Foster Care Division
	Offer training through the Training Academy to CAFAP staff	Training offered at the Training Academy has and will continue to be made available to CAFAP liaisons. Efforts will be made to ensure timely notification of available training opportunities. In-service trainings are posted on the Training Academy’s website. Timeframe: Ongoing.	Training Academy
	Develop 5 day orientation training to new Social Work Staff, mentoring and reduced caseload	The Department’s primary obligation at this time is to maintain caseload standards established through the Exit Plan. The department has extended considerable efforts in this regard and has made progress towards sustaining the established goal. Restructuring our training program as described would impact the assignment of cases to trainees significantly. A change of this magnitude would seriously compromise our ability to maintain caseload standards and have significant collective bargaining and fiscal implications. Although the Bureau of Child Welfare recognizes the importance of training new staff and building competencies over time, the Department is not in	Bureau of Child Welfare

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		<p>a position at this time to implement this recommendation. The Department will continue to evaluate the process to train and educate new staff and will make adjustments as necessary to strengthen the program.</p> <p>Timeframe: Recommendation cannot be accommodated at this time.</p>	
	Develop stronger component of cultural diversity training	<p>The Training Academy has established a training curriculum on cultural diversity and cultural competency. CRP members are invited to review current curriculum and identify gaps in training. The Department encourages interested CRP members to participate in the Training Academy Advisory Board.</p> <p>Timeframe: Current.</p>	Training Academy
	Additional training on mental health –parents/children and service delivery	<p>The Training Academy offers a number of training sessions on mental health issues. CRP Panel members are invited to review current curriculum offered and identify areas to modify, expand or eliminate. Additionally, the Department encourages interested CRP members to participate in the Training Academy Advisory Board.</p> <p>Timeframe: Current.</p>	Training Academy, Behavioral Health Division
	Encourage local school systems to receive mandated reporter training and evaluate rates of unsubstantiated allegations. Retrain if needed.	<p>Each area office has designated staff to educate the local community and local school systems on Mandated Reporting on an ongoing basis. This increases the availability of trainers statewide as well as facilitates and enhances community relationships. All Area Office Staff have successfully completed the curriculum established and provided by Training Academy personnel. Many schools request this training through the Training Academy or directly with the Area Office on a yearly basis prior to the start of the school year. The content of the training includes information about CT reporting laws, operational definitions of abuse/neglect, outlines the</p>	Bureau of Child Welfare

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		<p>procedures for initiating a report to the Hotline, informs the reporter of the investigation process, the penalties for false reporting and the importance of submitting a written W-136 – Report of Suspected Abuse to the Area Office. The Department encourages schools to communicate with the Area Office directly should their staff have any questions whether a report to the Hotline is required and/or to inquire about DCF policies/procedures.</p> <p>The Department is cautious about intervening with an entity that has a high rate of unsubstantiated allegations. We want to continue to encourage, not discourage the filing of a report when there is suspected abuse/neglect. Specific problems related to mandated reporting can certainly be addressed at the local level.</p> <p>In a letter to the Superintendents of Schools dated 11/20/06, the DCF Commissioner and the interim Commissioner on Education reminded the schools of their responsibility and legal mandate to establish policy on mandated reporting; recommending each school district review and revise current policy and procedures to facilitate an immediate and coordinated response to suspected child abuse and neglect. The letter outlines general information and reporting requirements, provides a resource to access additional information and offers the DCF Training Academy as a support to assist in training school personnel about mandated reporting.</p> <p>Timeframe: Current.</p>	
	<p>Enhance training opportunities for staff in areas of domestic violence,</p>	<p>Domestic Violence: See information under Family Engagement/Practice Enhancements.</p>	<p>Bureau of Child Welfare/</p>

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	<p>family centered practice, interviewing and substance abuse etc.</p>	<p>Interviewing: See information under Investigations Section.</p> <p>In an effort to enhance the treatment planning process, the Department adopted a Family Conferencing Model. This initiative increases opportunities to partner with families and provides a structure for engaging parents and their networks that focus on client needs and strengths. The primary goal of this initiative has been to increase the level of family involvement in DCF case planning.</p> <p>For years, Treatment Planning Conferences and Administrative Case Reviews were the only mechanism for family participation and involvement in case planning. The department has struggled engaging families in this process. Many parents have elected not to attend these meetings and have minimally participated in developing their own case plans. The family conferencing model shifts the focus and intent of these meetings to problem-solving, increasing the likelihood that parents and their natural supports will attend and actively participate in case planning.</p> <p>The department now seeks to initiate a family conference with all cases and include those supports identified by the family in the treatment plan. This model is designed to enhance and amplify the Department's existing efforts to engage extended networks in supporting families at the beginning stages of DCF involvement. The department recognizes the need to engage families throughout DCF involvement and has developed plans to implement family conferencing at critical junctures throughout the life of a</p>	<p>Training Academy</p>
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		<p>case. Family Conferencing is also encouraged in cases where children are placed in DCF care, particularly at the point of placement disruption and/or at time of reunification.</p> <p>The Department's Family Conferencing Model was individually designed to fit the practice of the 14 Area offices. In the spring of 2005, the department established a contract with an independent consultant, who in collaboration with the department, identified four key phases to our family conferencing model:</p> <ul style="list-style-type: none"> ◆ <u>Design</u>: Each area office assembles a design team comprised of workers, supervisors and managers. Core goals and principles identified by the agency must be included in the design but the plan development is left to the discretion of the area office. ◆ <u>Training</u>: The training was designed to engage staff in the principles of family conferencing, provide an overview of kinship casework and solicit feedback to build skills that are required for the pre-conference work. This would increase family participation as well as facilitate family conferencing during the meeting. ◆ <u>Implementation</u>: This process begins when the initial training has been completed in the area office. ◆ <u>Mentoring, Coaching, and Consultation</u>: The challenge of this initiative is to maintain the focus on family conferencing following the completion of the design and training stages. Area offices will establish their own team to provide continued support of this initiative. The consultant will visit each site and provide technical assistance to area offices every 5 	
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		<p>weeks. These consultations include meetings with team members and area staff at all levels to discuss case and organizational issues relevant to family conferencing. The ongoing review of practice and policy is critical to ensure that the values and tasks of family conferencing are embedded in the work of each area office.</p> <p>Immediately following training on the model, social workers from the various offices began conducting family conferences. Even when a family conference was not formally convened, the pre-conference efforts to engage extended family members often resulted in greater utilization of kinship resources and generally an enhanced level of relational casework.</p> <p>The Department completed the first two stages (design and implementation) of the Family Conferencing Model in October, 2005. The primary focus of the initiative in 2006 has been working closely with Area Office staff to provide ongoing support to family conferencing through coaching and mentoring.</p> <p>Additionally, the Department modified the Treatment Plan format in an attempt to be more inclusive of families and their natural support networks. This revised format reflects the primary goals of Family Conferencing, i.e. to engage parents and kin in identifying goals and action steps needed to ensure children are safe and living in permanent homes. This created a more family-friendly and easy to translate document requiring a high-level of family involvement. The focus on treatment plans ensures</p>	
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		<p>that the Department, families and community providers are able to clearly track progress, make better decisions, achieve timely permanency for children and bring the case to a safe closure/resolution.</p> <p>Currently, the Department is in the process of developing a number of tools to assist staff in implementing family conferencing. One includes an instructional video narrated by the consultant that provides instruction to social workers on pre-conference work, conducting a family conference and post conference work. Social Workers will be able to observe their colleagues facilitating a family conference. A brochure has been developed that will be distributed to families involved with the Department to inform and educate them about family conferencing and their involvement in the treatment planning process.</p> <p>Family conferencing is being integrated into the Department's pre-service training program for new employees as well as establishing advanced courses for experienced staff.</p> <p>Timeframe: Current and ongoing.</p> <p>To enhance our ability to assess substance abuse issues and quickly and validly evaluate the need for treatment interventions, the Department will be implementing an evidence-based instrument called the Global Appraisal of Individualized Needs (GAIN) Short Screen.</p> <p>Timeframe: All investigators will be trained on the tool by the end of this fiscal year, June 2007.</p>	<p>Bureau of Child Welfare/ Training Academy</p>

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<p>Hotline</p>	<p>Evaluate Differential Response System and expand as appropriate</p>	<p>The Department is moving toward a statewide implementation of the Differential Response System. The Department is in the planning stages and has requested the assistance of CRP members from the State Advisory Council and FAVOR to participate in this planning committee. The time frame for implementation is contingent upon IS development.</p> <p>Timeframe: It is anticipated that DRS will become operational by July 2008.</p>	<p>Bureau of Child Welfare</p>
	<p>HL staff – trained/supported accessing community resources on behalf of families</p>	<p>The Department is in process of establishing a contract with the United Way CT 2-1-1 Infoline to build and maintain a custom resource directory database for DCF staff which will include 2-1-1 Infoline’s standard resources, as well as DCF-specific contracted programs and services. Currently DCF staff can access 2-1-1 information only through the Department’s Intranet. This contract would allow DCF staff to access 2-1-1 information through the Department’s case management system.</p> <p>Access to current and reliable information about services is critical to enhanced treatment planning. Utilizing a resource directory that provides information about service availability throughout the state will increase efficiency and minimize delays in initiating referrals to community providers for families. This database will enhance the department’s ability to respond to the unique needs of families and refer them to the appropriate agencies to enhance service delivery. This will provide DCF staff access to comprehensive information on over 52,600 services, available through 6,900 agencies statewide.</p> <p>It is anticipated this service will be available to staff by the</p>	<p>Bureau of Child Welfare</p>

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		<p>end of February 2007. All staff will be informed and have access to this new resource (including Hotline). Timeframe: February 2007.</p>	
	<p>Improve screening capabilities</p>	<p>The Department requires staff applying for a position at the Hotline to have a minimum of 2 years experience with the agency; investigation experience is preferable but not mandatory. All new staff are required to attend training developed and conducted by Hotline personnel. This training provides an overview of the following topics: operational definitions of child abuse/neglect; the central registry, confidentiality, role clarity of Hotline staff (including expectations); criteria for referral acceptance; list of mandated reporters; legal requirements for reporting child abuse/neglect; anonymity of reporters; identifying basic interview and clarifying questions related to physical abuse, sexual abuse, neglect, substance abuse and domestic violence; critical incident reports; notification to state and local police; reports of abuse/neglect concerning a department employee; sexual abuse intake criteria; Safe Havens for newborns; educational neglect criteria; adolescent services (program re-entry) and the Differential Response System, an initiative currently in the Hartford area office.</p> <p>In addition to the training on policy and practice, new employees are required to observe an experienced screener perform their job duties. The new employee will then respond to a call with an experienced screener listening and providing feedback to enhance skills and knowledge. All reports are reviewed and approved by the supervisor to ensure legal sufficiency and to assess for immediate safety concerns. Supervisory and administrative</p>	<p>Bureau of Child Welfare</p>

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		<p>staff are readily available to address any issues/concerns that arise. Management routinely conducts a random review of CPS reports (accepted/not accepted) to assess adherence to policy and gage staff performance. Ongoing communication and dialog with area office staff provides additional feedback regarding the quality of reports accepted for investigation.</p> <p>In January 2006, the Department contracted with the National Council on Crime and Delinquency (Children’s Research Center) to develop and implement Structured Decision Making (SDM) in CT. SDM is a research, evidence-based practice model used by child welfare workers that provides a comprehensive set of assessment tools that promotes consistency and accuracy in decision making at critical junctures throughout the life of a case. The two primary goals of SDM are to: 1) reduce harm to children and 2) expedite permanency for children in out-of-home care. It accomplishes these goals through five key objectives:</p> <ul style="list-style-type: none"> ◆ Identifies and structures critical decisions in the life of a case. SDM helps workers gather, document and evaluate the right information to make informed decisions ◆ Increase consistency and reliability in decision making ◆ Increases accuracy and reliability of critical decisions ◆ Targets resources to families most at risk. SDM recommends families are treated differentially based on risk level and need ◆ Uses case level data gathered by social workers 	
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		<p>about our families to guide decision making at all levels of the agency. It aggregates data to enable management to make appropriate decisions about resource development and allocation, staffing and workload management</p> <p>SDM development required the Department establish a number of functional workgroups consisting of front line social workers, supervisors and area office managers to review existing tools developed by other jurisdictions and modify them to reflect CT's language, statutes, policies and practices. A Steering Committee was established that provides the direction and oversight over SDM development and implementation. The Steering Committee approved and finalized the tools in June 2006. The department will be implementing all the SDM tools available. All tools will be automated through our SACWIS (case management) system.</p> <p>The Children's Research Center (CRC) will be providing training on the program model to all DCF staff. Based on CRC recommendations, the department intends to train all administrators, management and supervisors first prior to training front-line social workers. All staff will be trained on all the tools regardless of function as it is critical they understand the implication of decisions made early on, impact all future decisions. It is projected the training will be rolled out in January 2007 and completed in May 2007. Implementation will begin immediately after training and will be scheduled by functional area. Additionally, in May 2007, CRC will provide multiple training sessions to key community stakeholders to ensure they gain an</p>	
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		<p>understanding of the SDM model and be informed about the change in our practice.</p> <p>Management Reports will be provided on a quarterly basis within the first year of implementation to glean information about our families and help identify problematic areas with SDM implementation. Following implementation, an SDM advisory group will be established to identify and resolve areas of concern relative to SDM implementation.</p> <p>The following tools will be implemented at the Hotline:</p> <ul style="list-style-type: none"> ◆ <u>Screening criteria</u>: determines whether or not the report meets agency criteria for investigation. ◆ <u>Response Priority</u>: determines how soon to initiate the investigation. <p>Implementation of the SDM – Screening Criteria Tool will increase consistency in decisions at point of acceptance. These decisions will be based on DCF policies and state statutes. Those reports not meeting the statutory definition of abuse/neglect must be approved for non-acceptance by the Hotline Supervisor.</p> <p>Timeframe: SDM will be rolled out January 2007.</p>	
<p>Prevention</p>	<p>Community education program to assist youth in making good choices, reducing risky behaviors</p>	<p>Parents, Community Providers and DCF have formed a Planning Committee to develop a five year plan for Prevention. Recommendations stemming from the Annual Report have been forwarded to the Planning Committee for consideration. Prevention staff and the Adolescent Bureau are collaborating to develop a plan to address teen pregnancy and working with teen parents. Further</p>	<p>Bureau of External Affairs</p>

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		information will be forthcoming. Timeframe: To be determined.	
Voluntary Services	Move referral process to area offices – response within 48 hours	The Department has modified our voluntary services program in an effort to streamline the application process to make it more accessible to families. The Hotline will forward requests to the Area Office. The Area Office will forward an application to the family requesting these services and identify the assigned worker. The worker will follow up with the family within 5 days to offer assistance in completing the application packet. Policy to be updated to reflect changes. Timeframe: Completed	Bureau of Child Welfare
	Application to be shortened	The Department has streamlined the application process to make it more accessible and “family friendly”. Timeframe: Completed	Bureau of Child Welfare
	Revise legislation –eligibility criteria	Any proposed changes in eligibility criteria to the Voluntary Services Program will require changes in legislation. The Department intends to continuously review the program to identify ways to strengthen and enhance access and services provided. The Department would require a fully articulated proposal before considering any legislative changes to the program and is interested in hearing specific and detailed recommendations from the panel. Timeframe: Additional information is needed before decision can be made regarding implementation.	Bureau of Child Welfare
Family Engagement/ Enhanced Practice	Enhance response and DCF intervention to families experiencing domestic violence	Recognizing the relationship between child maltreatment and domestic violence, the Governor recently allocated funds to the Department to enhance DCF practices relative to domestic violence. The Department now has the	Bureau of Child Welfare

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		<p>capacity to increase the level of consultation available to DCF staff to enhance our service delivery to children and families.</p> <p>To this end, the Department released a Request for Qualifications (RFQ) in March 2006 seeking applications in the following two areas:</p> <ul style="list-style-type: none"> ▪ <u>Consultation and Training Services</u> – Consultation be provided to the 14 Area Offices ▪ <u>Statewide Service Administration</u> – Individual will have primary responsibility to provide statewide coordination and oversight over this initiative. <p>Through this initiative, the department is hoping to improve competencies in DCF staff and local community providers in the areas of:</p> <ul style="list-style-type: none"> ○ Domestic Violence Screening ○ Effective interviewing strategies for child, non-offending parent and batterer ○ Comprehensive safety and risk assessments ○ The development and implementation of safety plans for non-offending parent and children ○ Enhanced service provision/treatment planning <p>The primary responsibilities and focus for the <u>Area Office Consultant</u> will be as follows:</p> <ol style="list-style-type: none"> a. General consultation and case specific consultation to DCF staff regarding domestic violence issues. b. The provision of training for both DCF staff and 	
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		<p>community providers.</p> <ul style="list-style-type: none"> c. To be a member of a Team working on specific cases that have significant safety issues and domestic violence is identified as a factor. The consultant would help assess and coordinate services for all members of the family. d. To work with Area Office Managers on special projects. Flexibility to respond to the unique needs of the individual offices and their community. e. To perform community outreach. To work with local providers to improve the coordination of services across multiple systems, enhance community response and interventions to families experiencing domestic violence. <p>The Statewide Service Administration will have the following six (6) distinct areas of focus:</p> <ul style="list-style-type: none"> a. Pre-service and ongoing training for all statewide consultants. b. Quarterly group supervision of all statewide consultants. c. Policy development based on best practice standards which includes the development of a training curriculum. d. Data Management – Specific process outcomes and deliverables have been identified for this initiative that will be evaluated over time. e. Complete critical case reviews as required to assess the Department’s practice relative to domestic violence and to provide recommendations for practice/policy change. f. Conduct reviews of the existing domestic violence 	
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		<p>services statewide to identify strengths/limitations of available services and develop recommendations for enhancements.</p> <p>The Statewide Service Administrator has developed domestic violence protocols to be used by DCF investigators to screen, identify risk and safety factors, enhance our interview techniques for the non-offending parent and children and strategies to engage and assess the batterer. These protocols will ultimately enhance our ability to assess for domestic violence in families involved with the Department.</p> <p>The Department is looking to promote a strength-based, women-centered engagement and advocacy approach. This approach is supportive to women, their strengths and often considerable efforts they have made to protect their children. Strategies are identified with the batterer to allow the survivor and children to remain in the home.</p> <p>The model the Consultants are utilizing has them focus on developing a clear formulation of the batterer's behavior, the survivor's strengths and how the batterer's behavior has adversely impacted the children. The consultants will be helping DCF staff develop measurable treatment goals, identifying changes that need to happen within the family, primarily focusing on batterer accountability and supporting the safety and trauma needs of the adult and child survivor.</p> <p>Timeframe: Currently underway. Contracts have been established with selected providers. All</p>	
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		<p>Domestic Violence Consultants have been hired and are available to DCF staff for case consultation and training. The timeframe for roll out of the Domestic Violence Protocols in the area offices will be determined.</p>	
	<p>Develop safety plans and reduce time children are in care. Enhance treatment planning</p>	<p>Structured Decision Making (SDM) will address many of the concerns cited in this year's Annual Report relative to safety planning, service provision and treatment planning.</p> <p>The following SDM tools will be implemented by investigations to help guide decisions regarding safety and help determine whether the family requires continued DCF intervention:</p> <ul style="list-style-type: none"> • Implementation of the SDM Safety Assessment will improve consistency and practice relative to safety planning. Safety Assessments will be conducted by the investigator who will assess families on 12 conditions. If safety factors are identified, the department must engage the family to identify interventions that can be implemented immediately to safeguard the child and allow the child to be safely maintained in the home. If interventions can be identified and appear to safeguard the child, a safety plan is established outlining expectations for all parties. These will be reviewed at specified timeframes and incorporated into the family's treatment plan. If one safety factor is identified and no interventions can be implemented, the only intervention possible to safeguard the child will be for the child to be protectively placed. • Family Risk Assessment is a research based tool that determines the likelihood of future maltreatment. It guides decisions about the opening and closing of 	<p>Bureau of Child Welfare – Area offices</p>

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		<p>cases and classifies families into 4 risk categories (very low, low, moderate and high). The Department intends to target services to those families who have greater likelihood of maltreating their children their children in the future.</p> <p>The following tools will be implemented by ongoing services to enhance treatment planning and service delivery:</p> <ul style="list-style-type: none"> • <u>Family Strength and Needs Assessment</u>: a tool that assesses families on specific life domains including the child and caregiver. It assesses information about the entire family, not just the identified victim. Considers the strengths/weaknesses of the family, focuses case planning, monitors service provision and assesses change in family functioning. Workers will establish priority needs of the family which helps inform the treatment plan. Additionally, this tool will help identify resources that are lacking in the state. • <u>Safety Assessment, Risk Reassessment for In-Home Cases and Family Strength and Needs Reassessment</u>: These tools will be completed at various intervals as long as the case remains open. The tools help guide decisions whether continued DCF services are warranted, identifies need for changes in service provision and assesses child safety as family functioning and conditions change. <p>SDM has proven to expedite permanency for children in out of home care. The implementation of the Reunification Assessment Tool will help guide decisions regarding reunification. This assessment tool</p>	
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		<p>evaluates the family's progress in treatment planning, assesses the quality and quantity of parent/child visitation, includes both safety and risk assessments and considers the length of time a child has been in out of home care. These components will be consistently reviewed when making decisions about reunification and whether a change in the child's permanency goal is needed given the length of time in care.</p> <p>Research has proven that if SDM is adopted and implemented well, it will improve outcomes related to safety, permanency and well-being for children involved in the child welfare system.</p> <p>Timeframe: SDM roll out scheduled for January 2007</p> <p>Intensive Safety Planning Program (ISP): In an effort to expedite permanency and reduce length of stay for children in out-of home care, the department has created and implemented a new service model that focuses on providing immediate services to families following the child's removal in an effort to reunify the child safely, prior to the OTC hearing (typically held within 20 days of removal). The program requires rapid engagement of the family as it views the removal as an opportunity to quickly engage the family and effect change.</p> <p>The primary focus of the ISP worker is to work collaboratively with the family to mitigate the safety factors that resulted in the child's removal. It emphasizes a team approach, the use of consultants to assist in safety</p>	<p>Bureau of Child Welfare/ISP Contracted Providers</p>
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		<p>planning and in the development of a service plan for the family. The model will incorporate several best practice/evidence-based assessments, including the SDM Safety Assessment, which will identify safety factors for the families referred to the program and possible interventions that could be immediately implemented to allow the child to return home safely; and the GAIN Quick, (Global Appraisal of Individualized Needs) which is an informal, structured interview process that assesses the primary caregiver on nine specific life domains. This instrument will be completed by the ISP provider and is designed to identify needs and target services for the family quickly to help support reunification. Prior to the court hearing, a family conference will be held with the parents, kin and/or other family supports to review progress, reassess child safety, identify additional safety factors and determine whether interventions can be implemented to allow the child to return home safely. Families will be referred to additional services to help with transition and continued support.</p> <p>Timeframe: Contract amendments are underway. Service to be available to families statewide December 2006.</p> <p>Family Conferencing Initiative to engage and partner with families in treatment planning/service provision. (See description above).</p>	
<p>Investigations</p>	<p>Establish committee to revise brochure given to families</p>	<p>The Parent's Right to Know Brochure distributed to families at the time of an investigation was recently updated and is available in multiple languages. The brochure describes the department's mission, statutory</p>	<p>Bureau of Child Welfare</p>

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		<p>authority, the referral and investigation process, mandated contacts, parent's rights during the investigation, findings and potential remedies for families in disagreement with the department's investigation findings, treatment plan and/or services that have been provided by the department. The brochure also lists an array of services available in the community that families can access. The Department welcomes specific recommendations for further improvement from the Review Panels.</p> <p>Timeframe: Further information required</p>	
	<p>Develop 2 part carbonless form summarizing investigation report for family to review, refute and approve</p>	<p>Any person, or a parent or guardian of a minor who has been substantiated as a perpetrator of child abuse or neglect, may request a substantiation hearing if they are in disagreement with the substantiation. The department is responsible for notifying parties within 30 days of the completed investigation. A request must be made to the Area Director in writing for an internal case review. Within 60 days, the department completes an internal review and determines whether the facts of the case support the substantiation. Results of this review will be forwarded to the party within 30 days of the decision. If the substantiation is upheld and there is still disagreement, the party can request a substantiation hearing conducted by the Administrative Hearings Unit. This process provides an opportunity for individuals who have been substantiated as perpetrators to refute and challenge the department's findings.</p> <p>Timeframe: Intent of Recommendation has been met.</p>	<p>Bureau of Child Welfare</p>
	<p>Re-evaluate practice of interviewing children alone and adopt CAC Model</p>	<p>There are 15 Multidisciplinary Teams that are funded through federal grants. The purpose of Multidisciplinary Teams is to improve the investigation and prosecution of</p>	<p>Bureau of Child Welfare</p>

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		<p>serious physical and sexual abuse cases while minimizing secondary trauma to the child. Connecticut has continued to recognize the inherent value of this collaborative effort. The development of teams has strengthened the joint DCF/law enforcement investigations of child sexual abuse and serious physical abuse. It has also promoted the use of trained forensic interviewers. The creation of additional teams has allowed state prosecutors to have access to at least one multidisciplinary team in every judicial district in CT. Additionally, there are nine Child Advocacy Centers located throughout the state that families can access for services and supports.</p> <p>Although each judicial district has their own MDT, a number of towns in the state remain uncovered. Many teams throughout the state have struggled meeting the demand to coordinate and respond to child sexual abuse in their area. Additionally, the system for interviewing child victims differs depending on the location. This is attributed to availability of resources, commitment of local agencies and community preference. Of the fifteen teams, eight use designated forensic interviewers to conduct child victim interviews. Many of these forensic interviews work part time or per diem and are unable to respond to the need given their scarce resources. As a result, a number of children are interviewed by local teams, consisting of DCF investigators and local law enforcement. Not all DCF investigators or local police have received training on forensic interviewing. In response, the Governor's Task Force on Justice for Abused Children (GTFJAC) identified the need to provide a consistent, forensic interview process.</p>	
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		<p>In January 2006, the Governor's Task Force, through the Office of the Chief State's Attorney, submitted an application to bring Finding Words: Half a Nation by 2010 to Connecticut. This application has been reviewed and accepted by the American Prosecutor's Research Institute (APRI) to bring this program to Connecticut in 2007.</p> <p>Finding Words is a comprehensive, nationally recognized forensic interviewing course offered to multidisciplinary teams, consisting of prosecutors, law enforcement officers, child protection workers and forensic interviewers, to assist in the investigation and prosecution (when appropriate) of child abuse cases. The course utilizes an investigations protocol that is research-based and proven defensible in court. Each component of the protocol takes into account the child's age and developmental functioning as well as other variables. The model can be used to interview children not only about sexual abuse, but also about other forms of maltreatment.</p> <p>Finding Words is an intensive training program that requires states to develop a faculty from the various disciplines in the community to train members of the multidisciplinary teams on the Finding Words program. The local faculty is required to attend a week long training session conducted by APRI staff. At the end of the session, they prepare a videotape of themselves teaching the course. APRI reviews and critiques the tape and provides feedback to allow opportunities for modifications prior to delivering the training live to the teams. Training Participants are required to complete homework prior to</p>	
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		<p>each session and conduct two interviews with a child about a non-abuse event, to allow the student to practice building rapport and using age-appropriate questions. The second interview is conducted with an adult actor who portrays a child victim of suspected abuse. Following these interviews, students are critiqued by the local faculty and their peers. A comprehensive essay examination is given at the end of the week to measure the student's knowledge of the material gained throughout the course. Students must pass the exam to receive a certificate of completion.</p> <p>The Finding Words Curriculum includes the following key content areas that promote competent interviews:</p> <ul style="list-style-type: none"> ◆ Dynamics of, and victim responses to, child sexual abuse ◆ Child development and age-appropriate questioning ◆ The Disclosure process and potential blocks ◆ Effective use of anatomical dolls, diagrams and drawings ◆ The search for corroborative evidence ◆ Hearsay ◆ Memory and suggestibility ◆ Preparing the child and forensic interviewer for testifying ◆ Diversity issues <p>The Governor's Task Force has developed a sub-committee to develop an implementation plan for Finding Words.</p> <p>The Department will continue the practice of interviewing</p>	
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		<p>children alone when necessary to ensure their safety.</p> <p>Initiating referrals to the MDT's and CAC's will continue to coordinate investigative response and intervention.</p> <p>Implementation of Finding Words Program will enhance interviewing capabilities.</p> <p>Timeframe: Three training sessions have been identified – March, April and October 2007.</p>	
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