

Citizen's Review Panel Annual Report

2013

The South Carolina Department of Social Services (SCDSS) received a letter from the Citizen's Review Panel (CRP) in October 2013. The letter contained recommendations from an ad hoc committee of the CRP that met in an emergency session to formulate recommendations in response to the death of a Richland County child, Robert G.

Concerned about the welfare of all children in South Carolina, The Citizen's Review Panel has focused their 2013 annual report on recommendations in response to Child Deaths in the state of South Carolina and strongly recommends that the State of South Carolina Department of Social Services improves their casework practice. The following recommendations are as follows to include SCDSS responses to these recommendations:

The South Carolina Child Fatality ACTION Subcommittee recommends that the South Carolina Department of Social Services strengthen the Community Based Prevention Services program to ensure that only children not at risk of harm of abuse and neglect are referred without an investigation and by taking the following steps:

1. **The SC Child Fatality ACTION Subcommittee recommends that the South Carolina Department of Social Services exclude children five and younger, children with disabilities, children whose family has previous DSS involvement, cases involving criminal domestic violence, children exposed to substance abuse in the home and all moderate risk reports from referral to the Community Based Prevention Services Program.**

SCDSS Response: SCDSS' policy regarding intake screening decisions is consistent with SC Code Section 63-7-20. SCDSS' policy, Section 710, Intake Policy and Procedures, regarding Community Based Prevention Services states:

Reports to CPS Intake which have immediate safety concerns or high risk of harm due to abuse and/or neglect will result in a CPS investigation by DSS. For low or moderate risk reports with no immediate safety concerns, Intake will screen and refer families for Family Strengthening Services (FSS) or Voluntary Case management Services (VCM), as appropriate.

Cases referred to CBPS are those that previously would have been screened out and not investigated because the allegations did not rise to the level of abuse and neglect as defined in statute. Having Community Based Prevention Services (CBPS) for families helps protect children whose risk of harm otherwise would not have received attention from social service providers. Community providers assess risk factors and the service needs of families and help those families build protective capacity that prevents harm to their children. If the community providers see escalated risk in the families, as mandated reporters they report those risk factors to DSS.

Through CBPS, SCDSS also complies with requirements in state and federal law:

- The General Assembly stated in SC Code Section 63-7-10 that child welfare services must be based on certain principles, including:

- "... State and community agencies have a responsibility to implement prevention programs aimed at identifying high risk families and to provide supportive intervention to reduce occurrence of maltreatment....
- The state's child welfare system must be designed to be child-centered, family-focused, community-based, and culturally competent in its prevention and protection efforts...
- Neighborhoods and communities are the primary source of opportunities and supports for families and have a primary responsibility in assuring the safety and vitality of their members. "
- SC Code Section 63-7-910 says:
 - DSS must respond to referrals of family-related problems and divides those referrals into (1) known or suspected cases of child abuse or neglect and (2) "other problems of a nature which may affect the stability of family life."
 - Reports involving abuse or neglect must be referred to DSS county offices. Calls involving other problems must be referred to a county DSS office or to "other service agencies."
- SC Code Section 63-7-910(D) says DSS may contract for delivery of "protective services, family preservation services, foster care services, family reunification services, adoptions services, and other related services or programs."

The network of Community Based Prevention Services also demonstrates that the State is in compliance with the federal Child Abuse Prevention and Treatment Act (CAPTA), as amended, which requires the Governor to certify that the State: "...has in effect and is enforcing a State law, or has in effect and is operating a statewide program, relating to child abuse and neglect that includes...triage procedures, including the use of differential response, for the **appropriate referral of a child not at risk of imminent harm to a community organization or voluntary preventive service...**" (Section 106 (b)(2)(B)(v). In 2007 the Governor's Task force recommended that DSS develop interagency agreements at all levels-regional, state and county which will enable families to have access to an array of services through public and private agencies. This will allow individuals who do not meet the criteria for an investigation to receive services because they are at low or moderate risk.

In summary, SCDSS takes seriously the recommendation of the CBPS, but declines to only refer this population to investigation unless there is an immediate safety concern or high level of risk of harm. Please keep in mind that SCDSS acknowledges these characteristics when making an intake decision; which may result in the referral to investigation because of immediate or at high risk.

2. **The SC Child Fatality ACTION Subcommittee recommends that DSS ensure that the legal base for the CBPS program is included in SC state statute. In particular the definitions of CBPS, low risk, voluntary case management, family strengthening services, and include the mandated timelines for intervening on behalf a child.**

SCDSS Response: After legal consultation from the General Counsel of South Carolina Department of Social Services the above recommendation could potentially be included in the SC state statute. Since this service is part of a contracted service with community partners there are ongoing discussions held to ensure adherence to best practice tracking of outcomes. Including the sub distinctions of voluntary case management and family strengthening in statute would decrease the ability to make program changes based on assessment and outcomes of CBPS. These distinctions are included in policy.

3. **The SC Child Fatality ACTION Subcommittee recommends that DSS conduct a thorough assessment of the CBPS program with the assistance of the Children's Bureau of the Administration for Children and Families under the U.S. Department of Health and Human Services, to ensure that procedures, proper safeguards, measures and training are in place to support consistent and safe application of the program.**

SCDSS Response: The National Resource Center for Child Protective Services (NRCCPS <http://nrccps.org/>), funded and sponsored by the Children's Bureau of the Administration for Children and Families under the U. S. Department of Health and Human Services (<http://www.acf.hhs.gov/programs/cb/assistance/national-resource-centers>) is a vital partner for SCDSS, providing technical assistance in support of improved practice. The NRCCPS during the week of March 3-7, 2014, conducted fidelity reviews to assess the quality and consistency of practice by SCDSS staff and Community Based Prevention Services providers. The NRCCPS fidelity review included a sampling of cases in the 10 counties. At present, SCDSS have a draft of the report resulting from the fidelity review. A draft will be provided to the subcommittee pending receipt of the final report.

Another program at SCDSS established by state statute, SC Code Section 43-1-115, and greatly expanded in the past three years, assesses quality of services and practice, including intake. In collaboration with the University of South Carolina Center for Child and Family Studies, part of the School of Social Work, SCDSS conducts quality assurance (QA) reviews of county practice based on elements in the CFSR.

SCDSS also has Contract Monitors to assess the performance, compliance with contract standards and quality of services of the CBPS. These Contract Monitors provide reports regarding CBPS services to SCDSS leadership to ensure that procedures, proper safeguards, measures and training are in place to support consistent and safe application of the program. SCDSS will be updated the Citizen's Review Panel on the outcome of those reviews during the quarterly meetings.

Bi-monthly statewide calls provide a learning opportunity for practitioners through review of actual cases and the corresponding decision making process. Additionally, intake specific training offered on an ongoing basis to ensure adherence to policy, procedure and statute.

4. **The SC Child Fatality ACTION Subcommittee recommends that DSS implement a quality assurance (QA) process by an independent source to determine whether the CBPS program is yielding the desired outcomes. In particular, the subcommittee recommends that the QA process include a review of:**
- a. **Actions taken on behalf of the child to be sure they are consistent with DSS policies and procedures.**
 - b. **All cases resulting in serious injuries or deaths to acquire information that will aid the department in preventing future tragedies**
 - c. **All cases referred that were returned to DSS for investigation after referral to CBPS**
 - d. **The outcomes of referrals made by CBPS providers to community services or resources and whether those referrals netted stability for the families**
 - e. **Referral sources and the relationship, if any, to the CBPS provider to determine any conflicts of interest.**
 - f. **Whether adequate resources are available statewide to identify areas of the state in need of additional resources.**

SCDSS Response: SCDSS agrees with this recommendation and will be receiving services from Casey Family Programs who has agreed to conduct fidelity review of Community Based Prevention Services. SCDSS also has Contract Monitors to assess the performance, compliance with contract standards and quality of services of the CBPS. These Contract Monitors are employed by Winthrop University Center for Social Welfare Research and Assessment. SCDSS will continue to update the Citizen's Review Panel on the status of this recommendation during the quarterly meetings.

5. **The SC Child Fatality ACTION Subcommittee recommends that DSS work in conjunction with its workers and management team to examine the qualifications, initial and ongoing training, trauma resources and compensation for intake, assessment, family preservation and investigation workers to ensure that proper supports are in place to sustain a consistent and stable workforce of skilled workers.**

SCDSS Response: SCDSS is in agreement with this recommendation and has begun to implement the following:

- SCDSS Human Services division and SCDSS Human Resource Management division has collaborated to develop a strategy to reduce employee turnover.
- SCDSS is in the process of developing caseload standards that are reasonable for caseworkers to provide effective casework practice;
- Build a career ladder
- Develop a more supportive supervision for caseworkers

- Make referrals for these employees to receive services at South Carolina Vocational Rehabilitation Department
- Conduct supportive mapping to determine “what’s working well, what are they concerned about, and what needs to happen”.

SCDSS will continue to update the Citizen’s Review Panel on the status of this recommendation during the quarterly meetings.

6. **The SC Child Fatality ACTION Subcommittee recommends that DSS create an Intake and Investigation certification process that ensures the workers’ ability to perform the job.**

SCDSS Response: SCDSS agrees with the Citizen’s Review Panel recommendation to create an Intake and Investigation certification process that ensures the workers’ ability to perform the job. SCDSS has collaborated with University of South Carolina Child and Family Studies to enhance certification for Intake Practitioners and Supervisors. Intake training has taken place and continues to be implemented throughout the state of South Carolina.

SCDSS is planning a Regionalized Intake System. In July 2011 and January 2014, SCDSS asked for guidance from the National Resource Center for Child Protective Services (NRC-CPS) about our current intake system. Based on skills training across the State, increased accountability, and increased monitoring through the expansion of a Quality Assurance process.

Once the immediate changes were made, SCDSS began the development of a plan for a regionalized intake system to strengthen practice and consistency in a sustainable manner. A regionalized system will build a team of highly skilled specialists thereby increasing the capacity of the agency to make consistent decisions about the risk and safety of children.

There will be two to three units within each region to cover all intakes. Each region is in the process of analyzing data, researching trends, and speaking with county leadership and practitioners to determine the most effective and efficient grouping of counties. A statewide ‘800’ number will be established in addition to the existing county Intake lines. Calls coming in on the county lines and the ‘800’ line will be routed to the dedicated regional Intake practitioner. When a report is accepted, the Intake supervisor will contact the Assessment supervisor in the county of origin to begin the investigation. County offices will handle Emergency Protective Custody (EPC).

Efforts currently underway to develop the Plan include: data analysis to determine the number of practitioners and leadership needed for an effective response to reports of child abuse and neglect, establishment of staff positions, development of a selection process that identifies skilled and effective intake supervisors and practitioners, development of ongoing training and skill-building for leadership and practitioners, refinement of policy and procedures, and

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establishment of a coaching and support team. Enhancing the intake process supports the safety of children who are reported to SCDSS for suspected child abuse or neglect.

SCDSS will continue to update the Citizen's Review Panel on the status of this recommendation during the quarterly meetings.

7. **The SC Child Fatality ACTION Subcommittee recommends that DSS establish and support formalized relationships with community experts, such as law enforcement, hospital social workers and Child Advocacy Centers (for forensic examinations when indicated), to improve the ability of DSS to determine when abuse and neglect has occurred. The use of multidisciplinary team approach is encouraged.**

SCDSS Response: SCDSS agrees with the Citizen's Review Panel recommendation of DSS establishing and supporting formalized relationships with community experts. Currently, local DSS county offices have MOUs with their local law enforcement to collaborate to ensure the safety and well-being of children. SCDSS is also in the process of implementing dedicated staff from DSS Division of Investigation in the Fusion Center to improve access to information as appropriate. Community partners are encouraged to participate in Palmetto Power "P2" to collaborate and have a discussion about children who are involved with DSS and how to improve practice based on the data provided. Partner Meetings are held with management staff to discuss issues or concerns regarding child abuse and neglect practice. These Partner's Meetings are also held at the County level as well. The multidisciplinary team approach is highly expected of SCDSS staff and has been discussed several times as a Leadership principle in regards to the importance of collaboration and community engagement.

Program Panel Chair Recommendations:

Low County Citizen Review Panel recommends that the Department of Social Services strengthen its licensing requirements for all resource families by 10/30/14 by requiring:

- a) **Proof that the family has sufficient income to meet its household obligations, and that the family will not be dependent on income received for the care of a child to meet those obligations.**
- b) **Resource families to disclose any firearms, to provide proof of license, and to ensure safe and secure storage.**
- c) **Resource families to provide proof of insurance for cars owned by the provider.**
- d) **Resource families to submit photo identification of all adults residing in the home.**
- e) **A child abuse registry check for all adults residing in the home.**

SCDSS Response:

- a) In September 2013, greater scrutiny began with regards to financial stability resource families at initial licensure and renewals. Regional forums were held during April, May and June 2014 to

address standards and expectations with DSS licensing staff as well as Child Placing Agency (CPA) staff.

- b) DSS agrees with this recommendation; which has been implemented. SCDSS licensing already requires the Firearms Disclosure form at the initial licensure of resource families. Firearms are required to be kept in a secure, locked location.
- c) Proof of insurance is not currently required. SCDSS would support this recommendation and will meet with the Foster Parent Association to develop an implementation plan.
- d) Photo identification of all adults residing in a Resource Family home is already a licensing requirement.
- e) Central Registry and Sex Offender Registry checks are already a requirement for initial licensure of Resource Families and those seeking renewal. This is also required for any adults living in their home.

Midlands County Citizen Review Panel recommends for the Department of Social Services to continue focusing on Independent Living service delivery; which the South Carolina Department of Social Services has agreed to provide the CRP with updates during quarterly meetings.

SCDSS has been working to enhance its Independent Living program and increase service delivery to youth. A new IL Coordinator will be in place effective June 17, 2014. New processes for obtaining IL funds will be in place effective July 1, 2014 to increase timeliness of fund availability. IL staff will transition to "IL Advocates" with increased presence in each region. IL advocates will team with child welfare practitioners to ensure that all eligible youth receive appropriate services and funds.

Upstate Citizen Review Panel recommends for the Department of Social Services to continue focusing on Trauma Informed Care services; which the South Carolina Department of Social Services has agreed to provide the CRP with updates during quarterly meetings regarding the Trauma Informed Initiative and the partnership with Project Best.