# 2015 Annual Report *July 1, 2014 - June 30, 2015*



MISSION - To monitor Delaware's child protection system to ensure the health, safety, and well-being of Delaware's abused, neglected, and dependent children.

#### State of Delaware

### Child Protection Accountability Commission (CPAC)



The Honorable Jack Markell, Governor
State of Delaware

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C. Malcolm Cochran, IV, Esquire, Chair Child Protection Accountability Commission

State of Delaware

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### Our Membership—FY15

Secretary of the Department of Services for	Director of the Division of Family Services
Children, Youth and Their Families	16 <u>Del. C.</u> §912(a)(2)
16 <u>Del. C.</u> §912(a)(1)	Victoria Kelly, Psy.D., Director
The Honorable Jennifer Ranji, Cabinet Secretary	,,
Two Representatives from the Attorney	Two Members of the Family Court
General's Office	16 <u>Del. C.</u> §912(a)(4)
16 <u>Del. C.</u> §912(a)(3)	The Honorable Chandlee Johnson Kuhn, Chief Judge
Patricia Dailey Lewis, Esquire, Deputy Attorney General, Director, Family Division	The Honorable Joelle Hitch, Judge
Josette Manning, Esquire, Deputy Attorney General, Director, Child Victims Unit	
One Member of the House of Representatives	One Member of the Senate
16 <u>Del. C.</u> §912(a)(5)	16 <u>Del. C.</u> §912(a)(6)
The Honorable Melanie George Smith, State Representative	Senator Patricia Blevins
Chair of the Child Placement Review Board	Secretary of the Department of Education
16 <u>Del. C.</u> §912(a)(7)	16 <u>Del. C.</u> §912(a)(8)
Carolyn Walker, Chair	Tina Shockley, Education Associate & Policy Advisor
Director of the Division of Prevention and	Chair of the Domestic Violence Coordinating Council
Behavioral Health Services	16 <u>Del. C.</u> §912(a)(10)
16 <u>Del. C.</u> §912(a)(9)	Eleanor Torres, Esquire, Executive Director
Susan Cycyk, M.Ed., Director	
Superintendent of the Delaware State Police	Chair of the Child Death, Near Death and Stillbirth
16 <u>Del. C.</u> §912(a)(11)	Commission
Colonel Nathaniel McQueen, Superintendent	16 <u>Del. C.</u> §912(a)(12)
	Garrett Colmorgen, M.D., Chair
Investigation Coordinator 16 <u>Del. C.</u> §912(a)(13)	One youth or young adult who has experienced foster care in Delaware
Jennifer Donahue, Esquire	16 <u>Del. C.</u> §912(a)(14)
Jennes 2 enance, 204an e	Nicole Byers
One Representative from the Public Defender's Office	At-large Member - Medical Community
16 <u>Del. C.</u> §912(a)(15)	16 <u>Del. C.</u> §912(a)(16)
Kathryn Lunger, Esquire, Statewide Director, Family Court Practice Group	Allan De Jong, M.D., Medical Director, Children at Risk, CARE Program, Alfred I. duPont Hospital for Children
At-large Member - Interagency Committee on Adoption	At-large Member - Law Enforcement
16 <u>Del. C.</u> §912(a)(11)	16 <u>Del. C.</u> §912(a)(11)
Mary Lou Edgar, Member of the Interagency Committee on Adoption	Captain Robert McLucas, New Castle County Police Department
At-large Members - Child Protection Community	
16 <u>Del. C.</u> §912(a)(11)	

C. Malcolm Cochran, IV, Esquire, CPAC Chair

Randall Williams, Executive Director, Children's Advocacy Center of Delaware

Janice Mink, Citizen

Ellen Levin, Citizen

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### **Executive Summary**

In Fiscal Year 2015, the Child Protection Accountability Commission (CPAC or the Commission) met quarterly to identify system challenges and advocate for system reform, to evaluate and recommend changes in policy, and to make legislative recommendations. Between quarterly Commission meetings, CPAC's various committees and workgroups were engaged in substantive work, at the direction of the Commission, in a variety of areas, including: the ongoing review of practices followed by various system partners in their response to reports of abuse and neglect; the development of training in best practices for front line professionals who respond to reports of abuse and neglect; the improvement of educational outcomes for children in foster care; various legislative initiatives, including work on extended jurisdiction, reviews of child death and near death cases due to abuse and neglect and other statutes; permanency for adolescents; infant safe sleeping; mandatory reporting of child abuse; data utilization, and others. CPAC also continued in its service as Delaware's Citizen Review Panel (CRP) and Children's Justice Act (CJA) Task Force. CPAC and the Child Death, Near Death, and Stillbirth Commission (CDNDSC) continued their collaborative statutory affiliation through Fiscal Year 2015, meeting jointly on two occasions during the fiscal year.

#### CPAC accomplished the following in FY15:

- ♦ Trained over 14,500 educators, healthcare providers and members of the public on their statutory, child abuse mandatory reporting obligations through onsite and online training;
- ♦ Collaborated with CDNDSC to create a Joint Action Plan for the 18 prioritized system recommendations stemming from the reviews of child death and near death cases due to abuse and neglect;
- ♦ Established the Child Torture Committee, which is dedicated to the development of best practices to help professionals recognize and appropriately respond to cases of child torture;
- Created the Joint Committee on Substance-Exposed Infants/Medically Fragile Children as a result of the Joint Action Plan and the child death and near deaths reviews involving substance-exposed infants and medically fragile children;
- ♦ Worked to develop a state plan for younger youth with a permanency plan of APPLA and hosted training programs on permanency options and extended jurisdiction;
- ♦ Planned and facilitated the Protecting Delaware's Children Conference and *Multidisciplinary Child Abuse Investigative Team Training: A ChildFirst*<sup>TM</sup> *Training* for professionals involved in the investigation and prosecution of child abuse cases;
- Gave partial scholarships to members of the multidisciplinary team to attend the 31th International Symposium on Child Abuse, Fourteenth International Conference on Shaken Baby Syndrome/Abusive Head Trauma, and the 29th Annual San Diego International Conference on Child and Family Maltreatment; and
- ♦ Submitted the CJA Annual Report & Grant Application Approved by the Administration for Children and Families on June 29, 2015;

CPAC's Fiscal Year 2015 achievements were realized due to the leadership of its Commissioners, Chair, Executive Director and staff, and to the commitment of the many agency representatives and members of the public who participate with the Commission.

### **Background & Purpose**

Delaware's Child Protection Accountability Commission was established by an Act of the Delaware General Assembly in 1997 following the death of a 4-year-old boy named Bryan Martin. Bryan's death demonstrated the need for multidisciplinary collaboration and accountability in Delaware's child protection system. As a result, Delaware enacted the Child Abuse Prevention Act of 1997 (16 Del. C., Ch. 9), which made significant changes in the way in which Delaware investigates child abuse and neglect. The Child Abuse Prevention Act also established an interdisciplinary forum for dialogue, and reform. That forum is CPAC, which endeavors to foster a community of cooperation, accountability and multidisciplinary collaboration. CPAC brings together key child welfare system leaders, who meet regularly with members of the public and others, to identify system shortcomings and the ongoing need for system reform.



#### The statutory duties of CPAC (16 Del. C. § 912(b)):

- Examine and evaluate the policies, procedures, and effectiveness of the child
  protection system and make recommendations for changes therein, focusing
  specifically on the respective roles in the child protective system of the
  Division of Family Services, the Division of Prevention and Behavioral
  Health Services, the Department of Justice, the Family Court, the medical
  community, and law enforcement agencies;
- 2. Recommend changes in the policies and procedures for investigating and overseeing the welfare of abused, neglected, and dependent children;
- 3. Advocate for legislation and make legislative recommendations to the Governor and General Assembly;
- 4. Access, develop, and provide quality training to staff of the Division of Family Services, Deputy Attorneys General, Family Court, law enforcement officers, the medical community, educators, day care providers, and others on child protection issues; and
- 5. Review and make recommendations concerning the well-being of Delaware's abused, neglected, and dependent children including, but not limited to, issues relating to foster care, adoption, mental health services, victim services, education, rehabilitation, substance abuse, and independent living.

#### Children's Justice Act Task Force

The Children's Justice Act (CJA) provides grants to States to improve the investigation, prosecution and judicial handling of cases of child abuse and neglect, particularly child sexual abuse and exploitation, in a manner that limits additional trauma to the child victim. CPAC became the Children's Justice Act Task Force in FY08. For more detail, please see Pages 4 and 17.

### Delaware's Citizen

**Review Panel** 

In 2004, CPAC was designated by DSCYF, in its state plan under the federal Child Abuse Prevention and Treatment Act (CAPTA), to serve as Delaware's Citizen Review Panel (CRP). Amended in 1996, CAPTA requires that CPAC, in its role as CRP, examine the policies, procedures and practices of state and local agencies and, where appropriate, specific cases to evaluate the extent to which state and local child protection system agencies are effectively discharging their child protection responsibilities. CPAC partners with CDNDSC in its reviews of specific cases. For more detail, please see Page 18.

### **Delaware's Child Protection System**

With CPAC's assistance, Delaware has continued to refine and improve its interdisciplinary approach to the protection of children. The approach, often referred to as the multidisciplinary team (MDT), relies on the collaborative intervention of various system partners. An essential participant in the MDT approach has been the Delaware Children's Department, which is comprised of three service divisions—the Division of Prevention and Behavioral Health Services (DPBHS), the Division of Youth Rehabilitative Services (DYRS), and the Division of Family Services (DFS). Collectively these divisions are responsible for the provision of services to children who have suffered abuse, neglect, abandonment, delinquency, mental illness, and/or substance abuse.

As the child welfare agency, DFS is responsible for receiving and investigating reports alleging child abuse, neglect, or dependency. In FY15, DFS received 19,058 reports of child abuse, neglect or dependency, which was a 6% increase over the prior fiscal year and the largest number of reports ever received in a fiscal year by DFS. DFS screened in 8,909 (47%) of those reports, and substantiated 1,178 (13%) cases. These cases are often initiated when a child victim of abuse or neglect is first identified by a professional who interacts routinely with children, including members of the education, medical or law enforcement communities.

Multidisciplinary collaboration is frequently necessary. For reports that may involve a criminal offense against a child, DFS and law enforcement will investigate jointly. Whenever appropriate, cases will be referred to the Children's Advocacy Center of Delaware (CAC), where the MDT often formally convenes to conduct a forensic interview, medical examination and/or mental health screening. Death and near death cases are also referred to the CDNDSC. In an effort to ensure system wide coordination, all cases involving serious physical injury or allegations of sexual abuse are also monitored by Delaware's Investigation Coordinator - a function that CPAC advocated for in the wake of the tragic events brought to light in the *Bradley* case. As a vital member of the MDT, the Criminal Division of the Department of Justice (DOJ) determines whether there is sufficient evidence to prosecute those responsible for inflicting harm on children. In July of 2013, at the recommendation of a joint committee of CPAC and CDNDSC, the DOJ established the Child Victims Unit, a specialty unit within the DOJ, which handles all felony level, criminal child abuse cases involving the death or serious physical injury of a child. The Unit combines expertise from both the Criminal and Family Divisions of the DOJ. The Family Division also provides legal representation to DSCYF in Family Court, and DOJ has designated several attorneys across its Divisions to pursue civil remedies against perpetrators of child abuse, including civil substantiations and licensure proceedings, thereby increasing the chances of protecting children where criminal remedies are either insufficient or unavailable.

Through frequent hearings, Family Court Judges were responsible for monitoring approximately 900 children in the legal custody of DSCYF during Fiscal Year 2015. Approximately, 30% of these children were 4 years of age or younger; 15% were 5 to 8 years of age; 15% were ages 9 to 12; and 41% were 13 to 17 years of age. By county, 56% reside in New Castle County, 23% reside in Kent County, and 21% reside in Sussex County. As of June 30, 2015, 657 children were in DSCYF custody, a 7% increase from the prior fiscal year. These same children are entitled to representation in all judicial proceedings, which OCA and the Court Appointed Special Advocate Program (CASA) are responsible for providing. Roughly half of the children requiring representation are represented by or through the Office of the Child Advocate, and half are represented through the CASA program. To accomplish this task, OCA and CASA draw on a sizeable pool of volunteers. Children in DSCYF custody also receive extensive care and support from the education, foster care, adoption and medical communities. Thus, Delaware relies on the collective resources of the Family Court, DOJ, OCA and CASA, as well as the Children's Department, the service providers, and the community, to provide safety, well-being and permanency for its most vulnerable children.

CPAC accomplished many of its FY15 goals through the work of its eight Committees, including a Joint Committee with the Child Death, Near Death, and Stillbirth Commission.

#### The Abuse Intervention Committee

Charge: To provide measurable oversight of CPAC's Children's Justice Act (CJA) grant activities by planning and
administering the Three-Year Assessment, monitoring the progress of recommendations identified in the Three-Year Assessment Report and recommending to CPAC future system priorities related to the investigative,
administrative and judicial handling of cases of child abuse and neglect.

Membership: The Committee is chaired by Patricia Dailey Lewis, Esquire, Director of the Family Division at the DOJ. The membership includes representatives from the following agencies: Alfred I. duPont Hospital for Children, Bayhealth Medical Center, CAC, CDNDSC, Delaware Coalition Against Domestic Violence, Delaware Disabilities Council, DOJ, DSCYF, DFS, Domestic Violence Coordinating Council, OCA, and Nanticoke Health Services.

During the fiscal year, the Abuse Intervention Committee continued to provide oversight of CPAC's CJA grant activities. The Committee concluded work on CPAC's three priorities for the 2012-2014 grant period: creation of a committee to improve the investigation and prosecution of child abuse and neglect cases as well as offender accountability within the criminal justice system; implementation of a plan to eliminate infant unsafe sleep fatalities due to abuse or neglect in the state; and support of training and education initiatives related to the investigation and prosecution of child abuse and neglect cases using a multidisciplinary team approach. The Committee found that CPAC successfully implemented the first priority and agreed that no further action would be taken on the second as it falls under the purview of CDNDSC. The third priority will be carried over for the 2015-2017 grant period.

To establish CPAC's priorities for this next grant period, the Committee reviewed the 18 recommendations developed at the Joint CPAC/CDNDSC Retreat on January 22, 2015 and prioritized 16 recommendations related to policy and training as required by the grant. The five policy recommendations related to the DFS collateral policy and procedure; substance-exposed infants and medically fragile children; mental health, domestic violence, and substance abuse assessments; the revised Memorandum of Understanding (MOU) between DSCYF, DOJ, Law Enforcement, and CAC; and cases of child torture. Five additional recommendations related to the development of training programs for members of the MDT and the judiciary. Lastly, six recommendations involved evaluating DFS practices and system improvements, communication between DFS and DOJ, resource constraints for DOJ, and modifying Delaware statute related to training for medical professionals on the recognition of child abuse and neglect.

A complete outline of the 2015-2017 priorities can be found in the CJA Annual Progress Report and Grant Application and 2015-2017 Three-Year Assessment Report. The report also highlighted the proposed funding activities for the 12-month grant period which included: the Training Coordinator; Best Practices for Responding to Child Torture; Delaware Multidisciplinary Team Training for Child Abuse Investigations; MDT Scholarships to National Conferences; and Online Training System, Surveys, and Videography Services. It was submitted to the Administration on Children, Youth and Families on May 29, 2015 and approved on June 29, 2015. The report is available at the following link: <a href="http://courts.delaware.gov/childadvocate/docs/2015CJA-Application Attachments.pdf">http://courts.delaware.gov/childadvocate/docs/2015CJA-Application Attachments.pdf</a>.

#### Fiscal Year 2015

In addition to the Administration on Children, Youth and Families, the Criminal Justice Council (CJC) provides oversight of CJA grant funds. Since October 1, 2012, the CJC, with assistance from the Administrative Office of the Courts, has supported OCA in the management of the grant. This requires that OCA, on behalf of CPAC, submit quarterly fiscal and progress reports to the CJC, as well as an annual grant application for the specific grant period. As a result of the collaboration that has developed between the federal and state agencies, and with the assistance of its Executive Director and staff, CPAC has improved the manner in which the CJA grant is administered in the State of Delaware.



#### The Child Torture Committee

Charge: To research and develop best practices and trainings to help professionals recognize and appropriatelyrespond to cases of child torture.

Membership: The Committee is led by co-chairs Sergeant Reginald Laster, Supervisor of Family Services Unit at
New Castle County Police Department and Patricia Dailey Lewis, Esquire, Director of the Family Division at the
DOJ. The membership includes representatives from the following agencies: Alfred I. duPont Hospital for Children, Beebe Healthcare, CDNDSC, DSP, DOJ, DSCYF, DFS, Family Court, New Castle County Police Department, OCA, and Wilmington Police Department.

The Child Torture Committee was created by CPAC and CDNDSC at a joint meeting in May 2014 after child torture emerged as a recurring theme in system recommendations from the reviews of child deaths and near deaths due to abuse and neglect. Some issues identified in these child torture cases included a lack of cross-reporting, medical assessments and collateral contacts with professionals, and limited adherence to the interviewing protocol, safety assessment policy, and the MOU between DSCYF, DOJ, Law Enforcement, and CAC. Thus, the Child Torture Committee was established to explore training and other solutions to help professionals recognize and appropriately respond to child torture.

The Child Torture Committee met twice during FY15. The Committee focused its attention on three main topics: legal responses to child torture, the creation of a child torture checklist, and development of a protocol for responding. While Delaware statute includes torture in its definition of abuse in Title 10, Section 901(1), the term *torture* is not defined. To address possible legal responses to child torture, the Committee reviewed the National District Attorneys Association's Child Torture Compilation, which includes statutes from all jurisdictions within the United States. The Committee weighed the potential impact of creating a child torture statute, including the impact on prosecutors, defense attorneys, and jurors in these cases. Ultimately, the Committee agreed that a torture statute was not recommended. The Committee also developed a draft checklist for Common Elements of Child Torture. The purpose of this checklist is not to define torture; it, instead, demonstrates the commonalities in torture cases to help professionals identify potential child torture cases. It is anticipated that the checklist will be approved in FY16. In addition, the protocol for responding to child torture cases will be included as part of the revised MOU between DSCYF, DOJ, Law Enforcement, and CAC. The MOU is slated to be unveiled in January 2017. Lastly, the Institute on Violence, Abuse and Trauma invited a Delaware team to participate in the 13th Hawaii International Training Summit on March 28-31, 2016 to present Delaware's response to child torture cases.

#### The Data Utilization Committee

Charge: 1. To assess the voluminous data presented to CPAC on a quarterly basis, and determine: (a) if it is the right data and if it is relevant; (b) if there is other data needed to monitor the child protection system; and (c) if the data or analysis is outcome driven; 2. To develop dashboards for measuring Delaware's child protection system which will be reported out to CPAC on a quarterly basis; and, 3. To use the dashboards to inform system improvement and CPAC initiatives.

Membership: The Committee is chaired by Rosalie Morales, OCA Program Administrator. The membership includes representatives from the following agencies: Child Placement Review Board (CPRB), Delaware State
 Police (DSP), DSCYF, DFS, Family Court, and OCA.

During FY15, the Data Utilization Committee met on a quarterly basis to prepare the data dashboards. The data is organized into eight dashboards: 1. Caseloads; 2. Processing of Child Abuse Cases; 3. Children in DSCYF Custody; 4. Permanency Outcomes; 5. Extended Jurisdiction; 6. Dual Status Youth; 7. Education Outcomes for Children in Foster Care; and 8. Re-Entry/Recurrence of Maltreatment. At each CPAC meeting, the Committee provided quarterly reports of the data and presented system wide child welfare trends.

For example, Dashboard 1 summarizes the average caseloads of DFS investigation and treatment workers, reflecting the fundamental way in which caseloads impact the quality of service. Historically, caseload standards have been a critical data point that CPAC has monitored since its inception in 1997. As reflected in Figures 1 and 2, the statutory caseload standard is 11 for investigation workers, and 18 for treatment workers:

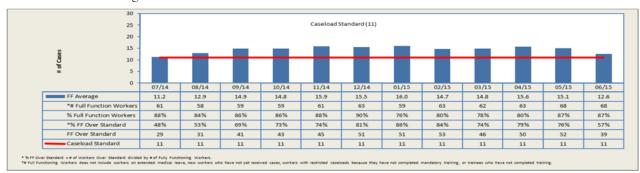


Figure 1. Statewide DFS Investigation Caseloads



Figure 2. Statewide DFS Treatment Caseloads

In a second example, Dashboard 2 contains reports on data collected from various child welfare agencies, including the agency's involvement in intra-familial versus extra-familial reports of child abuse and neglect, and the outcome(s) in these cases. Dashboard 2 also presents the number of hotline reports received by the DFS Child Abuse and Neglect Report Line, together with (in addition to the number of reports received) the primary allegation type and case outcome. In addition, the dashboard features the number of cases opened and the civil and criminal case outcomes of cases closed by the Investigation Coordinator, who monitors and helps to coordinate all child death, near death, and

sexual abuse cases to ensure a comprehensive, multidisciplinary civil and criminal system response. Thus, as shown in Figure 3, over the period April-June 2015, the Investigation Coordinator initiated tracking on 11 extra-familial cases and 178 intra-familial cases. To ensure that other child welfare agencies have knowledge of these complex cases, the Investigation Coordinator's statistics are compared with data provided by the following agencies: the CAC (when a forensic interview or medical exam is needed); the CDNDSC Child Abuse and Neglect Panel, which is responsible for reviewing deaths and near deaths of children who are victims of abuse and/or neglect; and the DOJ Child Victims' Unit, which is responsible for prosecuting death and near death cases. In the next fiscal year, as complete data is received from child welfare system partners, CPAC anticipates that this dashboard will become highly relevant in helping to ensure best outcomes in the most high risk cases investigated and prosecuted in Delaware.

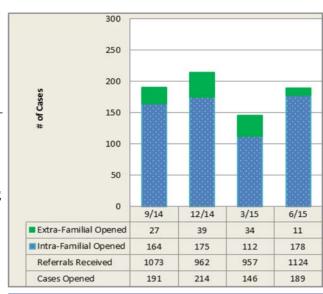


Figure 3. Investigation Coordinator Cases Opened During Quarter

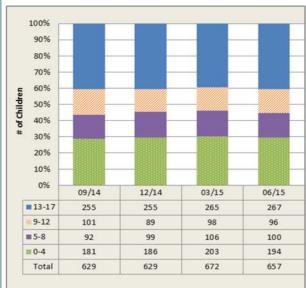


Figure 4. Ages of Children in DSCYF Custody at End of Quarter

Tracking court outcomes for all children in DSCYF custody is equally significant. Thus, Dashboard 3 includes profiles of children in DSCYF custody, the number of children represented by OCA and CASA, and the time it takes for a child to be represented. As shown in Figure 4, the number of children in foster care in Delaware has been increasing gradually. Further, as of the end of the fourth quarter of FY 2015, youths ages 13-17, represent most of the children in custody at 41%. The next highest percentage of children in custody is the 0-4 age range at 30%.

Work by the Data Utilization Committee is ongoing, and it is anticipated that CPAC will contract with a data analyst in FY16 to ensure that CPAC is receiving and presenting data in a format that is useful in the development of informed, and evidence based, policy.

#### The Education Committee

Charge: 1. Provide administrative oversight of the MOU between DSCYF and DOE by: (a) identifying and monitoring data points relative to educational success; (b) reviewing responsibilities, staff familiarity and effectiveness; (c) communicating; and (d) revising, implementing and training on the MOU, as needed; 2. Improve system collaboration between the child welfare and educational systems through training and enhanced communication. The curriculum and resource identification shall include training modules and resources on child welfare/education policies, collaboration, effective communication, and programs; and 3. Advocate for the educational success of children in foster care through the collection and analysis of data and the development of performance measures.

*Membership:* The Committee was chaired by Tina Shockley, Education Associate and Policy Advisor at DOE. Its membership includes representatives from the following agencies: Brandywine School District, CASA, Charter School Network, CFF, Delaware Youth Opportunities Initiative (DYOI), DOE, DSCYF, DFS, DPBHS, Education Demonstration Project/Casey Family Programs, Family Court, the Governor's Advisory Council for Exceptional Children, OCA, the Parent Information Center of Delaware, and the Woodbridge School District.

In FY15, the Education Committee met quarterly to accomplish the goals of its three long standing workgroups: MOU, Collaboration, and Data. In its review of the MOU between DSCYF, DOE and Local Education Agencies (LEAs), the MOU Workgroup identified gaps for reporting requirements, information sharing and confidentiality, and children remaining in their school of origin or transferring to a new school feeder pattern. The Workgroup began revisions on the MOU during the fiscal year. It is anticipated that the draft MOU will be circulated to the signatory agencies for review in FY16.

Similarly, to improve system collaboration, the Collaboration Workgroup has been responsible for developing practical tools and training opportunities for child welfare and educational professionals. In particular, the group finalized its Frequently Asked Questions (FAQ) sheet on education issues for students in DSCYF custody. The FAQ provides information on a wide range of topics, including eligibility for special education services; eligibility for a 504 Plan; the involvement of Educational Surrogate Parents, and many others. The FAQ is available on the OCA website at: <a href="http://courts.delaware.gov/childadvocate/docs/FINAL-CPAC-FAQ-EducationYouthFosterCare-September2015.pdf">http://courts.delaware.gov/childadvocate/docs/FINAL-CPAC-FAQ-EducationYouthFosterCare-September2015.pdf</a>. In

FY16, the workgroup hopes to improve information sharing for children transitioning to and from DSCYF to LEAs.

The Education Committee's Data Workgroup is charged with advocating for successful educational strategies for children in foster care and with making recommendations for system improvement. During the fiscal year, the Workgroup reviewed the aggregate data from the 2013-2014 school year, making comparisons among children in DSCYF



custody and their peers. Project parameters include: number of students enrolled, average daily attendance rates, number of special education students, a variety of disciplinary parameters, the numbers of students required to repeat the current grade, and several academic performance measures. Further analysis is needed before the Workgroup is prepared to share its recommendations with CPAC.

As mentioned previously, the data points identified by the Education Committee are captured in the CPAC dashboards under Education Outcomes for Children in Foster Care and presented to CPAC at its quarterly meetings. The dashboard features ten charts, which depict the aggregate data provided by DOE for the following school years: 2011, 2012, 2013 and 2014.

Among the more significant findings:

- Students in DSCYF custody received special education services at a higher rate than all students. Specifically, for the 2013 and 2014 school years, 45% of middle school students in DSCYF custody received special education services as compared to 15% of all students.
- 26% of students in DSCYF custody had at least one disciplinary incident in elementary school, as compared to 9% of all students in the 2014 school year. Additionally, students in DSCYF custody were twice as likely to have received a suspension (whether in school, or out of school) in elementary and middle school as compared to all students.

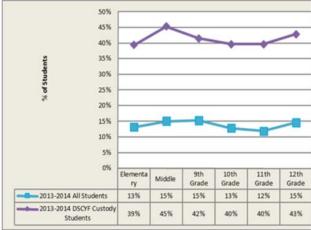


Figure 5. Two Year Comparison of Special Education Rates for Children in DSCYF Custody

- In the 2014 school year, the graduation rate increased for both populations, with a greater rate of change in the graduation rate for students in DSCYF custody. This rate increased by 6%, while the rate for all students only increased by 1%. Despite increases, the graduation rate is still lower for students in DSCYF custody at 65% in comparison with the rate for all students (93%).
- Disparities were found in the proficiency testing for Math and English/Language Arts for the 2013 and 2014 school years. For example, 74% of all elementary students were proficient in math, while only 55% of elementary students in DSCYF custody were proficient in math. Further, for students in DSCYF custody, their proficiency in math decreased by 10th grade (29%). For English/Language Arts, 9th grade students generally were less proficient. However, students in DSCYF custody were 30% less proficient than peers.

During FY15, the Data Workgroup further analyzed these findings and uncovered explanations for some of the disparities. For example, graduation rates appear to be low for kids in foster care. However, the drop-out rate is determined when a child enters the 9th grade and is assigned to a four-year cohort. The children are not actually dropping out; they are not graduating in that four-year cohort. Since children with individualized education plans have until the age of 21 to graduate, they may be automatically assigned to the drop-out rate if they take the extra time to graduate. The Workgroup will continue to explore this data point and will continue working with DOE to obtain definitions for the data points where disparities were found.

#### The Legislative Committee

**Charge:** To review proposed legislation related to child protection and make recommendations to the full Commission for action.

Membership: The Committee is led by co-chairs, Tania Culley, Esquire, Child Advocate, and Amanda Sipple,
OCA Office Manager. The membership includes representatives from the following agencies: DOJ, DFS, Family
Court, the Delaware House of Representatives, OCA and PCAD.

In FY15, CPAC Commissioners Senator Patricia Blevins and Representative Melanie George Smith introduced House Bill 136, which provides for the transfer of the Child Abuse and Neglect Panel from the Child Death, Near Death and Stillbirth Commission to CPAC. The transfer will ensure that Delaware remains in compliance with the requirements of federal law, providing greater assurance of continued federal funding under CAPTA, and that the cases are investigated with greater efficiency. This bill also addresses the subpoena process for CPAC.



CPAC also supported the following legislation championed by the Children's Department: House Bill 118, signed on July 10, 2015, expressly provides that a mandatory reporter of child abuse or neglect cannot rely upon a person with less direct knowledge to call the hotline; Senate Bill 56, signed on July 15, 2015, allows DSCYF to petition Family Court to compel an uncooperative parent or guardian to complete a drug evaluation or mental health evaluation, or a developmental screen for their child; Senate Bill 110, signed on July 27, 2015, allows the Office of Child Care Licensing to impose administrative fines for child care providers operating unlicensed; House Bill 116, signed on June 30, 2015, establishes the DSCYF Education Unit as a Local Education Agency for very limited purposes, qualifying DSCYF teachers for federal loan forgiveness and allowing the Unit to issue credits to the students who are completing coursework through the program; and Senate Bill 144, signed on August 11, 2015, which streamlines and improves the background check process for those who work with children.

The Legislative Committee also oversaw the Child Protection Registry Workgroup during FY15. This group worked in collaboration with the Family Court, DOJ, DFS, and OCA to develop training on the Child Protection Registry. This training, which occurred on January 26, 2015, explained the changes to the Registry that resulted from Senate Bill 181, legislation which CPAC supported last fiscal year.

#### The Permanency for Adolescents Committee

Charge: To improve outcomes for adolescents in foster care by developing best practices, policies, procedures and statutes which create lasting connections for adolescents, that exit them in a timely fashion from foster care with appropriate caregivers, that reduce the number of children with a goal of Alternative Planned Permanent Living Arrangement (APPLA), that pursue legal strategies for keeping connections, and that have appropriate placements for youth that create stability and success while in foster care. This Committee is not to duplicate the work of others, but should instead complement or fill gaps which still exist in Delaware's child protection system.

Membership: The Committee is led by co-chairs, Dr. Victoria Kelly, Director of DFS, and Judge Peter B. Jones
from Family Court. The membership includes representatives from the following agencies: CFF, CPRB, CASA,
DYOI, DOJ, DFS, DPBHS, Family Court, OCA, the Public Defenders Office (OPD) and the Youth Advisory
Council (YAC).



During the fiscal year, the Permanency for Adolescents Committee continued to address its charge through its workgroups. Two workgroups, Extended Jurisdiction and Permanency Options, were actively meeting while the Juvenile Expungements Workgroup was disbanded and replaced with the Another Planned Permanent Living Arrangement (APPLA) workgroup. The first workgroup, Extended Jurisdiction, drafted revisions to the Extended Jurisdiction statute, with the help of OCA and Family Court, to require a petition to be filed at the youth's request rather than a motion. It is anticipated that the new procedure will not only recognize the youth as an independent adult, but it will emphasize that the youth must provide consent for extended jurisdiction services. The bill will be finalized in FY16. The Workgroup also developed an Extended Jurisdiction training that was offered as a workshop at the Protecting Delaware's Children Conference in March 2015. The second workgroup under this Committee, Permanency Options, finalized its training on Permanency Options which was also offered at the Protecting Delaware's Children Conference. The final workgroup, APPLA, began meeting in December 2014 to develop a plan for the younger youth with a permanency plan of APPLA.

On September 29, 2014, the federal Preventing Sex Trafficking and Strengthening Families Act was signed into law, which eliminated APPLA as a permanency plan for children under the age of 16 effective September 29, 2015. In January 2015, the Workgroup reviewed six children between the ages of 11 and 13 with a permanency plan of APPLA. The group did a retrospective review to determine what could have been done to prevent those children from having a permanency plan of APPLA and to identify if there is anything that can be done now. Following the review, the group developed an action plan which listed the recommendations under two categories, permanency options and court hearings. The action plan was approved by the Committee and implementation began.

In addition to its workgroups, the Committee continues to review juvenile expungements and evaluate statistics for youth with the permanency plan of APPLA, dual status youth, and youth entries into DSCYF Custody via the juvenile justice or mental health systems. Through continued evaluation of statistics involving adolescents, the Committee can effectively seek changes that will have a positive impact on the system, for adolescents.

#### The Joint Committee on Substance-Exposed Infants/Medically Fragile Children

Charge: To a) establish a definition of medically fragile child, inclusive of drug-exposed/addicted infants; b) draft a statute to mirror the definition as needed and consider adding language to the neglect statute; c) recommend universal drug screenings for infants in all birthing facilities in the state; d) review and revise the DFS Hospital High Risk Medical Discharge Protocol to include all drug-exposed and medically fragile children. It shall include: responding to drug-exposed infants and implementing the Plan of Safe Care per CAPTA; and, involving the MDT in ongoing communication and collaboration for medically fragile children; referring medically fragile children to evidence-based home visiting programs prior to discharge; and, reviewing and including the Neonatal Abstinence Syndrome (NAS) Guidelines for Management developed by Delaware Healthy Mother & Infant Consortium's (DHMIC) Standards of Care Committee.

Membership: The Committee is led by co-chairs Allan De Jong, M.D., Medical Director of the Children at Risk CARE Program at Alfred I duPont Hospital for Children, and Jennifer Donahue, Esquire, Investigation Coordinator. The membership includes representatives from the following agencies: Bayhealth Medical Center, Beebe Healthcare, CDNDSC, Child Development Watch, Children & Families First, Christiana Hospital, Connections, DOJ, DFS, Division of Public Health, March of Dimes, and OCA.

The Joint Committee on Substance-Exposed Infants/Medically Fragile Children was created and met once during FY15. This Joint Committee was formed to respond to a number of recommendations that arose from the Joint CPAC/CDNDSC Retreat on January 22, 2015. These recommendations have been adopted as this committee's charge. However, it has been identified that the opiate/heroin epidemic is causing a significant, detrimental effect on a significant number of infants born in Delaware. As such, the members decided to limit the focus of the committee to substance-exposed infants at this time and to re-visit the issues surrounding medically fragile children in the near future. At its May 2015 meeting, the Joint Committee members raised various concerns and issues surrounding drug-addicted pregnant mothers and NAS infants. The group began by reviewing the Neonatal Abstinence Syndrome Guidelines for Management developed by DHMIC, which recommend screening of all infants born to mothers who have had a positive drug screen during their pregnancy, all infants born to mothers with no prenatal or minimal prenatal care, and any infant the health care provider feels has a high risk of being exposed to substance abuse during the pregnancy. These



guidelines have been approved, distributed to and adopted by all birthing hospitals in Delaware.

At future meetings, the Joint Committee plans to review hospital screening protocols for mothers and infants, DFS policies and procedures related to substance-exposed infants, the Hospital High Risk Medical Discharge Protocol, and legislative changes mirroring the federal Child Abuse Prevention and Treatment Act related to infants born with and identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure.

#### **The Training Committee**

**Charge:** To ensure the training needs of the child protection system are being met through ongoing, comprehensive, multidisciplinary training opportunities on child abuse and/or neglect.

Membership: The Committee is chaired by Rosalie Morales, OCA Program Administrator. The membership
 includes representatives from the following agencies: A Better Chance for Our Children, CAC, CDNDSC, CASA,
 DSP, DOJ, DVCC, DSCYF, Family Court, and OCA.

CPAC's statewide training initiatives are monitored and evaluated by five workgroups under the Training Committee: Mandatory Reporting; ChildFirst/MDT; Joint Conference; Child Abuse and Neglect (CAN) Best Practices; and Cross-Education.

The first workgroup under the Training Committee is responsible for providing oversight of the existing mandatory reporting training programs for educators, medical professionals, general community and professional audiences, law enforcement and the DOJ. With the assistance of the Training Coordinator, the Workgroup maintains the number of professionals trained, evaluates and revises the programs, and develops curricula for other disciplines as needed. In terms of coordination, the DSCYF Center for Professional Development has been responsible for coordinating the mandatory reporting trainings for general/professional audiences and school personnel. Generally, mandatory reporting training programs do not require the use of CJA grant funds unless onsite training is requested by medical professionals. In such cases, a medical expert is paid a nominal fee to co-present the training with DSCYF or OCA staff. Since the statutory obligations to complete the training are unique for law enforcement and the DOJ, the training programs are directly provided by law enforcement agencies and/or DOJ. Police officers are obligated to complete the training as a requirement of initial employment per 11 <u>Del. C.</u> § 8404(a), and every Deputy Attorney General in the Criminal and Family Divisions is required to complete the training every three years per 29 <u>Del. C.</u> § 2511(a)(3).

Since July 2014, DSYCF and OCA staff have provided onsite training to 712 professionals using the mandatory reporting training for general audiences, titled *How to Identify and Report Child Abuse and Neglect in Delaware*. Additionally, 261 participants completed the online training and survey through OCA's online training system located at: <a href="http://ocade.server.tracorp.com">http://ocade.server.tracorp.com</a>.

Per the requirement of 14 <u>Del. C.</u> § 4123, fulltime teachers must receive one hour of training every year in the detection and reporting of child abuse. For this purpose, CPAC has partnered with DSCYF to develop the school training. During the fiscal year, DSCYF and OCA staff have provided the onsite school training, *How to Identify and Report Child Abuse and Neglect in Delaware: 2014-2015 School Training*, to 1,165 professionals. Additionally, approximately 7,799 teachers and other school staff completed the online training and survey.



Each year, OCA staff partners with DOE to make the training available on DOE's Blackboard course management system. DOE is responsible for providing the Workgroup with the number of professionals trained, while CPAC maintains and collects the evaluation results through Survey Monkey.

For initial employment and as part of the license renewal process, professionals covered under the Medical Practice Act and other healthcare providers are required to complete training on the recognition of child sexual abuse, physical abuse, exploitation, and domestic violence, as well as the reporting obligations under the Medical Practice Act and section 903 of Title 16. In January 2015, for the next round of license renewals for physicians, CPAC partnered with the Department of Professional Education at the Medical Society of Delaware (MSD) to revise the medical training, *Child Abuse Identification and Reporting Guidelines for Delaware Medical Providers*, and to obtain approval for CME credit. On March 11, 2015, Michael Sullivan from DFS and Gordon Reed, M.D., from Christiana Care Health System trained 41 medical professionals at an onsite training sponsored by MSD. Another 4,522 medical professionals completed the online training and survey through OCA's online training system located at: <a href="http://ocade.server.tracorp.com">http://ocade.server.tracorp.com</a>.

In addition to training professionals about identification and reporting of child abuse, CPAC has continued to focus on providing ongoing comprehensive training to those who investigate, prosecute or otherwise respond to reports of child sexual abuse, death, and near death cases. CPAC awarded several partial scholarships to members of the MDT to attend national conferences, including the 31th International Symposium on Child Abuse and Fourteenth International Conference on Shaken Baby Syndrome/Abusive Head Trauma. Locally, the ChildFirst/MDT Workgroup collaborated with the Gundersen National Child Protection Training Center (GNCPTC) to develop the three-day curriculum for the ChildFirst<sup>TM</sup> training program. Upon receiving approval from GNCPTC in October 2014, the Workgroup was tasked with planning the modified training program, now titled the *Multidisciplinary Child Abuse Investigative Team Training: A ChildFirst* Training, scheduled for October 26-28, 2015. The training will include the core components of the Child-First<sup>TM</sup> program with the exception of the forensic interview protocol. It will feature three additional components that are important for our first responders in Delaware: Minimal Facts or teaching first responders how to question children prior to the forensic interview at the CAC; the importance of the multidisciplinary team approach and teaching first responders about the MOU; and the medical aspects of child sexual abuse. A Save the Date was recently disseminated to MDT partners, and an update on the program will be provided in FY16.



The third workgroup under the Training Committee is responsible for planning and organizing the Protecting Delaware's Children Conference. On March 3-4, 2015, CPAC partnered with CDNDSC to host the biennial Protecting Delaware's Children Conference, which was primarily funded by the Federal Court Improvement Project and U.S. Department of Health and Human Services' Children's Justice Act grant. Approximately 524 professionals attended the two-day event geared towards law enforcement, prosecutors, judges, attorneys, case workers, therapists, educators, community



providers and medical professionals who regularly respond to allegations of child abuse and neglect in Delaware. It featured thirty-nine workshops from national and local experts who addressed multidisciplinary collaboration and various aspects of child abuse including: the neurodevelopmental, molecular, and behavioral effects of child maltreatment; vicarious trauma, compassion fatigue, and resilience; hoarding; decision-making in domestic violence-related custody disputes; social media usage in court proceedings; victimization and children with autism; protecting children in a digital world; human trafficking; and investigative strategies in child sexual abuse and child homicide cases. The workshops were also organized into five learning tracks: Legal, Trauma, Child Welfare Trends, Domestic Violence, and Investigation (featured day two only). A one-day Child Abuse Multidisciplinary Team Advanced Training Course was offered at the same time to first responders, which was facilitated by the National Children's Advocacy Center (NCAC). It was attended by 138 professionals with direct responsibility for the investigation and prosecution of child abuse cases and featured a discussion about best practices. Participants had the opportunity to work through case scenarios involving serious physical injury, death and sexual abuse cases, which was an introduction to the best practice protocols being developed in the revised MOU between DSCYF, CAC, DOJ, and the Delaware police departments.

CAN Best Practices, the fourth workgroup under the Training Committee, is responsible for revising the MOU to incorporate these best practice protocols. During FY15, research has been done on national best practices informing revisions to the MOU. The revised MOU will feature 7 different multidisciplinary response protocols for physical injury, serious physical injury, death, sexual abuse, neglect, juvenile trafficking, and child torture cases. The physical injury protocol has been drafted, and it will be brought to workgroup for approval in FY16. The revised MOU will be unveiled in January 2017.

The Training Committee's last workgroup, Cross-Education, was created after CPAC was assigned two training recommendations from the now inactive CPAC Mental and Behavioral Health Services to Children in Foster Care Committee, and from the Independent Review of the Earl Bradley case (the "Ammons Report"). The first recommendation, forwarded from the CPAC committee, pertained to the creation of Child Mental Health 101. In addition, the following recommendation was forwarded via the Ammons Report: Agencies, Boards and Commissions charged with child protection responsibilities should be cross-educated on what each respective entity does as a matter of course. Thus, the Cross-Education Workgroup was tasked with ensuring that fundamental cross-education training, on the roles and responsibilities of individual agencies, is available in different venues. Since the Workgroup began meeting, the following

agencies have developed training programs: CAC, Child Placement Review Board (CPRB), Division of Prevention and Behavioral Health Services, Division of Youth Rehabilitative Services, OCA, and Prevent Child Abuse Delaware. During the fiscal year, OCA engaged in a cooperative learning opportunity with students from the Delcastle Technical High School to provide narration for these programs. Upon completion of the voice narrations, these training programs will be made available on OCA's online training system.

Lastly, in FY15, two funding streams became available for the Protecting Delaware's Children Fund: "Stop Child Abuse" License Plate sales and Personal Income Tax contributions for special funds. Since new revenues were expected and fees were increasing at the Delaware Community Foundation, CPAC received approval to transfer the historically inactive fund to OCA. As a result, the Training Committee became responsible for governance of the fundraising efforts and the expenditure of funds held in the Protecting Delaware's Children Fund. The funds will be used exclusively for statewide child abuse prevention and awareness activities, including the annual public education campaign during Child Abuse Prevention and Awareness Month

The Stop Child Abuse license plate can be purchased online from the Division of Motor Vehicles at the following link: <a href="https://services.dmv.de.gov/public.ejs?command=SpecialPlate&bg=7">https://services.dmv.de.gov/public.ejs?command=SpecialPlate&bg=7</a>. There is an initial fee of \$50 and a renewal fee of \$40 each year in addition to the vehicle registration renewal fee. To make a donation to the Protecting Delaware's Children Fund, please see the Delaware Tax Booklet: <a href="http://revenue.delaware.gov/services/2014PITForms.shtml">http://revenue.delaware.gov/services/2014PITForms.shtml</a>. Directions for making contributions to special funds are listed on page 9 of the booklet, and a description of the fund is listed on the last page of the booklet.



Figure 6. Stop Child Abuse License Plate

### Children's Justice Act Task Force

The Child Abuse Prevention and Treatment Act (CAPTA) requires that states establish both a multidisciplinary Citizen Review Panel (CRP) and a Children's Justice Act (CJA) Task Force. In Delaware, CPAC serves as the federally mandated Citizen Review Panel and CJA State Task Force. Further information about each will be provided over the next few pages.

#### The Children's Justice Act Task Force

#### Background

The Children's Justice and Assistance Act of 1986 was a set of amendments to CAPTA, which were enacted to encourage states to adopt reforms to improve the legal and administrative handling of child abuse cases, particularly cases of child sexual abuse. The CJA amended the Victims of Crimes Act of 1984 to add to the funding available under the Crime Victim's Fund and required that specified portions of such funds be used for CJA Grants to states. CPAC became the CJA Task Force in FY 2008.

#### **Statutory Requirements**

The CJA provides grants to states to improve the investigation, prosecution and judicial handling of cases of child abuse and neglect, particularly child sexual abuse and exploitation. This also includes the handling of child fatality cases in which child abuse or neglect is suspected, along with some cases of children with disabilities and serious health problems who also are victims of abuse and neglect. To be eligible for CJA funds, states are required to establish and maintain a multidisciplinary task force (the "Task Force"). The Task Force is responsible for making policy and training recommendations to carry out the objectives of the grant, for conducting a comprehensive evaluation every three years of the state's child welfare system, and for making recommendations for improvement of those systems.

#### CPAC's CJA Task Force Accomplishments in FY 2015

- The Training Coordinator (a position funded under the CJA) provided mandatory reporting training to educators and general professional audiences; chaired the Cross-Education Workgroup; staffed the Abuse Intervention Committee, Training Committee, and ChildFirst MDT Work Group; oversaw the registration and prepared all the materials and evaluations for the Protecting Delaware's Children Conference; provided technical support to users of OCA's online training system; and maintained the Child Welfare Training Calendar.
- ♦ The Child Torture Committee began meeting in October 2014 to research and develop best practices and trainings to help professionals recognize and appropriately respond to cases of child torture.
- Partial scholarships were provided to members of the MDT to attend the 31th International Symposium on Child Abuse, Fourteenth International Conference on Shaken Baby Syndrome/Abusive Head Trauma, and the 29th Annual San Diego International Conference on Child and Family Maltreatment.
- ♦ The Protecting Delaware's Children Conference was held on March 3-4, 2015 and approximately 524 professionals attended.
- Over 14,500 educators, healthcare providers and members of the public were trained on their mandatory reporting obligations.

#### Reports

The CJA Annual Progress Report and Grant Application and 2015-2017 Three-Year Assessment Report is available at: <a href="http://courts.delaware.gov/childadvocate/docs/2015CJA-Application Attachments.pdf">http://courts.delaware.gov/childadvocate/docs/2015CJA-Application Attachments.pdf</a>.

### Citizen Review Panel

#### **Citizen Review Panel**

#### **Background**

In 1996, Congress amended CAPTA and required states that receive grants for Child Abuse and Neglect Prevention and Treatment Programs to establish Citizen Review Panels ("CRP") by July of 1999 in order to continue receiving funding. The amendments allowed states to designate one or more existing entities established under State or Federal law, such as child fatality panels. From 1995 through 2004, CDNDSC served as Delaware's CRP. Then, in 2004, CPAC was designated as the CRP.

#### **Statutory Requirements**

Although CAPTA defines the functions of the CRP broadly and generally, it requires panels to meet at least quarterly and to maintain confidentiality. More importantly, the purpose of CRPs is to evaluate the child protection agency's performance in four key areas: the state CAPTA Plan; coordination with Title IV-E foster care and adoption programs; review of child fatalities and near fatalities, and; to require responses to the recommendations from those reviews. CAPTA also mandates that CRPs examine the policies, procedures and practices of the child protection agencies and gives panels the authority to examine specific cases, where appropriate.

#### **Child Fatalities and Near Fatalities**

CDNDSC, through its Child Abuse and Neglect (CAN) Panel, is responsible for investigating and reviewing the facts and circumstances of all cases of child death or near death due to abuse or neglect. Within six months of the incident, a thorough review of the relevant facts and circumstances of the near death or death is completed, while protecting the integrity of any criminal prosecution of the case. Upon the conclusion of the criminal investigation, an updated review is conducted to discuss information not available to the Panel during the first review. During a review of a case, the Panel may develop findings or recommendations based on one of two reasons: 1. it is determined that system practices or conditions impacted the child death or near death incident; or 2. the system practices or conditions are not the proximate cause of the death or near death incident, but relate to the facts or circumstances of the case and impact the safety or mortality of children. CDNDSC captures these recommendations along with the facts and circumstances of the case in either a Confidential Memo or a Public CAPTA Report. These documents are then submitted to CDNDSC for approval at its Commission Meetings. Once the reports and any corresponding findings or recommendations are formally approved, CDNDSC meets annually with CPAC to discuss the findings or recommendations from these reviews and to develop a path forward. Additionally, CPAC staff maintains a database of the approved findings or recommendations, as CPAC is required under CAPTA to do so.

#### Reports

CAPTA Reports, disclosing the facts and circumstances related to the child death and near death cases reviewed by the CAN Panel, are available at: <a href="http://courts.delaware.gov/childdeath/reports.htm">http://courts.delaware.gov/childdeath/reports.htm</a>

### **Opportunities for the Future**

In Fiscal Year 2015, CPAC accomplished much as both a federally mandated CRP and CJA State Task Force. As the CRP, CPAC staff participated in CAN Panel reviews and monitored recommendations from child death and near death reviews that were approved by CDNDSC. Further, at the Joint Retreat on January 22, 2015, 40 members from CPAC and CDNDSC reviewed 300 recommendations from child death and near death reviews and prioritized 18 system recommendations. These recommendations were captured in a Joint Action Plan that was approved by CPAC and CDNDSC at a joint meeting on May 23, 2015. CPAC will continue to provide oversight for the recommendations in the Joint Action Plan and ask agencies for updates as appropriate at its quarterly meetings. CPAC Commissioners also introduced legislation to transfer the CAN Panel from CDNDSC to CPAC.

In its State Task Force role, CPAC submitted its CJA Annual Progress Report and Grant Application and 2015-2017 Three-Year Assessment Report to the Administration on Children, Youth and Families in May 2015. As a result, CPAC was able to establish its priorities for the next three years, which included 16 recommendations from the Joint Action Plan related to policy and training. With these goals established, the Abuse Intervention Committee will continue to meet twice a year to provide oversight of these activities. In addition, to remain eligible for CJA grant funds, CPAC will submit an Annual Progress Report and Grant Application in FY16. At the same time, the Training Committee, with the support of its workgroups and the Training Coordinator, will carry out the training initiatives identified in the federal grant application, including unveiling the three-day curriculum for *Multidisciplinary Child Abuse Investigative Team Training: A ChildFirst Training* and the work of the CAN Best Practices Workgroup.

The Child Abuse Medical Response Committee, which was created in FY15, will begin meeting in the next fiscal year to develop guidelines for child medical evaluations and a methodology for identifying, training, supporting and sustaining a statewide network of medical professionals who have received specialized training in the evaluation and treatment of child abuse.

The remaining CPAC Committees have identified future goals of their own. In Fiscal Year 2016, the Data Utilization Committee will present quarterly reports to CPAC, which establish system issues and/or trends in the data submitted by child welfare partners. Meanwhile, the Education Committee plans to make progress with its recommendations to support the educational success of children in foster care and to provide additional resources to child welfare and educational professionals. The Permanency for Adolescents Committee will continue to address the barriers for achieving permanency, and work with the Legislative Committee to support related legislation.

Over the next year, CPAC, through its various committees, will prioritize these goals while maintaining its commitment to current initiatives. CPAC will also continue its collaborative affiliation with CDNDSC by meeting annually to monitor and/or implement findings or recommendations from the state's child death and near death reviews. Finally, CPAC will strive to foster the collaborative relationships between its child welfare partners to ensure safety, well-being and permanency for all children in Delaware's child protection system.



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